** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Inspection

Α	For the	2023 calendar year, or tax year beginning	and	ending		
В	Check if applicabl	C Name of organization			D Employer identifie	cation number
	Addre	$\mathbb{R}^{\mathbb{R}}$ THE NATIVE WAYS FEDERATIO	N INC			
	Name chang	5	21.0		32-02488	92
	Initial return	Number and street (or P.O. box if mail is not delivered		Room/suite	E Telephone number	
	Final return	101 FIFTH STREET EAST		2400	612-429-	
	termin ated		r foreign postal code		G Gross receipts \$	1,230,952.
	Amen	SI PAUL, MIN SSIUI			H(a) Is this a group re	
	Application pendir		BAD HEART BUI	LL	for subordinates	? Yes X No
_		SAME AS C ABOVE			H(b) Are all subordinates in	cluded? Yes No
<u>1</u>	Tax-ex		nsert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions
	Websi				H(c) Group exemptio	
		organization: X Corporation Trust Associate	tion Other	L Year	of formation: 2008 N	1 State of legal domicile: MN
P	art I	Summary				
ø	1	Briefly describe the organization's mission or most signi				
Governance		EXPAND INFORMED GIVING TO NA				
erne	2	Check this box if the organization discontinue				_
Š	3	Number of voting members of the governing body (Part	, , , , , , , , , , , , , , , , , , , ,		3	6
8	4	Number of independent voting members of the governing				6
es	5	Total number of individuals employed in calendar year 2				4
Activities &	6	Total number of volunteers (estimate if necessary)				6
Act	7 a	Total unrelated business revenue from Part VIII, column				0.
_	b	Net unrelated business taxable income from Form 990-T	, Part I, line 11			0.
					Prior Year	Current Year
e	8				39,461. 13,676.	1,219,689.
len.	9					8,342.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and			1,095.	0,342.
	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,			54,232.	1,230,952.
_		Total revenue - add lines 8 through 11 (must equal Part			0.	1,230,932.
		Grants and similar amounts paid (Part IX, column (A), lin			0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line			282,652.	384,364.
ses	15	Salaries, other compensation, employee benefits (Part I)			0.	0.
Expenses	loa	Professional fundraising fees (Part IX, column (A), line 11	17,9	1.8	0.	0.
X	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-2			71,073.	145,042.
	''	Total expenses. Add lines 13-17 (must equal Part IX, col			353,725.	529,406.
		Revenue less expenses. Subtract line 18 from line 12			-299,493.	701,546.
	<u>19</u>	nevertue less expenses. Subtract line to from line 12 .		Be	ginning of Current Year	End of Year
its c	20	Total assets (Part X, line 16)			1,134,911.	1,876,977.
ASSE	21	T			32,825.	73,345.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 2			1,102,086.	1,803,632.
P	art II	Signature Block				
Unc	ler pena	Ities of perjury, I declare that I have examined this return, includ	ling accompanying schedules	s and stateme	nts, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is b	ased on all information of wh	nich preparer	has any knowledge.	
Sig	n	Signature of officer			Date	
He	re	CARLY BAD HEART BULL, EXECUT	IVE DIRECTOR			
		Type or print name and title				
		Print/Type preparer's name Prep	arer's signature		Date Check Check	PTIN
Pai	d		IDY HARDEN, CI	PA 0	8/15/24 self-employ	
Pre	parer	Firm's name SDK CPA			Firm's EIN 4	1-1680240
Use	Only	Firm's address 100 WASHINGTON AVE S				
		MINNEAPOLIS, MN 5540	1		Phone no. 61	<u>2-332-5500</u>
Ма	y the IF	RS discuss this return with the preparer shown above? S	ee instructions			X Yes No

32-0248892

Га	Statement of Frogram Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	NATIVE WAYS FEDERATION'S MISSION IS TO ACTIVATE AND EXPAND INFO	RMED
	GIVING TO NATIVE-LED NONPROFITS IN INDIAN COUNTRY THROUGH DONOR	
	EDUCATION AND ADVOCACY.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by e	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section of th	penses, and
	revenue, if any, for each program service reported.	
4a		<u>2,921.</u>)
	IN 2023, NWF EDUCATED AND ADVISED FOUNDATIONS AND PHILANTHROPY	
	ORGANIZATIONS ON THE IMPORTANCE OF INVESTING IN NATIVE COMMUNIT	
	FOCUSED ON BUILDING RELATIONSHIPS AND PARTNERSHIPS WITH NATIVE-	LED AND
	OTHER ORGANIZATIONS IN THE NONPROFIT AND PHILANTHROPY SECTOR IN	
	FURTHERANCE OF ITS MISSION. FOR EXAMPLE, NWF CONTINUED A FOCUS-	
	INITIATIVE WHICH BROUGHT TOGETHER A DIVERSE GROUP OF NATIVE NON	
	LEADERS ACROSS THE COUNTRY TO PARTICIPATE IN FACILIATED DISCUSS	
	THE TOPIC OF DETERMINING THE NECESSARY ELEMENTS OF A THRIVING N	
	NONPROFIT SECTOR. FOLLOWING AN IN-PERSON SESSION, THE REPORT TE	
	WRITING A REPORT TO SHARE OUT THE FINDINGS FROM THE DISCUSSIONS	. (SEE
	SCHEDULE O.)	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	1
70	(Vode:) (Liveride \$\pi) (Nevertide \$\pi	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 487,598.	
	· · · · · · · · · · · · · · · · · · ·	- 000 (

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			l
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0		
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	F		
124	Schedule D, Parts XI and XII	12a		X
h	, , , , , , , , , , , , , , , , , , ,	IZa		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	106		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	٠		_V
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
		-		-

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Form 990 (2023) **Part IV** | Che

art IV	Checklist of Required Schedules (continue)	۵)

 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current		_X_
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		
Schedule J		_X_
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		v
Schedule K. If "No," go to line 25a		_X_
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		Х
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		
Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current		
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,		
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		<u>X</u>
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,		
instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		
"Yes," complete Schedule L, Part IV		_X_
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		<u>X</u>
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If		
"Yes," complete Schedule L, Part IV		<u>X</u>
29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		<u>X</u>
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		v
contributions? If "Yes," complete Schedule M 30		<u>X</u>
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		х
Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		Х
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		
Part V, line 1		Х
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		
If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		
Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance	X	
Part V Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response or note to any line in this Part V		<u></u>
do Ententho number una stadio have 0 of Form 1000 Entent 0 March and Parkly	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 4 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
(gambling) winnings to prize winners?	Х	

