990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

<u>A</u>	For the 2021 c	alendar year, or tax year beginning , and ending											
В	Check if applicable:	C Name of organization TECUMSEH COUNCIL #439 BOY SCOUTS OF	D	Employer	identification number								
Ш	Address change AMERICA												
П	Name change Doing Dusiness as 31-0536966												
П	Number and street for P.O. box if mail is not delivered to street address) Initial return Number and street for P.O. box if mail is not delivered to street address) Room/suite E-Telephone number 937-325-6449												
H	Final return/	Final return/ City or town, state or province, country, and ZIP or foreign postal code											
닐	eminated SPRINGFIELD OH 45506 G Gross receipts \$ 1,336,95												
Ш	Amended return	F Name and address of principal officer.		01033 160									
П	Application pending	ROBERT LAVOIE JR.	this a group	return for s	ubordinates? Yes X No								
			re all subordi	inates inclu	uded? Yes No								
		SPRINGFIELD OH 45503	If "No," att	ach a list.	See instructions								
1	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527											
<u></u>			roup exempti	ion numbe									
<u>у</u> К	Form of organization:				M State of legal domicile: OH								
	0.500 St. 300 St.	Immary			The Court of Toggs Common 1								
	1												
a)		OTE SCOUTING PROGRAMS AND ACTIVITIES TO THE YOUTH.											
Š													
Governance	***********				* * * * * * * * * * * * * * * * * * * *								
Š	2 Check th	s box ▶ if the organization discontinued its operations or disposed of more than 25% of its r	net assets	s.									
	1	of voting members of the governing body (Part VI, line 1a)		3	46								
න් ග		of independent voting members of the governing body (Part VI, line 1b)		4	46								
ij		or independent voting members of the governing body (1 art vi, line 15) orber of individuals employed in calendar year 2021 (Part V, line 2a)		5	54								
Activities				6	875								
ĕ	1	nber of volunteers (estimate if necessary)		7a	0								
	I	elated business revenue from Part VIII, column (C), line 12		7b	0								
	b Net unre	ated business taxable income from Form 990-T, Part I, line 11	Prior Year	170	Current Year								
	8 Contribut	ons and grants (Part VIII, line 1h)	686,	735	627,973								
ne	0 Continual	conden revenue (Part VIII, line 2g)	199,		285,468								
Revenue	9 Program	service revenue (Part VIII, line 2g)											
Re	10 investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	$\frac{2}{137}$		-29,637 178,255								
	1	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,025,		1,062,059								
			,023,	0	1,002,009								
	I	nd similar amounts paid (Part IX, column (A), lines 1–3)		- 0	1								
	1	paid to or for members (Part IX, column (A), line 4)	595,	021	604,063								
es	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	393,	021	604,063								
Expenses	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)		- 0									
×	b Total fun	draising expenses (Part IX, column (D), line 25) ▶ 45,250	252	15/	421,194								
ш	I TOUTIET EX	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	353,		1,025,257								
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	948,										
	19 Revenue	less expenses. Subtract line 18 from line 12	g of Current	529 Year	36,802 End of Year								
200	S		,894,		1,953,392								
SSet	g 20 lotalass		145,		269,415								
Net Assets or	21 Total llab	ilities (Part X, line 26)	,749,		1,683,977								
		G of faire balaricos (Gabrace IIII) 27 Herri IIII 27 Herri IIII	, 1 = 5 ,	000	1,003,311								
		gnature Block		-6 1	audedee and hallof it is								
١.	Inder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and statements, and to complete. Declaration of preparer (other than officer) is based on all information of which preparer has any kn	o the best (nowledge.	or my kn	owledge and bellet, it is								
	ue, conect, and c	miplete. Declaration of preparer (other than officer) to backet on all minormation of milest preparer has any		-T									
				Date									
Si	ן ייפ	ignature of officer	DIDE		•								
He		ROBERT LAVOIE JR. EXECUTIVE	DIRE	CTOR									
		ype or print name and title		1	Teel DTN								
_	1	proparora mano	Date	Check	X if PTIN								
Pai	Paracic 1	1 200	06/24/22										
	eparer Firm's na		Firm's	s EIN 🕨	31-0787612								
Us	e Only	801 FALLS CREEK DR			000 000 1001								
	Firm's ac		Phon	e no.	937-898-1376								
Ma	y the IRS discus	s this return with the preparer shown above? See instructions			X Yes No								

orm 990 (2021) TECUMSEH COUNCI	L #439 BOY SCOUTS OF 31-05	536966 Page
	Service Accomplishments	
	ains a response or note to any line in this Pa	art III L
ETHICAL AND MORAL CHOI VALUES OF THE SCOUT OA	SCOUTS OF AMERICA IS TO F CES OVER THEIR LIFETIMES B TH AND LAW.	Y INSTILLING IN THEM THE
	ant program services during the year which were not lead to be serviced by the services and services and services and services are services.	
3 Did the organization cease conducting, or	make significant changes in how it conducts, any prog	□ v _{oo} 🔽 .
_	e accomplishments for each of its three largest progra	am services, as measured by
	organizations are required to report the amount of gra	
the total expenses, and revenue, if any, fo		
4a (Code:) (Expenses \$ TEACHING CHILDREN SELF PROGRAM.	968,467 including grants of \$ RELIANCE AND OTHER ACTIVE) (Revenue \$ 285,468 TIES THROUGH THE SCOUTING
·		
• • • • • • • • • • • • • • • • • • • •		
• • • • • • • • • • • • • • • • • • • •		
•		
·		
•		
4b (Code:) (Expenses \$	including grants of \$) (Revenue \$
N/A	g grante or ϕ	······································
~~		

* * * * * * * * * * * * * * * * * * * *		
4c (Code:) (Expenses \$ N/A	including grants of \$) (Revenue \$
,		
4d Other program services (Describe on Scho		
(Expenses \$	including grants of \$) (R	evenue \$)
4e Total program service expenses	MNX AN /	

Form 990 (2021) TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

rt IV Checklist of Required Schedules		Yes	N
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	L
Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	L
Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			l
candidates for public office? If "Yes," complete Schedule C, Part I	3		L
Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	z.J		Γ
election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		l
Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			T
assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		l
Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			t
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			l
"Von " complete Schodule D. Bort I	6		l
Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		t
	,	х	l
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		╀
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			l
complete Schedule D, Part III	8		1
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			l
custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			l
debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
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	
If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			Ī
VII, VIII, IX, or X, as applicable.			١
Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			l
annualists Cabacture D. David III	11a	х	l
Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	111		t
of its total according to Don't V. line 400 K lives II complete Ophodula D. Don't VIII	11b		l
	110		t
Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	11c		l
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		t
Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	١.,.		l
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	╀
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	╀
Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	ļ
Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
Schedule D, Parts XI and XII	12a	<u> </u>	ļ
Was the organization included in consolidated, independent audited financial statements for the tax year? If			l
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Ī
Did the organization maintain an office, employees, or agents outside of the United States?	14a		T
Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			T
fundraising, business, investment, and program service activities outside the United States, or aggregate			
	14b		
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	170		t
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15		l
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	10		t
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			l
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		╀
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			l
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		1
Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on			
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	ļ
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			١
If "Yes," complete Schedule G, Part III	19		1
Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		ſ
If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		T
			T
Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			

