

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 07-01-2021, and ending 06-30-2022

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
WEST YELLOWSTONE FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 255

City or town, state or province, country, and ZIP or foreign postal code
WEST YELLOWSTONE, MT 59758

D Employer identification number
81-0494366

E Telephone number
(406) 640-0038

G Gross receipts \$ 489,595

F Name and address of principal officer:
PO BOX 255
WEST YELLOWSTONE, MT 59758

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WESTYELLOWSTONEFOUNDATION.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1992 **M** State of legal domicile: MT

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO STRENGTHEN THE SENSE OF COMMUNITY AND TO ENHANCE THE ECONOMIC VITALITY IN WEST YELLOWSTONE AND HEBGEN LAKE BASIN, MONTANA.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	11
	6 Total number of volunteers (estimate if necessary)	6	35
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	
	Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		301,000	459,265
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		7,768	12,231
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		20,916	11,849
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		-28	-7,211
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		329,656	476,134
14 Benefits paid to or for members (Part IX, column (A), line 4)		113,894	150,330
Net Assets or Fund Balances	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	75,290	93,854
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	77,548	225,331
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	266,732	469,515
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	62,924	6,619
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	1,890,697	1,796,160
	22 Net assets or fund balances. Subtract line 21 from line 20	15,511	834
		1,875,186	1,795,326

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: ***** Date: 2023-05-12

BETH SERIAK Chairman
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Check if self-employed PTIN P00427328

Firm's name ▶ Rudd & Company PLLC Firm's EIN ▶ 82-0467399

Firm's address ▶ 3805 Valley Commons Drive Suite 7
Bozeman, MT 59718 Phone no. (406) 585-3393

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No