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Form 990 (2023) THE NATIVE WAYS FEDERATION INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0	·	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other at	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account,	count)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction				X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				- V
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv				X
b	•		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required			x
	to file Form 8282?	7.1	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7e 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For				
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		7		
			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the agree of the constitution and the constitution that the distribution and the constitution (1990)		9a		
b			9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	11a	_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the				
b	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c	-		
		100	14a		х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i>			1	_
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerations.			1	
-	excess parachute payment(s) during the year?		15	1	x
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	ivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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Par	TVI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	"No" i	espon	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.		•	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MN			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	CARLY BAD HEART BULL - 612-429-0417			
	101 5TH ST E, SUITE 2400, ST PAUL, MN 55101			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization	nor any related	orga	niza	tion	con	nper	nsat		irector, or trustee.	
(A)	(B)			_ ((C)	_		(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)				one	Reportable compensation	Reportable	Estimated
	hours per	box				is bot	h an		compensation	amount of
	week	-	T a		T	T	T	from	from related	other
	(list any hours for	directo				L		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e 0 r (stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	10001120)	and related
	below	Individual trustee or director	Institutional trustee	la la	Key employee	Highest compensated employee	je j	,		organizations
	line)	Indiv	Instil	Officer	Key	High	Former			
(1) CARLY BAD HEART BULL	40.00									
EXECUTIVE DIRECTOR				Х				124,855.	0.	21,745.
(2) SARAH ECHOHAWK	0.60									
VICE CHAIR		Х		Х				0.	0.	0.
(3) MICHAEL E ROBERTS	0.60									
TREASURER		Х		Х				0.	0.	0.
(4) SHANNON O'LOUGHLIN	0.30									
DIRECTOR		Х				_		0.	0.	0.
(5) JOHN E ECHOHAWK	0.30									
DIRECTOR		Х						0.	0.	0.
(6) SARAH KASTELIC	0.30									
SECRETARY		Х		Х				0.	0.	0.
(7) CHERYL CRAZY BULL	1.20							_	_	_
CHAIR		Х		Х				0.	0.	0.
						_				
		-								
						_				
		-								
						_	_			
		-								
						-	-			
		-								
-						-				
		-								
	1					\vdash	<u> </u>			
		-								
						\vdash	<u> </u>			
		1								
	+	1	\vdash		\vdash	+	<u> </u>			
		1								
-	1					\vdash	\vdash			
		1								
		<u> </u>		<u> </u>	<u> </u>	1	<u> </u>	1	l	000

Part VII Se	ction A. Officers, Directors, Trus		oloy	ees,			ghes	t C		s (continued)	—		
	(A)	(B)			_ (0				(D)	(E)		(F)	
	Name and title	Average	(do		Posi		ነ than c	ne	Reportable	Reportable		Estimat	ted
		hours per	box	, unles	ss per	son i	s both	an	compensation	compensation		amoun	t of
		week		Cer an	a a a	recto	r/trust	ee)	from	from related		othe	
		(list any	Individual trustee or director						the	organizations		compens	
		hours for related	or di	e e			Highest compensated employee		organization	(W-2/1099-MISC/	'	from tl	
		1	stee	truste		ao	pensi		(W-2/1099-MISC/	1099-NEC)		organiza	
		organizations below	ıal tr.	onal		ploye	com		1099-NEC)			and rela	
		line)	divid	Institutional trustee	Officer	key employee	ghest	Former				organizat	tions
			드	드	Of	Ke	를 표	요			+		
			-										
											+		
											\dashv		
											\dashv		
											\perp		
				Щ							\perp		
											\perp		
											\perp		
1b Subtotal		•							124,855.	0	١.	21,7	745.
	m continuation sheets to Part VI								0.		١.		0.
	ld lines 1b and 1c)								124,855.	0	١.	21,7	745.
	nber of individuals (including but n									000 of reportable			
	ation from the organization						,		· · · · · · · · · · · · · · · · · · ·				1
	.											Yes	No
3 Did the o	rganization list any former officer,	director, trusto	ee. k	ev e	mpl	ove	e. or	hia	hest compensated empl	ovee on			
	f "Yes," complete Schedule J for s	•		•		•	-	_	•	•		3	Х
	ndividual listed on line 1a, is the su												
•	ed organizations greater than \$150	•							-	•		4	х
	person listed on line 1a receive or a											4	+**
		•				•			· ·			_	Х
	to the organization? If "Yes." com	plete Schedule	e J to	or su	ich ŗ	oers	on .					5	
			larr	n al - :			n at -	o 11-	and was a six and	100 000 of		fue:	
	e this table for your five highest con										isatio	ווע irom	
tne organ	nization. Report compensation for	tne calendar ye	ear e	nair	ig w	itn c	or wi	nin: T		ear.	—	(0)	
	(A) Name and business	address	NT/	NATE:	,				(B) Description of s	envices	Co	(C) mpensatio	on
	Name and business	addicss	14(ONE	٠.			\dashv	Description of s	CIVICCS		прспван	
								\dashv					
								\dashv					
								_					
								_					
2 Total nur	nber of independent contractors (in	ncluding but n	ot lin	nited	l to t	thos	se lis	ted	above) who received mo	ore than			
\$100,000	of compensation from the organia	zation				C)						
												orm 990	(0000)