Form 990 (2021) TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IV column (A) line 20 If Wes II complete Colondals I Borte I and III	22		x
23	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	8 4		
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	_#		_
24 a	· · · · · · · · · · · · · · · · ·	<i>57</i>		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			v
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
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			i
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	25b		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	26		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			ĺ
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			ľ
	nersone? If "Ves." complete Schedule I. Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,		1886	NAC.
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	10.00	1.00	
a	"Yes," complete Schedule L, Part IV	28a		x
b	A family manufact of any individual described in line 2002 if "Ver" complete Cabadyla I. Dort IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		x
00	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29		25		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			37
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			77
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	34	<u> </u>	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			l
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
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.	38	X	L
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ū	reportable gaming (gambling) winnings to prize winners?	1c	X	
DAA	tokenware dammid (dammind) mininge to kines minister.	Fon		(2021)

Pa	irt 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 54			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated/pusiness gross income of \$1,000 or more during the year?	ે3a ∜		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	e d		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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 contributions or			
	gifts were not tax deductible?	6b	1,440 (to)	1,532,531
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	44/19	3/19/10	
	and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			v
	required to file Form 8282?	7c	1885-1881	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	V49,V34	4,554,770	v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Maria.	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	0.04034.4	****
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		11.000	Atta
	Did the annual of the section and the section of th	9a	- 10-11	
a b	Did the sponsoring organization make any taxable distributions under section 4906? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		JOHN .	545
a	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
a	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
C	Enter the amount of reserves on hand	4884	10000	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			77
	excess parachute payment(s) during the year?	15	7 (4.1,1	X
	If "Yes," see instructions and file Form 4720, Schedule N.			1200 H
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	VOI.V-	X
	If "Yes," complete Form 4720, Schedule O.	News	A plants	
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	47		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	W.	
	If "Yes," complete Form 6069.	gengerer.	1,74,7474	1444

Form 990 (202) TECUMSEH	COUNCIL	#439	BOY	SCOUTS	OF	31-0536966	J	F
Part VI	Governance, M	lanagement,	and Dis	closur	'e For each '	"Yes" i	response to lines 2	through 7b below,	and for a "No"

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Se	e inst	ructic	ns.
	Check if Schedule O contains a response or note to any line in this Part VI			_X_
<u>Sec</u>	tion A. Governing Body and Management			
		BENEVIC CAMP	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1 1 1 46			
	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	122		Maria S
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	SEVER.		
	any other officer, director, trustee, or key employee?	2		X
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		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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	paratic	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	59,50		
а	The governing body?	8a	<u> </u>	
b	Each committee with authority to act on behalf of the governing body?	8b	_X	ऻ
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	<u>ae.)</u>		Г
			Yes	
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	77	<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	554,741.47
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	1505036	77	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
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,"		7.7	
	describe on Schedule O how this was done	12c	<u> </u>	ļ
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	(Next 1
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?		v	100000
а	The organization's CEO, Executive Director, or top management official	15a	X	x
b	Other officers or key employees of the organization	15b	Nest S	1
	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	40-		v
	with a taxable entity during the year?	16a	Na.yiir	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	404		1 144 01
	organization's exempt status with respect to such arrangements?	16b		<u></u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OH			
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) available 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			
	financial 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			
	ENNY SPENCER 326 SOUTH THOMPSON AVENUE ORTHOGRIELD OH 45506 937	-32	5-6	440
S	PRINGFIELD OH 45506 957	<u> </u>	- 3	===

Form 000 (2021)	TECIMSEH	COINCIT.	#439	BOY	SCOTTES	OF	31-0536966
F0rm 990 (2021)	TECOMOEU	COOMCIN	ガマンフ	DOT	SCOOTS	OE:	31-0330300

Page	

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 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, 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.

See the instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (E) (F) (D) (A) (B) (do not check more than one Reportable Reportable Estimated amount Name and title Average box, unless person is both an compensation of other hours compensation officer and a director/trustee) compensation from related per week from the organization (W-2/ organizations (W-2/ from the (list any ndividual r director stitutional 1099-MISC/ organization and 1099-MISC/ Tes: hours for employee related organizations related 1099-NEC) 1099-NEC) compensated organizations below dotted line) (1) ROBERT LAVOIE JR. 40.00 1.00 X X 105,567 0 29,409 EXECUTIVE DIRECTOR (2) CLINT ALLEN 1.00 0 0 0 EXECUTIVE BOARD 0.00 X (3) ALEX AREHART 1.00 0 0 0 0.00 X OA LODGE CHIEF (4) BRIAN AREHART 2.00 0 0 0 0.00 X EXECUTIVE BOARD (5) ANGELA ASHBECK 1.00 0 0 0 X 0.00 EXECUTIVE BOARD (6) AUDREAU COLEMAN 2.00 0 0 0 EXECUTIVE BOARD 0.00 X (7) MICHAEL CROTHER\$ 2.00 0 0 0 0.00 X EXECUTIVE BOARD (8) BARTLEY DAVIS 2.00 0 0 VP - COMMUNICATIONS X 0 0.00 X (9) EDWARD DEEN 2.00 0 0 0 0.00 X X VP - PAST PRESIDENT (10) MACK FIFE 1.00 0 0 0 X EXECUTIVE BOARD 1.00 (11) GREG FREE 2.00 0 0 0 0.00 OA ADVISOR

02952 06/24/2022 8:57 AM Pg 9 Form 990 (2021) **TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966**

Part VII	Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	l Employees (continued)				
١	(B) Average hours	Average box, unless person is both a hours officer and a director/trustee						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation				
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	f _{na erro} organ	rom the nization	е	
	OM GATES CKET & BULLSK	1.00	x						0	0			0	
(13) BI	ECKY GORBY E BOARD	1.00	x						0	0			0	
(14) GZ	ARY HALE E BOARD	1.00	x						0	,			0	
(15) D2	ANIEL HARKIN		х		х				0	0			0	
(16) CI	LAYTON HAYS	2.00							0	0			0	
	BERT HEMMEI	2.00	X		X									
	MINISTRATION DWARD HESS	1.00	X		X				0	0			0	
EXECUTIV (19) R	E BOARD ALEIGH SAND)	0.00 JR. 1.00	X						0	0			0	
1b Subtot								<u> </u>	105,567	0		2	9,409	
d Total (a		ncluding but not I	imite	d to				bove	105,567 e) who received more than	\$100,000 of		2	9,409	
3 Did the	organization list any fo	ormer officer, di	ecto	r, tru	stee	, key	emp	oloy	ee, or highest compensate	d		3	Yes No	
4 For any organiz	r individual listed on line ation and related organ	e 1a, is the sum nizations greater	of r	epor า \$1	table 50,00	com 00? //	pens f "Ye	atio s," c	n and other compensation complete Schedule J for su	from the ch		4	x	
5 Did any for sen	person listed on line	1a receive or acong anization? If "	crue	com	pens	atior	n fron	n ar	ny unrelated organization of for such person	r individual	· · · · · · · · · · · · · · · · · ·	5	X	
1 Comple	ete this table for your finsation from the organi	ve highest comp	ensa	ated ensa	inder tion f	pend for th	ent c	ontr	ractors that received more lar year ending with or with	<u>iin the organization's tax y</u>	ear.		(C)	
	Name and	(A) d business address							Descrip	(B) Jion of services		Com	(C) npensation	
												<u></u>		
2 Total n	umber of independent d more than \$100,000	contractors (inclu of compensation	uding n fro	but m th	not e org	limite janiz	ed to ation	tho:	se listed above) who	0		Form	990 (2021	

