			EXTENDED TO NOVEMBER 15, 2023 Short Form		OMB No. 1545-0047
Form <b>990-EZ</b>			Return of Organization Exempt From Incor	me Tax	
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except priv		2022
			Do not enter social security numbers on this form, as it may be made	e public.	
		of the Treasury enue Service	Go to www.irs.gov/Form990EZ for instructions and the latest inform	•	Open to Public Inspection
A	or the	e 2022 calendar	year, or tax year beginning , 2022, and endi	ing	
B	Check if	C No	ime of organization	D Employer ide	ntification number
	-i	ess change			
	Name		DWEST INTERNET COOPERATIVE EXCHANGE	27-368	81095
	Initial	i i otai i i	ber and street (or P.O. box if mail is not delivered to street address) Room/s		
	termi	inated PC	BOX 583782		36-5203
	Amer	a da i dianti	or town, state or province, country, and ZIP or foreign postal code	F Group Exemp	otion
			INNEAPOLIS, MN 55458-3782	Number	<b>7</b>
		nting Method:	Cash X Accrual Other (specify)	_	<b>X</b> if the organization is
	Vebsit			527 (Form 990).	to attach Schedule B
		of organization:	Corporation Trust Association X Other COOPERAT	/	
		0	b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (I		
			00 or more, file Form 990 instead of Form 990-EZ	s	196,705.
	art I	Revenue	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instructions for Part I	)
		Check if the	organization used Schedule O to respond to any question in this Part I		X
	1	Contributions,	gifts, grants, and similar amounts received	1	
	2		e revenue including government fees and contracts		196,705.
	3		les and assessments		
	4		ome		
			from sale of assets other than inventory 5a		
	b		ther basis and sales expenses		
	6 C	. ,	rom sale of assets other than inventory (subtract line 5b from line 5a)	<u>5c</u>	
	-	-	from gaming (attach Schedule G if greater than		
Revenue	۳	<b>*</b> (= <b>* * *</b>	6a		
evel	Ь	, , ,	from fundraising events (not including \$ of contributions		
č			ig events reported on line 1) (attach Schedule G if the sum of such		
		gross income a	Ind contributions exceeds \$15,000) 6b		
			penses from gaming and fundraising events6c		
			(loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
			inventory, less returns and allowances		
	1		pods sold 7b		
	, c		(loss) from sales of inventory (subtract line 7b from line 7a)		
	8		(describe in Schedule O) Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		196,705.
	10		ilar amounts paid (list in Schedule O)		190,703.
	11		) or for members		
s	12		compensation, and employee benefits		
nse	13		es and other payments to independent contractors		4,471.
Expenses	14	Occupancy, rer	it, utilities, and maintenance	14	31,932.
ш	15	Printing, public	ations, postage, and shipping	15	
	16	Other expenses	(describe in Schedule O) SEE SCHEDULE	O 16	3,920.
	17		s. Add lines 10 through 16		40,323.
ŝ	18		cit) for the year (subtract line 17 from line 9)		156,382.
sse	19		und balances at beginning of year (from line 27, column (A))		320 601
Net Assets	20	Other obspace	th end-of-year figure reported on prior year's return) in net assets or fund balances (explain in Schedule 0) <b>SEE SCHEDULE</b>	0 <u>19</u> 0 20	<u>320,601.</u> -229.
ž	20		und balances at end of year. Combine lines 18 through 20		476,754.
					· · · · ·