Form 990 (2023) THE NAT
Part VIII Statement of Revenue

			Check if Schedule O	conta	ains a re	esponse (or note to anv lin	e in this Part VIII			
								(A)	(B)	(C)	_ (D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
									function revenue	business revenue	sections 512 - 514
SS	1	<u> </u>	Federated campaigns			1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues			1b					
ية ق			Fundraising events			1c					
ffs,			Related organizations			1d					
ية إق						1e					
ons,			Government grants (contri			ie					
utic		T	All other contributions, gifts,	-	-	. 1	210 680				
章			similar amounts not included				219,689.				
ont		_	Noncash contributions included in I		_	1g \$		1 210 600			
O g		n	Total. Add lines 1a-1f					1,219,689.			
			HOMOD A D THMA				Business Code	1 001	1 001		
<u>c</u> e			HONORARIUMS		D 3 T 3		611600	1,921.	1,921.		
erv		b	EDUCATION AND	T.1	KAIN	IING	611600	1,000.	1,000.		
n S		С									
ran 3ev		d									
Program Service Revenue		е									
Δ			All other program service					2 221			
		g	Total. Add lines 2a-2f					2,921.			
	3		Investment income (include	ling o	dividen	ds, intere	st, and				
			other similar amounts)					8,342.			8,342.
	4		Income from investment o	f tax	-exemp	ot bond p	roceeds				
	5		Royalties								
					(i)	Real	(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
		С	Rental income or (loss)	6с							
		d	Net rental income or (loss)	<u></u>							
	7	а	Gross amount from sales of		(i) Se	curities	(ii) Other				
			assets other than inventory	7a							
		b	Less: cost or other basis								
e			and sales expenses	7b							
her Revenue		С	Gain or (loss)								
Pe		d	Net gain or (loss)								
ē			Gross income from fundraisir								
퉏			including \$	•	•						
			contributions reported on	line	1c). Se	e					
			Part IV, line 18		,	- 1					
		b	Less: direct expenses								
			Net income or (loss) from				•				
			Gross income from gamin								
	•	_	Part IV, line 19	-							
		h	Less: direct expenses								
			Net income or (loss) from								
			Gross sales of inventory, le								
	10	u	and allowances								
		h	Less: cost of goods sold								
			Net income or (loss) from								
			THE INCOME OF 11033/ 1101113	Juice	I IIIVE	oritory	Business Code				
ns	11	2					Buomess sous				
Miscellaneous Revenue	••	-									
lla ven											
Sce Be		۲ C	All other revenue								
Ξ			All other revenue								
		U	Total Add lines 11a-11d					1,230,952.	2,921.	0.	8,342.
	12		Total revenue. See instruction	IIIS				r,430,334•		ı •	0,044.

Section :	501(c)(3) and 501(c)(4) organizations must comple				
	Check if Schedule O contains a respons	e or note to any line in t (A)	his Part IX(B)	(C)	
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	ants and other assistance to domestic organizations				
an	d domestic governments. See Part IV, line 21				
2 Gr	ants and other assistance to domestic				
ind	dividuals. See Part IV, line 22				
3 Gr	ants and other assistance to foreign				
	ganizations, foreign governments, and foreign				
	dividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,	1.16 600	400 550	5 222	5 400
	ustees, and key employees	146,600.	133,772.	7,330.	5,498
	mpensation not included above to disqualified				
	rsons (as defined under section 4958(f)(1)) and				
	rsons described in section 4958(c)(3)(B)	477 040	4.50 505	2 726	
	her salaries and wages	175,919.	160,526.	8,796.	6,597
	nsion plan accruals and contributions (include				
sec	ction 401(k) and 403(b) employer contributions)				
	her employee benefits	39,468.	36,013.	1,974.	1,481 839
0 Pa	yroll taxes	22,377.	20,419.	1,119.	839
1 Fe	es for services (nonemployees):				
a Ma	anagement				
b Le	gal	950.	867.	48.	35
c Ac	counting	30,506.	27,836.	1,525.	1,145
d Lo	bbying				
e Pro	ofessional fundraising services. See Part IV, line 17 📙				
f Inv	vestment management fees				
g Ot	her. (If line 11g amount exceeds 10% of line 25,				
CO	lumn (A), amount, list line 11g expenses on Sch O.) 🔼	22,779.	20,785.	1,139.	855
2 Ac	lvertising and promotion	360.	328.	18.	14
3 Of	fice expenses	6,162.	5,624.	308.	230
4 Inf	formation technology				
5 Ro	pyalties				
	ccupancy	1,257.	1,147.	63.	47
	avel	14,589.	13,313.	729.	547
8 Pa	syments of travel or entertainment expenses				
for	r any federal, state, or local public officials				
9 Co	onferences, conventions, and meetings	3,700.	3,376.	185.	139
0 Int	erest				
1 Pa	ayments to affiliates				
	epreciation, depletion, and amortization	974.	888.	49.	37
3 Ins	surance	1,777.	1,621.	89.	67
ab lin am	her expenses. Itemize expenses not covered ove. (List miscellaneous expenses on line 24e. If e 24e amount exceeds 10% of line 25, column (A), nount, list line 24e expenses on Schedule 0.)				
	UTREACH AND EDUCATION _	51,630.	51,630.		
	UES AND SUBSCRIPTIONS	5,358.	4,890.	268.	200
c <u>B</u>	AD DEBT EXPENSE	5,000.	4,563.	250.	187
d					
e All	other expenses				
5 To	tal functional expenses. Add lines 1 through 24e	529,406.	487,598.	23,890.	17,918
6 Jo	int costs. Complete this line only if the organization				
rep	ported in column (B) joint costs from a combined				
od	ucational campaign and fundraising solicitation.				

Form **990** (2023)

Check here [

if following SOP 98-2 (ASC 958-720)

Form 990 (2023)

Part X | Balance Sheet

<u>Par</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,106,631.	1	1,365,058.		
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		20,209.	3	503,326	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri	bed in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
۲	9	Prepaid expenses and deferred charges			5,513.	9	7,009
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10	1,339.	2,558.	10c	1,584
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lir		12			
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		1 124 011	15	1 000 000	
	16	Total assets. Add lines 1 through 15 (must e		1,134,911.	16	1,876,977 73,345	
	17	Accounts payable and accrued expenses		32,825.	17	/3,345	
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, su		· ·		-00	
Lia	00	controlled entity or family member of any of t		22			
	23 24	Secured mortgages and notes payable to un Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,				24	
	25	parties, and other liabilities not included on li					
		(0		J. Complete Fart X		25	
	26	Total liabilities. Add lines 17 through 25			32,825.	26	73,345.
		Organizations that follow FASB ASC 958, o	check he	e X	<u> </u>		7.575=5
es		and complete lines 27, 28, 32, and 33.		· _			
auc	27				835,419.	27	978,132.
Bala	28				266,667.	28	825,500.
힏		Organizations that do not follow FASB ASG					
F.		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current fun			29		
Sets	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32				1,102,086.	32	1,803,632.
-	33	Total liabilities and net assets/fund balances			1,134,911.	33	1,876,977.

Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,23		
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,4	
3	Revenue less expenses. Subtract line 2 from line 1	3		1,5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,10	2,0	<u>86.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,80	3,6	32.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE NATIVE WAYS FEDERATION INC

 $Employer\ identification\ number\\ 32-0248892$

Pa	rt I	Reason for Public C	Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instructions.				
he	organ	ization is not a private found									
1	$\overline{\Box}$	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	Н										
3	H	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
		city, and state:									
5		An organization operated for		lege or university owner	or operate	ed by a go	vernmental unit describe	ed in			
		section 170(b)(1)(A)(iv). (C	Complete Part II.)								
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).				
7	X	An organization that normal	lly receives a substar	ntial part of its support fi	om a gove	ernmental	unit or from the general p	oublic described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)						
9		An agricultural research org				ed in coniu	inction with a land-grant	college			
_		or university or a non-land-g				-	-	-			
		university:	irant conege or agnor	artare (500 motraotions).	Lintor tino i	iarrio, orty	, and state of the conege	, 01			
40			lly receives (1) more:	than 22 1/20/ of its supp	ort from o	ontribution	a mambarahin fasa an	d aroog receipte from			
10		An organization that normal									
		activities related to its exem	•	· · · · · · · · · · · · · · · · · · ·				*			
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)								
11	Ш	An organization organized a	and operated exclusi	vely to test for public sa	fety.See	section 50)9(a)(4).				
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carry out the	purposes of one or			
		more publicly supported org	ganizations describe	d in section 509(a)(1) d	r section (509(a)(2).	See section 509(a)(3).	Check the box on			
		lines 12a through 12d that of	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and 12g.				
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving			
		the supported organization	on(s) the power to red	gularly appoint or elect a	maiority o	f the direc	tors or trustees of the su	upportina			
		organization. You must c			, ,						
h		Type II. A supporting orga			ion with its	s sunnorte	nd organization(s) by hav	vina			
		control or management of	•					-			
					arrie persor	iis iiiai coi	ntroi or manage the supp	oortea			
		organization(s). You mus						1 20			
С							• •	ed with,			
		its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.				
d			integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)			
		that is not functionally into	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and an attentiv	/eness			
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.				
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III				
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.					
f	Ente	er the number of supported o	organizations								
g		vide the following information		d organization(s).							
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	71		,			
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(,	(3,	(-,	(,	(-,	(4)
-	membership fees received. (Do not						
	include any "unusual grants.")		41,000.	52,724.	39,461.	130,689.	263,874.
2	Tax revenues levied for the organ-				-	-	-
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3		41,000.	52,724.	39,461.	130,689.	263,874.
	The portion of total contributions		,	,	,		
•	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						183,340.
6	Public support. Subtract line 5 from line 4.						80,534.
	ction B. Total Support						00,001
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	(4) 23 :3	41,000.	52,724.	39,461.	130,689.	263,874.
	Gross income from interest,		,	- ,	,	, , , , , , , ,	
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources			4.	1,095.	8,342.	9,441.
9	Net income from unrelated business					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						273,315.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	26,347.
	First 5 years. If the Form 990 is for the						
	organization, check this box and stor	-		•			
Sed	ction C. Computation of Publi		centage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	livided by line 11, co	olumn (f))		14	29.47 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14	* * * * * * * * * * * * * * * * * * * *		15	33.10 %
	33 1/3% support test - 2023. If the o					ore, check this box	
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstanc	es test, check this l	oox and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te						T
b	10% -facts-and-circumstances test	_	· · · · ·		-		
	more, and if the organization meets th	ne facts-and-circun	nstances test, chec	k this box and sto	p here. Explain in	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	lifies as a publicly s	supported organiz	ation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	, 16b, 17a, or 1 <mark>7b</mark> ,	check this box ar	nd see instructions	·
						Schedule A	(Form 990) 2023

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2022 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

332023 12-21-23

Schedule A (Form 990) 2023

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3c		
4-		
4a		
1h		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ol-		
9b		
9с		
10a		
10b		

Pa	TIV Supporting Organizations (continued)			
		\rightarrow	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	1a		
	,	1b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
<u> </u>		1c		
Sec	tion B. Type I Supporting Organizations		1	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
_	supported englineations and multiported to each period adming the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
	tion of Type in Supporting Organizations	$\overline{}$	V	
4	Ways a majority of the expeniention's divectors by twistops during the toy year also a majority of the divectors		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	<u>. </u>		
	and 217 in Type in Cupper in g Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	, ,	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruc	ctions	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	Ba		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role placed by the organization in this regard.	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations					
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.							
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.							
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3.	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
	collection of gross income or for management, conservation, or							
	maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year):							
a	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
_7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see				
	instructions).	. •		•				

Schedule A (Form 990) 2023

Par	't V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	ued)	
Secti	ion D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exem				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	3	3		
4	Amounts paid to acquire exempt-use assets	-		4	
5	Qualified set-aside amounts (prior IRS approval required - prior IRS approval - prior IRS approval required - prior IRS approval - prior -	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.	3		8	
9	Distributable amount for 2023 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ns	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				
	LAGGGG II GIII 2020				

Schedule A (Form 990) 2023

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

THE NATIVE WAYS FEDERATION, INC. IS A NONPROFIT ORGANIZATION INCORPORATED

UNDER THE NAVAJO NATION IN 2008. FOUNDED BY SEVEN LEADING NATIONAL NATIVE

NONPROFITS, OUR MISSION IS TO ACTIVATE AND EXPAND INFORMED GIVING TO

NATIVE-LED NONPROFITS IN INDIAN COUNTRY THROUGH DONOR EDUCATION AND

ADVOCACY. IN 2019, THE DIRECTORS RECALIBRATED AND HIRED AN EXECUTIVE

DIRECTOR IN 2020. THE EXECUTIVE DIRECTOR'S FUNDRAISING EFFORTS ENABLED NWF

TO HIRE THREE ADDITIONAL STAFF MEMBERS AND EXPAND PROGRAMMING.