DAA

Form 990 (2021) TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded (A) (B) Related or exempt Total revenue from tax under sections 512-514 business revenue 1a Federated campaigns 15,645 b Membership dues 1b c Fundraising events 1c d Related organizations 104,207 e Government grants (contributions) 139,341 1e f All other contributions, gifts, grants, and similar amounts not included above 368,780 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f..... 627,973 Business Code 900099 239,460 239,460 2a CAMPING Service 33,390 33,390 b ACTIVITY 900099 900099 12,618 12,618 f All other program service revenue 285,468 g Total. Add lines 2a-2f. 3 Investment income (including dividends, interest, and -29,637 other similar amounts) -29,637 Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6a Gross rents 6a 6b b Less: rental expenses c Rental inc. or (loss) d Net rental income or (loss) \triangleright 7a Gross amount from (i) Securities (ii) Other sales of assets 7a other than inventory b Less: cost or other Revenue basis and sales exps. 7b c Gain or (loss) 7c d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 39,609 b Less: direct expenses 12,745 26,864 26,864 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities \blacktriangleright 10a Gross sales of inventory, less 413,537 returns and allowances 10a b Less: cost of goods sold 262,146 10b 151,391 151,391 c Net income or (loss) from sales of inventory \triangleright Business Code d All other revenue ▶ e Total. Add lines 11a-11d -2,7731,062,059 436,859 Total revenue. See instructions

TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966 Form 990 (2021)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, Program service 8b, 9b, and 10b of Part VIII. 9 2 expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 4,719 trustees, and key employees 99,645 1,203 105,567 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 345,423 326,045 3,938 15,440 Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 113,612 107,239 1,295 5,078 9 39,461 37,247 450 1,764 Payroll taxes 10 Fees for services (nonemployees): 11 Management b Legal 27,939 26,371 319 1,249 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion _____ 12 13 Office expenses Information technology 14 15 Royalties 77,370 934 3,664 81,968 16 Occupancy 23,202 280 1,099 24,581 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 393 8,785 8,292 100 Conferences, conventions, and meetings 19 Interest 20 12,977 12,977 Payments to affiliates 21 672 2,636 58,973 55,665 Depreciation, depletion, and amortization 22 967 20,414 247 21,628 Insurance 23 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4,284 95,835 90,458 1,093 SUPPLIES 37,883 458 1,794 40,135 RECOGNITION AWARDS 15,126 183 716 16,025 EQUIPMENT RENTALS & MAINT 374 MISCELLANEOUS 95 8,358 7,889 273 1,073 23,990 22,644 e All other expenses 45,250 11,540 1,025,257 968,467 Total functional expenses, Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720) Form 990 (2021) Part X Balance Sheet

		Check if Schedule O contains a response or note	to any line	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		d B	196,305	1	111,669
	2	Savings and temporary cash investments			54,214	2	91,643
	3	Pledges and grants receivable, net 🧷		46,688	3.	44,062	
	4	Accounts receivable, net			12,155	4	68,144
	5	Loans and other receivables from any current or former					
		trustee, key employee, creator or founder, substantial co					
		controlled entity or family member of any of these perso		5			
	6	Loans and other receivables from other disqualified pers					
Ω		under section 4958(f)(1)), and persons described in sec		6			
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			94,819	8	86,359
	9	Prepaid expenses and deferred charges			13,247	9	16,009
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	2,934,008			
	b	Less: accumulated depreciation	10b	1,454,552	1,477,374	10c	1,479,456
	11	Investments—publicly traded securities	***************************************			11	15,362
	12					12	
	13	Investments—program-related. See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15	40,688	
	16	Total assets. Add lines 1 through 15 (must equal line 33		1,894,802	16	1,953,392	
	17	Accounts payable and accrued expenses		5,439	17	173,642	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV o	f Schedul	le D		21	
w	22	Loans and other payables to any current or former office					
Liabilities		trustee, key employee, creator or founder, substantial co	ontributor,	or 35%			
abil		controlled entity or family member of any of these perso				22	
Ë	23	Secured mortgages and notes payable to unrelated third				23	
	24	Unsecured notes and loans payable to unrelated third p				24	
	25	Other liabilities (including federal income tax, payables t	o related	third			
		parties, and other liabilities not included on lines 17-24).	Complete	e Part X			
		of Schedule D			139,757	25	95,773
	26	Total liabilities. Add lines 17 through 25			145,196	26	269,415
		Organizations that follow FASB ASC 958, check here	∍ ► X				
ès		and complete lines 27, 28, 32, and 33.					
or Fund Balances	27	Net assets without donor restrictions			1,404,998	27	1,296,601
Ba	28	Net assets with donor restrictions			344,608	28	387,376
nd		Organizations that do not follow FASB ASC 958, che	ck here	▶ ∐			
Ī		and complete lines 29 through 33.					
0	29	Capital stock or trust principal, or current funds				29	
Assets	30	Paid-in or capital surplus, or land, building, or equipmen				30	
Ass	31	Retained earnings, endowment, accumulated income, o	r other fu	nds		31	1 600 077
Net	32	Total net assets or fund balances			1,749,606	32	1,683,977
	33	Total liabilities and net assets/fund balances			1,894,802	33	1,953,392

Form **990** (2021)

Form	1 990 (2021) TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966				Pa	ge 12
Pa	art XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	,00	52,	059
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	, 02	25,2	<u> 257</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			36,	802
4	Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	/ \1	, 7	19,	<u>606</u>
5	Net unrealized gains (losses) on investments	5		W.	-6,	<u> 374</u>
6	Donated services and use of facilities	6		J		
7	Investment expenses	7			_	547
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			95,	510
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	, 68	33,	<u>977</u>
Pa	art XII Financial Statements and Reporting					,
	Check if Schedule O contains a response or note to any line in this Part XII					Ш
			_		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 O.		į.			
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	X	
	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:					
	Separate basis X Consolidated basis Both consolidated and separate basis		1			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.		:			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.