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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	1 990-EZ (2022) MIDWEST INTERNET COOPERAT	IVE EXCHANGE	2	27-	36810	<b>95</b> Page <b>2</b>
Pa	<b>art II</b> Balance Sheets (see the instructions for Part II)					
	Check if the organization used Schedule O to resp					X
		· · · · ·	A) Beginning of year		<u>`</u>	nd of year
22	Cash, savings, and investments		286,786.			447,860.
23	Land and buildings         Other assets (describe in Schedule 0)    SEE SCHEDULE O		22 015	23		20.004
24			33,815.			28,894.
25	Total assets	·····	320,601.	_		476,754.
26	Total liabilities (describe in Schedule 0)		0. 320,601.			0. 476,754.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) art III Statement of Program Service Accomplishmen	ts (see the instruction	ons for Part III)	27		
Г	Check if the organization used Schedule O to resp		,	X		penses for section
Who	t is the organization's primary exempt purpose? SEE SCHEDULE O	ond to any question	III UIIS Fait III		501(c)(3)	and 501(c)(4)
		nuisso, as manaurad by avaganas	In a clear and consist		organization others.)	ons; optional for
	ribe the organization's program service accomplishments for each of its three largest program se er, describe the services provided, the number of persons benefited, and other relevant informat		in a clear and concise			
28	TO IMPROVE INTERNET CONNECTIVITY, IN	ICREASE PERFO	RMANCE AND			
	REDUCE COST BY KEEPING INTERNET TRAF					
	MIDWEST.					
	(Grants \$ ) If this amount includes foreign g	rants, check here			28a	
29						
	(Grants \$) If this amount includes foreign g	rants, check here			29a	
30						
				_		
	(Grants \$ ) If this amount includes foreign g				30a	
31						
20	(Grants \$ ) If this amount includes foreign g				31a 32	
P	Total program service expenses (add lines 28a through 31a)           art IV         List of Officers, Directors, Trustees, and Key Er	nplovees (list each one e	wen if not compensated - se	De the i	<b>JZ</b>	r Part IV/
	Check if the organization used Schedule O to resp					
		(b) Average hours	(C) Reportable	( <b>d</b> ) He	alth benefits,	(e) Estimated
	(a) Name and title	per week devoted to	compensation (Forms W-2/1099-MISC/	` contr	ibutions to oyee benefit	amount of other
		position	1099-NEC) (if not paid, enter -0-)		and deferred pensation	compensation
RI	CHARD LAAGER					
DI	RECTOR & CHIEF MANAGER	5.00	0.		0.	0.
AN	THONY ANDERBERG					
	RECTOR, TREASURER & SECRETARY	2.00	0.		0.	0.
	ID FISHLER					
DI	RECTOR	3.00	0.		0.	0.
			+ +			
			+ +			
_						
_						
						990-EZ (2022)

Pa	<b>Other Information</b> (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Sch. O to respond to any question in this			37
	instructions for Part V.) Check in the organization used Sch. O to respond to any question in this	Fan	v Yes	X No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each			
	activity in Schedule O	33		х
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			
	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34	Х	
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported			
	on lines 2, 6a, and 7a, among others)?	35a	<b>NT /</b>	X
	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	A
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax	050		х
36	requirements during the year? If "Yes," complete Schedule C, Part III	35c		
30	complete applicable parts of Schedule N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.			
	Did the organization file Form 1120-POL for this year?	37b		Х
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made			
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Х
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	-		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A	-		
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u>			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any	401	N/	7
	of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on	40b	11/	<u>~</u>
U	T/2			
h	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 N / A Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed			
u	by the organizationN/A			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
-	transaction? If "Yes," complete Form 8886-T	40e		Х
41	List the states with which a copy of this return is filed <b>NONE</b>			
42 a	The organization's books are in care of OLSEN THIELEN Telephone no. 651-48			
	Located at 2675 LONG LAKE ROAD, ROSEVILLE, MN ZIP+4	5511	3-1	117
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		( <u> </u>	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	
	account)?	42b		Х
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	40		v
C	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> - Check here			
40	and enter the amount of tax-exempt interest received or accrued during the tax year 43	N/A		
		11/11		
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44a		Х
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			
	of Form 990-EZ	44b		Х
C	Did the organization receive any payments for indoor tanning services during the year?	44c		Х
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation			
	in Schedule O	44d		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Х
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b		(0000)
		Form 9	90-EZ (	(2022)

MIDWEST INTERNET COOPERATIVE EXCHANGE

232173 12-16-22

Form 990-EZ (2022)