IN 2023 THE BOARD APPROVED A STRATEGIC PLAN, AND OUR WORK IS CURRENTLY FOCUSED IN THREE AREAS:

- 1) UNITING AND STRENGTHENING THE NATIVE NONPROFIT SECTOR TO BUILD A BASE
 OF NATIVE NONPROFITS FOR VISIONING, IDEATION, COLLABORATION, AND MUTUAL
 SUPPORT
- 2) ADVOCATING FOR AND WITH NATIVE-LED NONPROFITS TO ADVANCE NATIVE NONPROFITS VIA ADVOCACY, NARRATIVES AND REPRESENTATION
- 3) INFLUENCING PHILANTHROPIC SYSTEMS CHANGE TO INCREASE FUNDING AND

 ACCOUNTABILITY FOR NATIVE-LED ORGANIZATIONS

THE NATIVE WAYS FEDERATION, INC. (NWF) QUALIFIES AS A "PUBLICLY SUPPORTED"

ORGANIZATION DESCRIBED UNDER SECTION 170(B)(1)(A)(VI) AND THEREFORE AS AN

ORGANIZATION DESCRIBED IN SECTION 509(A)(1) BECAUSE IT SATISFIES THE

"FACTS AND CIRCUMSTANCES TEST" SET FORTH IN SECTION 1.170A-9(E)(3) OF THE

TREASURY REGULATIONS.

A. THRESHOLD REQUIREMENTS

NWF IS ELIGIBLE FOR A DETERMINATION OF PUBLIC SUPPORT UNDER THE FACTS AND

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

CIRCUMSTANCES TEST BECAUSE IT MEETS THE TWO THRESHOLD REQUIREMENTS FOR CONSIDERATION. FIRST, THE PORTION OF NWF'S SUPPORT THAT QUALIFIES AS ELIGIBLE PUBLIC SUPPORT IS APPROXIMATELY 29.47% IN 2023 AND 33.10% IN 2022 WHICH EXCEEDS THE 10% THRESHOLD REQUIRED UNDER TREASURY REGULATION SECTION 1.170A-9(E)(3)(I). NWF ALSO PASSED THE PUBLIC SUPPORT TEST IN 2016AND HAS PLANS TO INCREASE ITS FUNDING DIVERSITY IN THE COMING YEARS. SECOND, NWF'S OPERATIONS ENSURE THAT IT WILL CONTINUE TO ATTRACT NEW AND ADDITIONAL PUBLIC SUPPORT, AS REQUIRED BY TREASURY REGULATION SECTION 1.170A-9(E)(3)(II). NWF HAS AN ACTIVE FUNDRAISING PROGRAM TARGETING, INDIVIDUALS, PUBLIC FOUNDATIONS, AND FOR-PROFIT CORPORATIONS THAT SHARE ITS MISSION, AND AWARDS GRANTS CONSISTENT WITH ORGANIZATIONS QUALIFYING AS PUBLICLY SUPPORTED UNDER THE FACTS AND CIRCUMSTANCES TEST.

B. OTHER RELEVANT FACTORS

IN DETERMINING WHETHER NWF MEETS THE "FACTS AND CIRCUMSTANCES TEST," THE TREASURY REGULATIONS ALSO PROVIDE A LIST OF FACTORS THAT SERVE AS INDICIA OF WHETHER AN ORGANIZATION QUALIFIES AS "PUBLICLY SUPPORTED". THE HIGHER THE PERCENTAGE OF SUPPORT ABOVE THE 10% REQUIREMENT, THE LOWER THE ORGANIZATION'S BURDEN IN ESTABLISHING ITS PUBLICLY SUPPORTED NATURE WITH OTHER FACTORS. THESE ADDITIONAL FACTORS, DISCUSSED BELOW, PROVIDE FURTHER EVIDENCE THAT NWF SATISFIES THE FACTS AND CIRCUMSTANCES TEST. BECAUSE NWF'S PERCENTAGE OF SUPPORT IS 33.10% IN 2022 AND 29.47% IN 2023, NWF HAS A LESSER BURDEN IN PROVING ITS PUBLICLY SUPPORTED NATURE THROUGH THESE FACTORS.

SOURCES OF SUPPORT

NWF RECEIVES ITS PUBLIC SUPPORT FROM A WIDE VARIETY OF CONTRIBUTORS. 332028 12-21-23

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

DONORS INCLUDE TAX-EXEMPT ENTITIES AND INDIVIDUAL DONORS. NWF WILL

CONTINUE TO DEVELOP THEIR STRATEGIC FUNDRAISING EFFORTS, DEEPEN EXISTING

DONOR RELATIONSHIPS AND REACH OUT TO NEW DONOR PROSPECTS IN THE COMING

YEARS.

2. REPRESENTATIVE GOVERNING BODY

THE REPRESENTATIVE NATURE OF AN ORGANIZATION'S GOVERNING BODY IS ALSO A

FACTOR IN DETERMINING WHETHER IT QUALIFIES UNDER THE "FACTS AND

CIRCUMSTANCES TEST." IN CONSIDERING WHETHER A BOARD IS REPRESENTATIVE,

THEREBY SATISFYING THE OTHER THRESHOLD REQUIREMENT FOR HISTORY OF

LEADERSHIP IN THE COMMUNITY AND THEIR TRADITION OF PUBLIC SERVICE ARE

RELEVANT. THE BOARD INCLUDES REPRESENTATION FROM NONPROFIT LEADERS IN THE

UNITED STATES. IN 2023, THE FOLLOWING INDIVIDUALS SERVED ON NWF'S BOARD OF

DIRECTORS:

CHERYL CRAZY BULL, CHAIR AMERICAN INDIAN COLLEGE FUND

SARAH ECHOHAWK, VICE-CHAIR AMERICAN INDIAN SCIENCE AND ENGINEERING

SOCIETY

MICHAEL E. ROBERTS, TREASURER FIRST NATIONS DEVELOPMENT INSTITUTE

SARAH KASTELIC, SECRETARY NATIONAL INDIAN CHILD WELFARE ASSOCIATION

SHANNON O'LOUGHLIN, DIRECTOR ASSOCIATION ON AMERICAN INDIAN AFFAIRS

JOHN E. ECHOHAWK, DIRECTOR NATIVE AMERICAN RIGHTS FUND

3. PUBLIC PARTICIPATION IN PROGRAMS

UNDER SECTION 1.170A-9(E)(3)(VI)(C)(1) OF THE TREASURY REGULATIONS, ONE

FACTOR INDICATING THAT AN ORGANIZATION QUALIFIES AS "PUBLICLY SUPPORTED"