Form **990** (2021)

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

REVIN KAMPMAN 1.00 X 0 0 0 C	Part VII	Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyees,	and Highest Compensated	Employees (continued)	
Section Sect	١		Average hours	bo	x, unle	Pos check ess pe	ition more rson is	s both an r/trustee)	Reportable compensation from the	Reportable compensation	Estimated amount of other
LAGONDA DISTRICT CHA 0.00 X 0 0 0 C (21) KEVIN KAMPMAN 1.00 X 0 0 0 0 C (22) DAN KIRRPARTCK 2.00 X 0 0 0 C EXECUTIVE BOARD 0.00 X 0 0 0 C (23) KEVIN KNEPP 1.00 X 0 0 0 C (24) JIM KRECKMAN 3.00 X X 0 0 0 C CHILLICOTHE DISTRICT 0.00 X 0 0 0 C (24) JIM KRECKMAN 3.00 X X 0 0 0 C TREASURER 0.000 X X 0 0 0 C (25) MATTHEW KUNTZ 1.00 X 0 0 0 C (26) JAY LAND 1.00 X 0 0 0 C (26) JAY LAND 1.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 X 0 0 0 C EXECUTIVE BOARD 0.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 X 0 0 0 C EXECUTIVE BOARD 0.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 X 0 0 0 C EXECUTIVE BOARD 0.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 X 0 0 0 C EXECUTIVE BOARD 0.00 X 0 0 C EXECUTIVE BOARD 0.00 X 0 0 C EXECUTIVE BOARD 0.00 X 0 C EXE		PUO	(list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
AGORDAD DISTRICT CIA 0.00 X 0 0 0 C C C C KEVIN KAMPMAN 1.00 X 0 0 0 0 C C C C C C C C C C C C C	(20) T (ODD JUSTICE	1 00								
RISK MANACKMENT CHAI	LAGONDA	DISTRICT CHA		x		<u> </u>			0	0	0
RISK MANAGEMENT CHAI 0,00 x 0 0 0 C (22) DAN KIRKPATRICK 2,00	(21) KI	EVIN KAMPMAN									
(22) DAN KIRKPATRICK (23) KEVIN KNEPP 1.00 CHILLICOTE DISTRICT 0.00 X 0 0 0 0 CHILLICOTE DISTRICT 0.00 X 0 0 0 0 CREACURER 0.00 X X 0 0 0 0 0 CREACURER 0.00 X X 0 0 0 0 0 CREACURER 1.00 FROJECT COPE 0.00 X 0 0 0 0 C(25) MATTHEW KUNTZ 1.00 FROJECT COPE 0.00 X 0 0 0 0 C(26) JAY LAND 1.00 R.E. HADLEY DISTRICT 0.00 X 0 0 0 0 C(27) JENNIFER LUTZ EXECUTIVE BOARD 0.00 X 0 0 0 0 CEXECUTIVE BOARD 0.00 X 0 0 0 0 CTAIL TOTAL (add lines 1b and 1c) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	RISK MAN	NAGEMENT CHAI		x					0	0	o
EXECUTIVE BOARD			CK		<u> </u>						
(23) KEVIN KNEPP 1.00 CHILLICOTHE DISTRICT 0.00 X 0 0 0 CREASURER 0.00 X X 0 0 0 CREASURER 0.0	TO STORY OF THE STORY			v						_	_
CHILLICOTHE DISTRICT 0.00 X 0 0 0 C (24) JIM KRECKMAN 3.00 TREASURER 0.00 X X 0 0 0 C (25) MATTHEW KUNTZ 1.00 PROJECT COPE 0.00 X 0 0 0 C (26) JAY LAND 1.00 R.E. HADLEY DISTRICT 0.00 X 0 0 0 C (27) JENNIFER LUTZ 1.00 EXECUTIVE BOARD 0.00 X 0 0 0 C Total from continuation shoets to Part VII, Section A 1 0 0 0 C Total form continuation shoets to Part VII, Section A 1 0 0 0 C Total form continuation from the organization b 1 0 0 0 0 0 C 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1st II' Yes," complete Schedule J for such individual 3 of resolved in and related to the organization from the organization of related organization and related organization and related organization from the organization from the organization of resolved throw the high state of line 1st II' Yes," complete Schedule J for such individual 5 or services rendered to the organization. Report compensation from any unrelated organization or individual 5 or services rendered to the organization. Report compensation from any unrelated organization or individual 5 or services rendered to the organization. Report compensation from any unrelated organization or individual 5 or services rendered to the organization. Report compensation from any unrelated organization or individual 5 or services rendered to the organization. Report compensation from the organization or individual 5 or services rendered to the organization. Report compensation from the organization or individual 5 or services rendered to the organization. Report compensation from the organization or individual 5 or services rendered to the organization. Report compensation from the organization or individual 5 or service through the organization or individual 5 or service through the organization. Report compensation from the organization or individual 5 or service through the organization or individual 5 or service through the organization or individual 5 or service through the organization or indiv			0.00	Λ		├─			<u> </u>		
TREASURER 0.00 X X X 0 0 0 C TREASURER 0.00 X X X 0 0 0 C TREASURER 0.00 X X 0 0 0 C TREASURER 0.00 X 0 0 C TREASURER 0.00 X 0 0 C TREASURER 0.00 X 0 0 C TRE			1							_	_
TREASURER 0,00 X X X 0 0 C			0.00	X	_	<u> </u>			0	0	0
(25) MATTHEW KUNTZ 1.00 PROJECT COPE 0.00 X 0 0 0 0 0 0 0 0 0 0 0 0 0	(24) J.	IM KRECKMAN	3.00								
1.00 X 0.00 X 0 0 0 0 0 0 0 0			0.00	X		x	ļ		0	0	О
PROJECT COPE 0.00 X	(25) M	ATTHEW KUNT									
R.E. HADLEY DISTRICT 0.00 x 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	PROJECT	COPE		x					0	0	0
R.E. HADLEY DISTRICT 0.00 X 0 0 0 C (27) JENNIFER LUT2 1.00											
Subtotal Compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such person Section B Independent Contractors		TEV DIGEDICE	1	Ţ					0	0	0
1.00 x 0 0 C				^	-					<u> </u>	
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Section B. Independent Contractors 1 Complete this table for your five highest compensation from the organization. Report compensation from the organization. Report compensation from the organization of sarkies address 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization or individual 3 Yes No Yes No	EXECUTIV	Æ BOARD	1	x					0	0	C
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. C) Name and business address Competestion 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. Person											
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and bisness address Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.											
Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) Name and business address Description of services Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.	2 Total n	umber of individuals (in	cluding but not I	imite	d to	thos	e list	ed abo	ve) who received more than	\$100,000 of	Yes No
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Compensation 1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.											
Total number of independent contractors (including but not limited to those listed above) who	4 For any	v individual listed on line	e 1a, is the sum	of r	ерог	table	com	pensati	on and other compensation	from the	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	individu 5 Did any	y person listed on line of	1a receive or ac	crue	com	 pens	ation	n from a	any unrelated organization o	r individual	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Compensation	Section B. I	ndependent Contracto	ors			,					
Name and business address Description of services Compensation Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	1 Comple	ete this table for your fi	ve highest comp zation. Report co	ensa omp	ated ensa	inde _l tion 1	oend for th	ent con le calen	dar year ending with or with	nin the organization's tax y	ear.
received more than \$100,000 of compensation from the organization									Descrip	(B) tion of services	(C) Compensation
received more than \$100,000 of compensation from the organization											
received more than \$100,000 of compensation from the organization				······································							
received more than \$100,000 of compensation from the organization				·							
received more than \$100,000 of compensation from the organization										A AMERICA CONTRACTOR OF THE CO	
received more than \$100,000 of compensation from the organization											
received more than \$100,000 of compensation from the organization											
	2 Total n	number of independent ed more than \$100.000	contractors (inclu	uding n_fro	but m th	not e org	limite janiz	ed to the ation	ose listed above) who		- 990