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Form 990-EZ (	2022) MIDWEST INTERNET COOP	ERATIVE EXCHA	ANGE	27	-36810	95	Page 4
					_	Yes	s No
	organization engage, directly or indirectly, in political campai	-					
If "Yes,"	complete Schedule C, Part I					46	X
Part VI	Section 501(c)(3) Organizations Only						
	All section 501(c)(3) organizations must answer ques		•				
	Check if the organization used Schedule O to respon	nd to any question in this	Part VI	<u></u>			s No
7 Did the d	organization engage in lobbying activities or have a section 5	01/h) alaction in offect durin	a the tay year?		Г	103	
	complete Sch. C, Part II					47	
8 Is the or	ganization a school as described in section 170(b)(1)(A)(ii)?	If "Yes." complete Schedule	E			48	
	prganization make any transfers to an exempt non-charitable					19a	
	was the related organization a section 527 organization? $\ldots$					19b	
	e this table for the organization's five highest compensated $\epsilon$					h received	more
than \$10	0,000 of compensation from the organization. If there is nor	ie, enter "None."					
	(a) Name and title of each employee	(b) Average per week dev		ation (Forms Cor	Health benefits, ntributions to	(e) Estir amount o	
	NT / 2	per week dev positio	W-2/10	99-MISC/ employed	oloyee benefit s, and deferred	compens	
	N/A		100		ompensation		
-	e this table for the organization's five highest compensated i tion. If there is none, enter "None." ${f N/A}$	ndependent contractors who	each received more	than \$100,000 of	r compensatio	in from the	;
	Name and business address of each independent contractor		(b) Type of s	ervice	(c) C(	ompensatio	n
(-)			(2) ())) () ()			- portourie	
<b>d</b> Total nu	nber of other independent contractors each receiving over \$	100.000					
	organization complete Schedule A? <b>Note:</b> All section 501(c)(						
	ed Schedule A					Yes	No
	s of perjury, I declare that I have examined this return, inclu				ny knowledge		
•	nd complete. Declaration of preparer (other than officer) is t						
Sign	Signature of officer Date						
lere	RICHARD LAAGER, CHIEF MAN	AGER					
	Type or print name and title	· .			D.T		
	Print/Type preparer's name Preparer's	signature		Check if	PTIN		
Paid				self- employed		12500	
Preparer	RYAN VETTRUS, CPA RYAN VETTRUS, CPA RYAN VETTRUS, CPA RYAN VETRUS, CPA RYA	<u>/ETTRUS, CPA</u>		Firmle FIN	$1012 \\ 41-136$	<u>43596</u> 0831	)
Jse Only	Firm's address 2675 LONG LAKE RC			-	<u>41-136</u> 51-483		
	ROSEVILLE, MN 551			Phone no. 6	27-402	- F J G T	
lay the IRS d	iscuss this return with the preparer shown above? See instru				x	Yes	No
nay int ind u	וואטעט איז אינערוו אינער עוב ארבאמרבי אוטאון מטטעפי שלל וואנו			<u></u>		res rm 990-EZ	
					F0	330-EZ	. (2022

232174 12-16-22

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 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.		OMB No. 1545-0047
Name of the organization	MIDWEST INTERNET COOPERATIVE EXCHANGE		identification number 681095
FORM 990-EZ,	PART I, LINE 16, OTHER EXPENSES:		
DESCRIPTION C	F OTHER EXPENSES:		AMOUNT :
COMPUTER & IT			50.
BANK FEES			1,622.
BAD DEBT			193.
REGISTRATION	FEES		250.
INSURANCE			1,805.
TOTAL TO FORM	1990-EZ, LINE 16		3,920.
FORM 990-EZ,	PART I, LINE 20, CHANGES IN NET ASSETS:		
CHANGES IN NE	T ASSETS OR FUND BALANCES:		AMOUNT :
PRIOR PERIOD	ADJUSTMENT		-229.
FORM 990-EZ,	PART II, LINE 24, OTHER ASSETS:		
DESCRIPTION	BEG. OF	YEAR 1	END OF YEAR
ACCOUNTS RECE	IVABLE 4,	000.	-921.
OTHER DEPRECI	ABLE ASSETS 29,	815.	29,815.
TOTAL TO FORM	1990-EZ, LINE 24 33,	815.	28,894.
FORM 990-EZ,	PART III, PRIMARY EXEMPT PURPOSE - TO IMPROV	E INTERI	NET
CONNECTIVITY,	INCREASE PERFORMANCE AND REDUCE COST BY KEE	PING IN	<b>FERNET</b>
TRAFFIC LOCAL	IN THE UPPER MIDWEST.		
FORM 990-EZ,	PART V, LINE 34		
THE BYLAWS WE	RE AMENDED MARCH 11, 2022 IN FOUR WAYS: 1) T	O CAP TI	HE
	G QUORUM REQUIREMENT AT 10 MEMBERS. 2) TO CO duction Act Notice, see the Instructions for Form 990 or 990-EZ.		R dule O (Form 990) 2022

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232211 10-28-22

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Schedule O (Form 990) 2022	Page 2				
Name of the organization MIDWEST INTERNET COOPERATIVE EXCHANGE	Employer identification number $27 - 3681095$				
LONGSTANDING PRACTICE THAT MULTIPLE CORPORATE ENTITIES WHI	CH ARE				
AFFILIATED (I.E. COMMON OWNERSHIP) ONLY GET ONE VOTE. 3) REMOVE					
DUPLICATION IN THE "ACTION WITHOUT A MEETING" SECTION. 4) REPLACE THE					
PROCEDURE FOR DIRECTOR REMOVAL/REPLACEMENT TO CORRECT DEFICIENCIES BY					
RECOMMENDATION OF OUR LEGAL COUNSEL.					

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:

THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,

OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.

THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,

OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.