UNDER THE FACTS AND CIRCUMSTANCES TEST IS THAT "MEMBERS OF THE PUBLIC

HAVING SPECIALIZED KNOWLEDGE OR EXPERTISE, PUBLIC OFFICIALS, OR CIVIC OR

320228 12-21-23 Schedule A (Form 990) 2023

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

COMMUNITY LEADERS" PARTICIPATE IN, OR SPONSOR NWF'S PROGRAMS. NWF'S

FOUNDING ORGANIZATIONS ARE ALL LEADERS IN INDIAN COUNTRY, HEADING UP

NATIVE NONPROFITS ACROSS THE COUNTRY. NWF'S WORK IN EDUCATION AND ADVOCACY

IS FOCUSED ON INCREASING AWARENESS AND SUPPORT FOR NATIVE-NONPROFITS FROM

FOUNDATIONS AND PHILANTHROPY-SERVING ORGANIZATIONS. IN 2021, NWF BEGAN

PLANNING FOR A SERIES OF NATIVE-NONPROFIT FOCUS GROUPS, ULTIMATELY

LAUNCHED IN 2022. NWF IS BRINGING TOGETHER NATIVE LEADERS FROM DIVERSE

NONPROFITS ACROSS THE COUNTRY TO ENGAGE IN CONVERSATIONS RELEVANT TO

UNITING AND ADVOCATING FOR NATIVE-LED NONPROFITS AND INFLUENCING THE FIELD

OF PHILANTHROPY.

IN 2022, NATIVE WAYS FEDERATION LAUNCHED TWO PUBLIC GIVING DAYS

INITIATIVES, AIMED AT EDUCATING DONORS AND THE GENERAL PUBLIC ABOUT THE

IMPORTANCE OF SUPPORTING NATIVE-LED NONPROFITS BROADLY. THE GIVENATIVE

CAMPAIGN, FOCUSED ON EDUCATION AND AWARENESS BUILDING LEADING UP TO AND ON

GIVING TUESDAY, NOVEMBER 29, 2022. NATIVE NONPROFIT DAY WAS A NEW GIVING

DAY CAMPAIGN, ALSO FOCUSED ON EDUCATION AND AWARENESS BUILDING, LEADING UP

TO AND ON MAY 20, 2022. BOTH OF THESE CAMPAIGNS OFFER FREE RESOURCES AND

INFORMATION TO THE GENERAL PUBLIC AND ENCOURAGES BROAD PARTICIPATION. IN

2023, NWF LAUNCHED A NEW PUBLIC RESOURCE LISTING NATIVE-LED NONPROFITS

THAT ARE WORKING ACROSS INDIAN COUNTRY. NWF PLANS TO CONTINUE AND BUILD

UPON BOTH PUBLIC INITIATIVES IN FUTURE YEARS, WITH A GOAL OF INCREASING

KNOWLEDGE ABOUT THE IMPORTANCE OF LEARNING ABOUT AND SUPPORTING NATIVE-LED

NONPROFITS ACROSS THE COUNTRY.

III. CONCLUSION

IN SUMMARY, NWF HAS THE CHARACTERISTICS OF A "PUBLICLY SUPPORTED"

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

ORGANIZATION, BASED ON THE FACTS AND CIRCUMSTANCES TEST DESCRIBED IN

SECTION 1.170A-9(E)(3) OF THE TREASURY REGULATIONS. SPECIFICALLY, A SMALL

NUMBER OF DONORS DO NOT CONTROL THE NATIONAL ALLIANCE; RATHER NWF IS A

GROWING ORGANIZATION THAT BEARS MANY OF THE INDICIA OF A "PUBLICLY

SUPPORTED" ORGANIZATION, INCLUDING PUBLIC SUPPORT FROM A WIDE

CROSS-SECTION OF DONORS, WITH A REPRESENTATIVE GOVERNING BODY. MOREOVER,

NWF IS CONTINUING TO SEEK NEW SOURCES OF SUPPORT. ACCORDINGLY, NWF

QUALIFIES AS A "PUBLICLY SUPPORTED" ORGANIZATION DESCRIBED IN SECTION

170(B)(1)(A)(VI).

SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 05/31/20 AMOUNT: 100000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 07/06/21 AMOUNT: 597030.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 10/22/21 AMOUNT: 200000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 08/01/21 AMOUNT: 500000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 12/31/20 AMOUNT: 47000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 04/27/21 AMOUNT: 50000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 09/13/23 AMOUNT: 289000.

DESCRIPTION: EXPANSION OF CHARITABLE PURPOSE

DATE: 05/15/23 AMOUNT: 200000.

Schedule A (Form 990) 2023

	Part IV, Seline 1; Part	ction A, lines IV, Section E lines 5, 6, an	1, 2, 3b, 3c), lines 2 and	, 4b, 4c, d 3; Part	5a, 6, 9a, 9b, VIV, Section E, lines 2,	9c, 11a, 11 lines 1c, 2a	b, and 11c; a, 2b, 3a, an	Part IV, Sec d 3b; Part V	tion B, line ', line 1; Pa	es 1 and 2 art V, Sect	; Part IV, Se ion B, line 1	ection C,
DESCRI	PTION:	EXPANS	SION OF	F CHA	RITABLE	PURP	OSE					
DATE: (05/01/	23	AMOUI	NT:	600000.							

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Employer identification number

THE NATIVE WAYS FEDERATION INC 32-0248892 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

"N/A" in column (b) instead of the contributor name and address), II, and III.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization En

Employer identification number

THE NATIVE WAYS FEDERATION INC	
--------------------------------	--

32-0248892

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Name, address, and Zir + 4	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$5,000.	Person X Payroll

Schedule B (Form 990) (2023)

Name of organization Employer identification number

THE NATIVE WAYS FEDERATION INC

32-0248892

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ 200,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 10	Name, address, and ZIP + 4	Total contributions \$ 289,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

THE NATIVE WAYS FEDERATION INC

32-0248892

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	Il if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
323453 12-26		 \$	Schedule R (Form 990) (2023)

Schedule B (Form 990) (2023) Page 4

Name of organization **Employer identification number** 32-0248892 THE NATIVE WAYS FEDERATION INC Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE NATIVE WAYS FEDERATION INC