02952 06/24/2022 8:57 AM Pg 15
Form 990 (2021) TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Part VII Section A. On	icers, Directors, Tri	stee	5, n	ey c	mpi	oyees	i, a	na rignest Compensatet	i Employees (continued)				
(A) Name and title	(B) Average hours	bo	x, unic	Pos check sss pe	rson	than on is both a or/trustee	an	(D) Reportable compensation	(E) Reportable compensation		(F) stimated of oth	amount ner	
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	, or	compens from t rganization ted orga	the on and	s
(28) DON LYNAM													
EXECUTIVE BOARD	0.00	\mathbf{x}						o	o	,			O
	LLISTER		<u> </u>										
EXECUTIVE BOARD	0.00	x						o	o				С
(30) RICK MCCLE		A	<u> </u>							-			
	2.00								0				C
VP - OPERATIONS (31) CHRISTINA	0.00 WESTON, MD	X	-	X				0	0				
	1.00												
COUNCIL PHYSICIAN (32) WILLIAM NO	0.00 RDMEYER	X	<u> </u>		_			0	0	-			<u> </u>
(32) WILLIAM NO	2.00												
EXECUTIVE BOARD	0.00	X	ļ					0	0				
(33) SIDNEY PAL	2.00												
EXECUTIVE BOARD	0.00	X			ļ			0	0	1			C
(34) RICK PERAL	1.00								22 2 (3*)				
VP -SPECIAL PROJEC		X	<u> </u>	x				. 0	. 0	1			C
(35) DAVID PERE													
COUNCIL ACTIVITIES	2.00 C 0.00	x						o	0)			C
1b Subtotal							>						
c Total from continuation d Total (add lines 1b and						J	> >						
2 Total number of individua	ls (including but not	limite				ted ab	ove	e) who received more than	\$100,000 of	-1			
reportable compensation	from the organization	n ▶										Yes	No
3 Did the organization list a employee on line 1a? If "	ny former officer, di	recto	r, tru	istee	, ke	y emp	loye	ee, or highest compensate			3		\$15000
4 For any individual listed of	n line 1a, is the sum	ı of r	epor	table	con	npens	atio	n and other compensation	from the				
individual	-							complete Schedule J for su			4		3.53.55
5 Did any person listed on	line 1a receive or ac	crue	com	pens	satio	n from	ar	ny unrelated organization o for such person	r individual		5	19814	25055
Section B. Independent Cont	ractors									w			
Complete this table for your compensation from the or compensation.	our five highest comp rganization. Report c	ensa ompe	ated ensa	inde; tion t	pend for th	ient co ne cal	ontr end	actors that received more lar year ending with or with	than \$100,000 of nin the organization's tax y	ear.			
	(A) ne and business address							Descrip	(B) tion of services		Co	(C) empensal	ion
		•											
											-		
												District of the Control of the Contr	
2 Total number of independence received more than \$100	dent contractors (incl	uding	but m th	not	limit	ed to	thos	se listed above) who					
received more man \$100	,coo or compensatio	. 110	(11	2 01	g U1 112	-41011	_					990	1 /000

02952 06/24/2022 8:57 AM Pg 16 Form 990 (2021) **TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966**

Part VII Section A. Onicers	, Directors, Tru	stee	15, N	ey E	mpi	oyee	s, a	nd Highest Compensated	Employees (continued)	·			
(A) Name and tille	(B) Average hours per week	bo	x, unle	Pos check ess pe	rson i	than or is both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) imated of oth	amount ner	
	(list any hours for related' organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	relate	from t ganizațio	he	S
(36) BRAD PHILLIPS	2.00												
(37) PAT PRICE	2.00	X		X				0	0				
VP - PROPERTIES	0.00	x		х				0	0				
(38) GREG REPASY	3.00							0	0				c
COUNCIL COMMISSIONER (39) DON RODMAN	0.00	X		X					<u> </u>				
VP - FINANCE	2.00 0.00	x		x				0	0				C
(40) KENT ROSENBAU	лм 3.00												
COUNCIL PRESIDENT	0.00	x		x				0	o				C
(41) DAVID W. ROSS													
EXECUTIVE BOARD	0.00	X						0	0	ļ			
(42) JOHN SMILEK	1.00	-											C
(43) JEFF SMITH	0.00	X						0	0	-		-	
TRAINING CHAIR	2.00 0.00	x	ļ., "	x				0	0				C
1b Subtotal							>					<u>.</u>	
c Total from continuation sheed Total (add lines 1b and 1c)							>						
2 Total number of individuals (in	cluding but not I	imite	d to	thos	e lis	ted al	oove	e) who received more than	\$100,000 of				
reportable compensation from	the organization										V., P. V., Per-	Yes	No
3 Did the organization list any for employee on line 1a? If "Yes,"								ee, or highest compensate			3		15,000
For any individual listed on line organization and related organization.	e 1a, is the sum	of r	eport	table	con	npens	atio	n and other compensation	from the				
individual	1a receive or ac			 pens	 atio	 n from	 n ar	ny unrelated organization o	r individual		4	pasa.	(S. 200)
for services rendered to the o	rganization? <i>If "</i>)	es,"	com	plete	Sc	hedul	e J	for such person	<u>,</u>		5		
Section B. Independent Contractor 1 Complete this table for your fire		ensa	ated	inde	nend	lent c	ontr	actors that received more	than \$100,000 of				
compensation from the organize	zation. Report co	ompe	ensal	ion 1	or th	ne cal	end	ar year ending with or with	nin the organization's tax y	ear.		(C)	
Name and	(A) business address							Descrip	(B) tioh of services		Co	(C) mpensat	ion

										,,			
											V. 23 N. 2 ***		
2 Total number of independent received more than \$100,000	contractors (inclu	uding	but	not	limite	ed to	thos	se listed above) who					
received more man \$100,000	or compensation	. 1101	41	O UIC	, ut 112	audil	_					000) (000

Part VII Section A. Officers. Directors. Trustees. Key Employees, and Highest Compensated Employees (continued)

Fall VII Section A. Onicers	s, Directors, Tru	3166	3, N	ey L	.iiihi	Oyee	3, a	nu riigilest Compensatet	Lilipioyees (continued)				
(A) Name and title	(B) Average hours per week	bo	x, unle	Pos check ess pe	rson	than o	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) stimated of oth compens	amount ier	t
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	l a consolidad	from trganization	he on and	าร
(44) ELWIN SPRAY	1.00												
VP - MEMBERSHIP	0.00	X		X				0	0	ļ			0
(45) BETHANN THOM	2.00												
VP - CAMPING	0.00	x		x	<u> </u>			0	0	<u> </u>			0
(46) BILL WOLFARTI	1												
EXECUTIVE BOARD	1.00	x				·		0	O				0
(47) BRAD WOOLF													
	1.00												_
EXECUTIVE BOARD	0.00	X						0	0				
			ļ										
1b Subtotal	<u> </u>	<u></u>	<u> </u>		<u> </u>	l							
c Total from continuation she							•						
d Total (add lines 1b and 1c)						 tod o	hav	a) who received more than	\$100,000 of				
2 Total number of individuals (in reportable compensation from			u to	เทอร	e iis	ied a	DOV	e) who received more than	\$100,000 01				
3 Did the organization list any fo	armar officer di	ooto	r fra	otoo	kov	, omi	nlov	oo or highest compensate	d		STEAK!	Yes	No
employee on line 1a? If "Yes."	" complete Sched	dule	J for	suc	h inc	dividu	ıal				3	79-20-20-20-20-20-20-20-20-20-20-20-20-20-	1 3410.25
4 For any individual listed on lin organization and related organization and related organization.	nizations greater	thar	1 \$1	50,00	00? /	f "Ye	s," c	complete Schedule J for su	ch		4		
5 Did any person listed on line	1a receive or ac	crue	com	pens	atio	n fror	n ar	ny unrelated organization o	r individual		5		
for services rendered to the o		es,	com	piete	2 SC	neau	ie J	tor such person					
1 Complete this table for your fi	ve highest comp	ensa	ted	inde	pend	lent o	contr	actors that received more	than \$100,000 of				
compensation from the organi	(A) business address	ompe	ensa	ion i	or tr	ie ca	lena	iar year ending with or with	In the organizations tax y (B) tion of services	ear.	<u> </u>	(C) mpensa	
Name and	Dusiness address						\vdash	Descrip	UOIT OF Services			пропос	4011
							ļ						
	A MUMAN INC. STR. III						T						

							T						
							<u> </u>				est till	o de la composição de la c	e de teat
2 Total number of independent received more than \$100,000	contractors (inclu of compensation	ıding 1 froi	but m th	not e ord	Iimite ganiz	ed to cation	tho:	se listed above) who					
						******						00	^

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047 2021

Inspection

► Attach to Form 990 or Form 990-EZ. Open to Public

TECUMSEI AMERICA

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

TECUMSEH COUNCIL #439 BOY SCOUTS OF

Employer Identification number 31–0536966

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (III) Type of organization (II) EIN listed in your governing support (see other support (see organization (described on lines 1-10 instructions) document? instructions) above (see instructions)) (A) (B) (C)

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

(D)

(E)

Schedule A (Form 990) 2021

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization'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						
5	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)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support		·		1	T	r
Calen	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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					140	
12	Gross receipts from related activities, etc.						
13	First 5 years. If the Form 990 is for the or	-					▶□
<u> </u>	organization, check this box and stop her						
	tion C. Computation of Public Su			(0)		14	%
14	Public support percentage for 2021 (line 6						%
15 40-	Public support percentage from 2020 Sche 33 1/3% support test—2021. If the organ	edule A, Part II, IIII	ek the boy on line	13 and line 14 is:	33 1/3% or more	· · · · · · · · · · · · · · · · · · ·	70
16a	box and stop here. The organization quality				33 1/3 /0 OI IIIOIC,	OHOOK WIIS	▶ □
b	33 1/3% support test—2020. If the organ				15 is 33 1/3% or m	nore check	
D	this box and stop here . The organization						▶ □
17a	10%-facts-and-circumstances test—202						
174	10% or more, and if the organization mee						
	Part VI how the organization meets the fa						
	organization						▶ □
b	10%-facts-and-circumstances test—202	20. If the organizati	ion did not check a	box on line 13, 16	 3a, 16b, or 17a, ar	nd line	
~	15 is 10% or more, and if the organization						
	in Part VI how the organization meets the						
	organization						▶ □
18	Private foundation. If the organization did	not check a box	on line 13, 16a, 16	b, 17a, or 17b, ch	eck this box and s	ee	
	instructions						▶ 🔲
							A (Form 990) 2021

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	tion A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020 🦽	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	391,287	492,991	466,712	686,735	627,973	2,665,698	
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	358,577	317,987	874,883	497,652	699,005	2,748,104	
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization'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	749,864	810,978	1,341,595	1,184,387	1,326,978	5,413,802	
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							
	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from						5,413,802	
Sec	line 6.) tion B. Total Support				Elementary of the second service	25,000,000	3,413,002	
	idar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
9	Amounts from line 6	749,864			· · · · · · · · · · · · · · · · · · ·	1,326,978	5,413,802	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,879				-29,637	-6,197	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b	3,879	3,077	14,006	2,478	-29,637	-6,197	
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on			22,148	22,967	25,864	70,979	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	220,571	239,860				460,431	
13	Total support. (Add lines 9, 10c, 11, and 12.)	974,314	1,053,915	1,377,749	1,209,832	1,323,205	5,939,015	
14	First 5 years. If the Form 990 is for the o			h, or fifth tax year	as a section 501(c	:)(3)	_	
	organization, check this box and stop her						>	
Sec	tion C. Computation of Public S						T	
15	Public support percentage for 2021 (line 8						91.16 %	
16	Public support percentage from 2020 Sch					16	86.01 %	
Sec	tion D. Computation of Investme						T 0/	
17	Investment income percentage for 2021 (I	%	
18	Investment income percentage from 2020	Schedule A, Part I	II, line 17				%	
19a	33 1/3% support tests—2021. If the orga	nization did not ch	eck the box on line	e 14, and line 15 is	s more than 33 1/3	%, and line	▶ X	
	17 is not more than 33 1/3%, check this b	ox and stop here.	The organization	qualifies as a publ	liciy supported org	anization		
b	b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
	line 18 is not more than 33 1/3%, check the	nis box and stop h	ere. The organiza	uon quailles as a	publicly supported	tions	·····	
20	Private foundation. If the organization di	a not cneck a box	on line 14, 19a, 0	ISD, CHECK THS D	UN ATTU SEE ITISTIUC			

Supporting Organizations

(Complete only if you checked a box in line 12 on 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

- 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,
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- 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.
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- 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.
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 8 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - 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.)

1	19	Yes	No
	1		
	2		
	<u>2</u> За		
	3b		
	3c		
	4a		jiletiki?
	4b		
	4c		
	5a 5b		
	5c		
	7		
	8		
	9a		
	9b		
,	9c		
	10a		
	10b		

Schedule A (Form 990) 2021

Par	t IV Supporting Organizations (continued)			
			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?	a		
b	A family member of a person described on line 11a above?	b	1	
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
·	provide detail in Part VI.	c /		
Secti	on B. Type I Supporting Organizations	<u> </u>	1	
	on Dr. 1960 F dupporting Organizations	T	Yes	No
	Did the governing heady members of the governing heady officers goting in their official consolity or membership of one or		103	
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	380		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		3.50.004.005	HARASAR MA
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,			
	supervised, or controlled the supporting organization.	<u>: </u>		
Secti	on C. Type II Supporting Organizations			
			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			
	the supported organization(s).			
Secti	on D. All Type III Supporting Organizations			
<u> </u>	on brain type in outpoining organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	1200			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	i Sagar (Sagar (ine particular in the	
_	organizations governing documents in check of the date of notinedition, to the second respectively.			
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		10,000,000	
	the organization maintained a close and continuous working relationship with the supported organization(s).		Sale MAP	64 9 E N. P. L.
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			
	supported organizations played in this regard.	3		
Secti	ion 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 instruction	ns).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	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			
		a		
	that these activities constituted substantially an or its activities.			KEKAT.
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.	D	Special Con-	
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			WW(# 17
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	a	Audional and A	The second
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			Extra p.
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		/Farrer 1	190\ 2021
				71177

Schedule A (Form 990) 2021 TECUMSEH COUNCIL #439 BOY S			966 Page 6						
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	ations							
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI).	See						
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.									
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year						
	Est. E		(optional)						
1 Net short-term capital gain	1								
2 Recoveries of prior-year distributions	2								
3 Other gross income (see instructions)	3	-	1 -4						
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								
Section 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):		4							
a Average monthly value of securities	1a								
b Average monthly cash balances	1b								
c Fair market value of other non-exempt-use assets	1c								
d Total (add lines 1a, 1b, and 1c)	1d								
e 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								
Section 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-functionally integrated	Type I	III supporting organization							
(see instructions).		-							