Employer identification number 32-0248892

Pai	Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		milar Funds or Ad	counts. Complete if the			
		(a) Donor advised	I funds	(b) Funds and other accounts			
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in w	riting that the assets held	d in donor advised fund	ds			
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No			
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any	other purpose conferr	ing			
	impermissible private benefit?			Yes No			
Pai	T II Conservation Easements. Complete if the organization	anization answered "Yes	on Form 990, Part IV	, line 7.			
1	Purpose(s) of conservation easements held by the organization						
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a histo	orically important land area			
	Protection of natural habitat		Preservation of a cert	ified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribu	tion in the form of a co	nservation easement on the last			
	day of the tax year.			Held at the End of the Tax Year			
а	Total number of conservation easements			2a			
b				2b			
С	Number of conservation easements on a certified historic structure.			2c			
d	Number of conservation easements included on line 2c acquir	red after July 25, 2006, a	nd not				
	on a historic structure listed in the National Register	•		2d			
3	Number of conservation easements modified, transferred, rele			ization during the tax			
	year						
4	Number of states where property subject to conservation ease	ement is located					
5	Does the organization have a written policy regarding the period	odic monitoring, inspection	on, handling of				
	violations, and enforcement of the conservation easements it l	holds?		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	d enforcing conservation	on easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enfo	orcing conservation ea	sements during the year			
8	Does each conservation easement reported on line 2d above s	satisfy the requirements	of section 170(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization reports conservation						
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's f	inancial statements the	at describes the			
	organization's accounting for conservation easements.						
Pai	t III Organizations Maintaining Collections of	Art, Historical Trea	sures, or Other S	imilar Assets.			
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its rever	nue statement and bala	ance sheet works			
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public						
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of						
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherance	e of public service,			
	provide the following amounts relating to these items.						
	(i) Revenue included on Form 990, Part VIII, line 1		\$				
	(m)			•			
2	If the organization received or held works of art, historical trea-	sures, or other similar as	sets for financial gain,	provide			
	the following amounts required to be reported under FASB AS						
а	Revenue included on Form 990, Part VIII, line 1			\$			
	Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2023			

332051 09-28-23

Par	t III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Similar	Assets	(continu	ued)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
3	Using the organization's acquisition, accessic								(00000000000000000000000000000000000000		
	collection items (check all that apply).	•	,	•	ū						
а	Public exhibition	c	i 🗌	Loan or exc	hange progra	am					
b	Scholarly research	6			0 1 0						
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	n how th	ev further th	ne organizatio	n's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit or	="		-	-						
	to be sold to raise funds rather than to be ma							\square	Yes		No
Pai	t IV Escrow and Custodial Arrang	gements Comple	te if the	organizatior					ne 9, or		
	reported an amount on Form 990, Par			_							
1a	Is the organization an agent, trustee, custodia	an, or other intermed	diary for	contribution	s or other as	sets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
		·	•						Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fo								Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	n has been	provided in P	art XIII					
Par	t V Endowment Funds Complete if	the organization ans	swered "	'Yes" on Fo	m 990, Part I	IV, line 10					
	·	(a) Current year		rior year	(c) Two year		d) Three ye	ears back	(e) Four	years b	ack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1	g, column (a)) held as:				•		
а	Board designated or quasi-endowment	•	%		•						
b	Permanent endowment	%									
С	Term endowment	 %									
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.									
За	Are there endowment funds not in the posses	•	ation tha	t are held ar	nd administer	ed for the)				
	organization by:	J							Γ	Yes	No
	(i) Unrelated organizations?										
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as requir	ed on S	chedule R?							
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization answered	l "Yes" on Form 990), Part IV	/, line 11a. S	ee Form 990	, Part X, li	ine 10.				
	Description of property	(a) Cost or o			or other (other)	` '	cumulated	d	(d) Book	value	
1a	Land										
	Buildings										
	Leasehold improvements										
	d Equipment 2,923. 1,339. 1,584							4.			
	Other				-		<u> </u>				
	. Add lines 1a through 1e. (Column (d) must ed		X. line 1	Oc. column	(B))				1	,58	4.
	 										

Schedule D (Form 990) 2023

	AYS FEDERATION	ON INC	32-0248892 Page
Part VII Investments - Other Securities			4.11
Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuat	ion: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Table (Col. (h) must squal Form 000, Port V, line 10, sel. (P))			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990 Part IV line	11c See Form 990 Part)	K line 13
(a) Description of investment	(b) Book value		ion: Cost or end-of-year market value
(1)	(b) Book value	(e) Mothod of Valdat	ion. eoc. or one or your market value
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets Complete if the organization answered "Yes" o	n Form 000 Part IV line	11d Soo Form 000 Part	V line 15
	Description	Tru. See Form 990, Fart	(b) Book value
	CSCIPTION		(b) Book value
<u>(1)</u>			
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
Part X Other Liabilities Complete if the organization answered "Yes" o		110 or 11f Coo Form 000	Dort V line 25
(a) Description of liability	TITOTHI 990, PAILIV, IIIIE	TIE OF THE SEE FORM 990	(b) Book value
			(b) Dook value
(1) Federal income taxes			
(2)			
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

(8) (9)

Schedule D (Form 990) 2023

UNCERTAIN TAX POSITIONS.

Schedule D	(Form 990) 2023	\mathtt{THE}	NATIVE	WAYS	FEDERATION	INC	32-0248892	Page 5
Part XIII	(Form 990) 2023 Supplemental Infor	mation	(continued)					
1 41174111	- Cappionicina inici		(continued)					

SCHEDULE 0 (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Inspection

OMB No. 1545-0047

Internal Revenue Service

THE NATIVE WAYS FEDERATION INC	32-0248892
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	ION:
THROUGH DONOR EDUCATION AND ADVOCACY. WE ENVISION A THRIVI	NG NATIVE-LED
NONPROFIT SECTOR, CHAMPIONING A DIVERSE COMMUNITY ROOTED I	N INDIGENOUS
VALUES AND WAYS OF BEING.	
OUR FOUNDING ORGANIZATIONS BEGAN MEETING IN 2006 AND OFFIC	IALLY
INCORPORATED OUR ORGANIZATION WITH THE NAVAJO NATION IN 20	08 WITH A
FOCUS ON PROMOTING ACCOUNTABILITY TO INDIGENOUS PEOPLE, IS	SUES AND
ORGANIZATIONS TOWARD MORE EQUITABLE PHILANTHROPY.	
OUR FOUNDING ORGANIZATIONS WORK ACROSS THE UNITED STATES,	AND HAVE A
BOARD IN WHICH A MAJORITY OF DIRECTORS ARE NATIVE AMERICAN	, ALASKA
NATIVE, NATIVE HAWAIIAN, OR PACIFIC ISLANDER.	
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMEN	TS:
NWF DEVELOPED AND IMPLEMENTED TRAINING SERIES FOR PHILANTH	ROPY-SERVING
ORGANIZATIONS AND FOUNDATIONS TO EDUCATE THEM ABOUT NATIVE	COMMUNITIES
AND INCREASE THEIR EFFECTIVENESS IN WORKING WITH, AND IN S	UPPORT OF,
NATIVE-LED NONPROFITS.	
THROUGH VARIOUS ADVISORY ROLES, NWF CONTINUED TO REPRESENT	THE NATIVE
NONPROFIT SECTOR IN POLICY, BEST PRACTICE AND SYSTEMIC CHA	NGE