Schedule A (Form 990) 2021

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D – Distributions			Current Year					
1	Amounts paid to supported organizations to accomplish exempt purpose	ses							
2	Amounts paid to perform activity that directly furthers exempt purposes organizations, in excess of income from activity								
3	Administrative expenses paid to accomplish exempt purposes of supp	A North Control	<u> </u>						
4	Amounts paid to acquire exempt-use assets								
5	Qualified set-aside amounts (prior IRS approval required—provide deta	ails in Part VI)							
6	Other distributions (describe in Part VI). See instructions.								
7	Total annual distributions. Add lines 1 through 6.								
8	Distributions to attentive supported organizations to which the organizations	ation is responsive							
	(provide details in Part VI). See instructions.								
9	Distributable amount for 2021 from Section C, line 6								
10	Line 8 amount divided by line 9 amount		I						
		(i)	(ii)	(iii)					
Secti	on E – Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable					
			Pre-2021	Amount for 2021					
	Distributable amount for 2021 from Section C, line 6	-							
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required-explain in Part VI). See								
	instructions.								
3	Excess distributions carryover, if any, to 2021								
	From 2016								
	From 2017								
	From 2018								
	From 2019								
	From 2020								
	Total of lines 3a through 3e								
	Applied to underdistributions of prior years								
	Applied to 2021 distributable amount								
<u> </u>	Carryover from 2016 not applied (see instructions)								
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2021 from								
	Section D, line 7: \$								
	Applied to underdistributions of prior years			Company to the Company of the Compan					
	Applied to 2021 distributable amount Remainder, Subtract lines 4a and 4b from line 4.	Frailighten (Carrier an all an artist an artist all artist							
			And the second of the second o						
5	Remaining underdistributions for years prior to 2021, 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 2021 Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
7	Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j								
7									
8	and 4c. Breakdown of line 7:								
	5 0017								
	Excess from 2017 Excess from 2018								
	Excess from 2019			10.0					
	Excess from 2020								

Schedule A (For	m 990) 2021	T	ECUMSEH	COUNCIL	#439 BOY	SCOUTS	OF 31-0536966	Page 8
Part VI	Suppleme	ntal Informa	ation. Provid	e the explana	tions required	by Part II, line	e 10; Part II, line 17a or	17b; Part
	B. lines 12;	Paπ IV, Sect and 2: Part IV	tion A, lines ' /. Section C.	1, ∠, 3b, 3c, 4 line 1: Part I\	ช, 4c, 5a, 6, ย /. Section D. li	ines 2 and 3: I	ı, 11b, and 11c; Part IV, Part IV, Section E, lines	1c, 2a, 2b,
	3a, and 3b	; Part V, line	1; Part V, Se	ection B, line	1e; Part V, Se	ction D, lines	5, 6, and 8; and Part V,	Section E,
b	lines 2, 5,	and 6. Also	complete this	part for any	additional info	rmation. (See	instructions.)	N
PART I	II, LIN	i 1 2 + Ç	THER IN	COME) DETA	AIL			Ŋ
OTHER	INCOME			tis	\$ 46	50,431		
•			, , , , , , , , , , , , , , , , , , , ,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
•								
•								
•								
•								
•								
						,		
								,
						,		

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

2021

TECUMSEH COUNCIL #439 BOY SCOUTS OF -0536966 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 501(c)(3) exempt private foundation Form 990-PF 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 331/3% 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 "N/A" in column (b) instead of the contributor name and address), II, and III. 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 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 religious, charitable, etc., contributions totaling \$5,000 or more during the year 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).

Name of organization
TECUMSEH COUNCIL #439 BOY SCOUTS OF

Employer identification number 31-0536966

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1		\$ 11,656	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 9,500	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
. 3		\$ 17, 500	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No	Name, address, and ZIP + 4	Total contributions \$ 7,500	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
5		\$ 10,000	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		\$ 12,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

TECU	MSEH COUNCIL #439 BOY SCOUTS OF	, 31 _·	-0536966
Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No. 7	Name, address, and ZIP+4	(c) Total contributions \$ 7,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 8	Name, address, and ZIP + 4	Total contributions \$ 6,000	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
9	Name, address, and ZIP + 4	\$ 10,000	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
	λ"	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution Person 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.)

SCHEDULE D (Form 990)

Department of the Treasury

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.

Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year _____ Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 336.90 b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 1 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not 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 of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 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 of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Schedule D (Form 990) 2021 TECUMSEH COUNCIL #439	BOY	SCOUTS	OF	31-0536966
--	-----	--------	----	------------

Pa	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)										
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records	, check any of the follo	wing that make	significant use	e of its					
а	a Public exhibition d Loan or exchange program										
b	Scholarly research	е 🔲	Other	8		A					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	how they further the o	rganization's exe	mpt purpose	in Part 📗	7 V				
	XIII.						1				
5											
an'	assets to be sold to raise funds rather than t		part of the organization's	s collection?			Yes	No			
На	rt IV Escrow and Custodial Art Complete if the organization 990, Part X, line 21.		on Form 990, Part	: IV, line 9, or	reported a	n amount o	n Form				
1a	Is the organization an agent, trustee, custod	an or other intermed	iary for contributions or	other assets not			,				
	included on Form 990, Part X?						Yes	No No			
b	If "Yes," explain the arrangement in Part XIII										
							Amount				
	Beginning balance					1c					
	Additions during the year					1d					
	Distributions during the year					1e					
f	Ending balance					1f	T v	<u> </u>			
	Did the organization include an amount on F						Yes	H N°			
	If "Yes," explain the arrangement in Part XIII. If V Endowment Funds.	Check here if the ex	cpianation has been pro	vided on Part All	11 ,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·		<u> </u>			
: ra	Complete if the organization	answered "Yes"	on Form 990 Part	IV line 10							
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two years bac	k (d) Thr	ree years back	(e) Four yea	ars back			
1a	Beginning of year balance	2,013,174	1,930,208	1,643,3		,778,642		3,480			
	Contributions	7,550	8,950	6,0							
	Net investment earnings, gains, and										
	losses	260,167	74,016	280,8	326	-135,340	16!	5,162			
d	Grants or scholarships										
	Other expenditures for facilities and										
	programs										
f	Administrative expenses	557,885		4 000		640 000	* 55				
g	End of year balance	1,723,006	2,013,174	1,930,2	1 80	,643,302	1,778	3,642			
2	Provide the estimated percentage of the curr	•	e (line 1g, column (a)) h	ield as:							
a	Board designated or quasi-endowment	64.75 %									
	Permanent endowment ► 35.25 %										
C	Term endowment ▶	nuld equal 100%									
3a	Are there endowment funds not in the posse		ition that are held and a	administered for t	he						
ou	organization by:	ocion of the organiza					Ye	s No			
	(i) Unrelated organizations						3a(i)	X			
	(ii) Related organizations						3a(ii)				
b	If "Yes" on line 3a(ii), are the related organiz	ations listed as requi	red on Schedule R?				3b X				
4	Describe in Part XIII the intended uses of th		wment funds.								
Pa	rt VI Land, Buildings, and Equ				_ =	000 D ()	. P 40				
	Complete if the organization		· ·								
	Description of property	(a) Cost or other to	pasis (b) Cost or oth (other)	I	(c) Accumulate depreciation	ď	(d) Book valu	е			
		(investment)		4,849	aop.oudion		524	,849			
	Land			4,800	1.250	.019		,781			
	Buildings			2,347				,623			
c d	Leasehold improvements			2,567		,809		,758			
	Equipment Other			9,445				,445			
	otal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 1,479,456										