CONVERSATIONS WITHIN THE BROADER NONPROFIT AND PHILANTHROPY SECTOR. IN 2023, NWF CONTINUED TWO CHARITABLE GIVING CAMPAIGNS, NATIVE NONPROFIT DAY ON MAY 19TH 2023, AND #GIVENATIVE ON GIVING TUESDAY IN NOVEMBER.

BOTH CAMPAIGNS FOCUSED ON EDUCATING PHILANTHROPY AND THE GENERAL PUBLIC

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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Name of the organization THE NATIVE WAYS FEDERATION INC

Employer identification number 32-0248892

ABOUT THE EXISTENCE AND IMPORTANCE OF NATIVE-LED ORGANIZATIONS AND CALLED FOR INCREASED SUPPORT FOR THE SECTOR.

2023 PROVIDED NWF THE OPPORTUNITY TO EXPAND UPON BUILDING THE INTERNAL
INFRASTRUCTURE OF THE ORGANIZATION. NWF HIRED A NEW TEAM MEMBER IN ITS
NEW PROGRAMS ASSOCIATE ROLE TO SUPPORT PROGRAMMATIC ACTIVITIES,
INCLUDING THE FOCUS GROUPS, PHILANTHROPY TRAININGS, NONPROFIT
WORKSHOPS, AND GIVING CAMPAIGNS. THE NEWLY PROMOTED OPERATIONS AND
PROGRAMS DIRECTOR CONTINUED TO SERVE A VITAL ROLE IN DEVELOPING AND
IMPLEMENTING NWF'S POLICIES AND PROCEDURES, STREAMLINING INTERNAL
PROCESSES, DEVELOPING STRATEGY, AND EXPANDING PROGRAM INITIATIVES. THE
COMMUNICATIONS MANAGER CREATED THE CAMPAIGN TOOLS FOR THE GIVING DAYS
INITAITIVES AND INCREASED THE ORGANIZATIONS SOCIAL MEDIA PRESENCE AND
PUBLIC VISIBILITY.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD VICE-CHAIR, SARAH ECHOHAWK, IS THE DAUGHTER OF BOARD MEMBER, JOHN E ECHOHAWK.

FORM 990, PART VI, SECTION B, LINE 11B:

EXECUTIVE DIRECTOR AND FINANCE COMMITTEE WILL REVIEW THE 990, RESOLVE ANY

COMMENTS OR QUESTIONS WITH TAX PREPARER AND CONTRACT ACCOUNTANT. EXECUTIVE

DIRECTOR WILL DISTRIBUTE THE 990 TO BOARD MEMBERS AND FINANCE COMMITTEE AND

WILL RECOMMEND APPROVAL TO FILE. BOARD WILL REVIEW 990, RESOLVE ANY

COMMENTS OR QUESTIONS, AND VOTE ON MOTION TO FILE.

FORM 990, PART VI, SECTION B, LINE 12C:

EMPLOYEES AND BOARD MEMBERS HAVE A RESPONSIBILITY TO ACT IN THE BEST

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INTEREST OF NWF AND ARE PROHIBITED FROM USING NWF AND THEIR POSITION FOR PRIVATE PROFIT OR BENEFIT, SUCH AS A CURRENT OR POTENTIAL OWNERSHIP OR INVESTMENT INTEREST, OR COMPENSATION ARRANGEMENT. THE PRIVATE INTEREST MAY

BE A DIRECT BENEFIT TO THE COVERED PERSON, OR AN INDIRECT BENEFIT THROUGH

ANOTHER PARTY TO WHOM THE COVERED INDIVIDUAL HAS A FAMILY, BUSINESS, OR

OTHER AFFILIATION.

KEY EMPLOYEES, SUCH AS THE EXECUTIVE DIRECTOR, AND BOARD MEMBERS MUST SUBMIT A WRITTEN DISCLOSURE ANNUALLY. ADDITIONALLY, WHEN A BOARD MEMBER WHO HAS A FINANCIAL OR PERSONAL INTEREST IN ANY MATTER COMING BEFORE THE BOARD, THEY WILL A) FULLY DISCLOSE THE NATURE OF THE INTEREST AND B) WITHDRAW FROM DISCUSSION, LOBBYING, AND VOTING ON THE MATTER.

ANY TRANSACTION OR VOTE INVOLVING A POTENTIAL CONFLICT OF INTEREST MAY BE APPROVED ONLY WHEN A MAJORITY OF DISINTERESTED BOARD MEMBERS DETERMINE THAT IT IS IN THE BEST INTEREST OF THE CORPORATION TO DO SO. RECORDS OF PROCEEDINGS: THE MINUTES OF MEETINGS AT WHICH SUCH VOTES ARE TAKEN WILL RECORD SUCH DISCLOSURE, ABSTENTION, AND RATIONALE FOR APPROVAL. AT THE START OF EACH BOARD MEETING, THE CHAIR WILL ASK IF ANY BOARD MEMBERS HAVE ANY CONFLICTS OF INTEREST TO DECLARE.

THE BOARD WILL INVESTIGATE ANY FAILURES TO DISCLOSE CONFLICTS OF INTEREST AND TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTIONS

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION ASSESSMENTS ARE DONE FOR EACH POSITION BASED ON EXPERIENCE, REGION, AND COMPARABLE ORGANIZATION SIZE.

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Name of the organization THE NATIVE WAYS FEDERATION INC	Employer identification number 32-0248892
FORM 990, PART VI, SECTION C, LINE 19:	
DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.	