Schedule D (Form 990) 2021	TROTIMERH	COINCTI.	#430	BOY	SCOTTES	OF	31-0536966	
Schedule D (Form 990) 2021	TECOMOEU	COUNCIL	#433	DOI	PCOOTS	OF.	3T-0330300	

	e if the organization answered "\ Description of security or category	(b) Book value	(c) Method of vi	
(d)	(including name of security)	(N) DOOK VAILED	Cost or end-of-year	
(1) Financial derivatives		a B		
(2) Closely held equity into	erests			/ % % //
(3) Other				<u>. </u>
(A)	- 155 c - 156 k 1955 c - 1 - 156 c - 156 c - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			-#
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	qual Form 990, Part X, col. (B) line 12.)	>		
	ents – Program Related.		- 44- C Farm 000 Da	ut V line 12
Complet	e if the organization answered "		1e 11c. See Form 990, Pa	
	(a) Description of investment	(b) Book value	Cost or end-of-year	
			000 01 010 07 702	
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	qual Form 990, Part X, col. (B) line 13.)	>		
Part IX Other A				
Complet	e if the organization answered "	Yes" on Form 990, Part IV, lir	ne 11d. See Form 990, Pa	rt X, line 15.
	(a) Des	cription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)	The second section of the second seco		>	
	qual Form 990, Part X, col. (B) line 15.) Liabilities.			
Part X Other L	te if the organization answered "	Ves" on Form 990 Part IV lir	ne 11e or 11f. See Form 9	90. Part X.
line 25.	e ii tile organization answered	res of tom soo, tall tv, in	10 110 01 1111 000 1 01111 0	
1.	(a) Description of liability			(b) Book value
(1) Federal income taxe				
(2) CUSTODIAL A				89,563
(3) GIFT CERTIF:				2,113
(4) DEFERRED INC				1,822
(5) DEFERRED INC				1,015
(6) PAYROLL TAXE				696
(7) SALES TAX				564
(8)				

				<u> </u>
(9) Total. (Column (b) must e	qual Form 990, Part X, col. (B) line 25.)			95,773
(9) Total. <i>(Column (b) must e</i> 2. Liability for uncertain ta	qual Form 990, Part X, col. (B) line 25.) x positions. In Part XIII, provide the text ncertain tax positions under FASB ASC	t of the footnote to the organization's	s financial statements that report	s the

chedule D (Form 990) 2021 TECUMSER COUNCIL #439 BOY SC	TOOTS OF	21-022636	0	Page 4
Part XI Reconciliation of Revenue per Audited Financial Staten			turn.	
Complete if the organization answered "Yes" on Form 990,			1	1,055,138
1 Total revenue, gains, and other support per audited financial statements			335535	1,000,100
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		-6,374		
a Net unrealized gains (losses) on investments	. 2a 2b	0/3/3		
b Donated services and use of facilities c Recoveries of prior year grants	20 2c			
c Recovenes or pnor year grants				lis y
d Other (Describe in Part XIII.)	<u>Zu</u>		2e	-6,374
e Add lines 2a through 2d			3	1,061,512
 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 			3	1,001,012
	42	547		
a Investment expenses not included on Form 990, Part VIII, line 7b		01/		
b Other (Describe in Part XIII.) c Add lines 4a and 4b			4c	547
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,062,059
Part XII Reconciliation of Expenses per Audited Financial State				
Complete if the organization answered "Yes" on Form 990,			\Ctu	•••
			1	1,185,257
1 Total expenses and losses per audited financial statements				
	2a			
a Donated services and use of facilities				
b Prior year adjustments c Other losses				
		160,000		
d Other (Describe in Part XIII.)			2e	160,000
e Add lines 2a through 2d 3 Subtract line 2e from line 1			3	1,025,257
 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			

b Other (Describe in Part XIII.) c Add lines 4a and 4b			4c	
c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,025,257
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV. lines 1b an	d 2b: Part V. line 4: F	art X.	line
; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide				
PART II, LINE 5 - MONITORING AND ENFORCEME				
	1171			
THE TECUMSEH LAND TRUST COMES OUT ONCE A Y	EAR AND	INSPECTS T	HE	GROUNDS TO
ENSURE COMPLIANCE.				
PART V, LINE 4 - INTENDED USES FOR ENDOWME	NT FUND:	S		
TO PROVIDE FUNDS FOR THE BENEFIT OF THE TE	CUMSEH (COUNCIL #43	9 E	OY SCOUTS OF
AMERICA TO COVER OPERATING AND CAPITAL EXP	ENDITUR	ES.		
PART X - FIN 48 FOOTNOTE				
THE COUNCIL IS A NOT-FOR-PROFIT ORGANIZATION	TAHT NO	IS EXEMPT	FRO	M
INCOME TAXES UNDER SECTION 501(A) AS DESCR	IBED UNI	DER 501(C)(3)	OF THE
INTERNAL REVENUE CODE AND COMPARABLE STATE	LAW AS	A CHARITAE	3LE	

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

DUNCIL #439 BOY SCOUTS OF

AMERICA	439 BOI (SCO	TO	of a B	31-05369	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required to	the organization complete the	on an is par	swer t.	ed "Yes" on Form		
1 Indicate whether the organization raised funds through a						
a Mail solicitations	e 🔲 Solicitation	n of no	n-gov	ernment grants		
b Internet and email solicitations	F Solicitation	n of go	vernn	nent grants		
c Phone solicitations	g 🔲 Special fu	ındraisi	ng ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity	in connection wit	h profe	ession	al fundraising services?		Yes No
b If "Yes," list the 10 highest paid individuals or entities (fu compensated at least \$5,000 by the organization.	naraisers) pursua				fundraiser is to be	
(i) Name and address of individual or entity (fundralser)	(II) Activity	raise custo con	id fund- r have ody or rol of utions?	(Iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
			Ļ			
Total		contrib	utions	or has been notified it	is exempt from	<u> </u>
List all states in which the organization is registered or it registration or licensing.					,	
						. ,

02952 06/24/2022 8:57 AM Pg 35 TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966 Schedule G (Form 990) 2021 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events GOLF OUTING NONE (add col. (a) through col. (c)) (total number) (event type) 39,609 39,609 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus 39,609 line 2) 4 Cash prizes 5 Noncash prizes 3,470 6 Rent/facility costs 6,146 7 Food and beverages

39,609 3,470 6,146 8 Entertainment 3,129 3,129 9 Other direct expenses 12,745 10 Direct expense summary. Add lines 4 through 9 in column (d) 26,864 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo Revenue col. (a) through col. (c)) bingo/progressive bingo 1 Gross revenue. 2 Cash prizes Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes No 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain:

Sche	dule G (Fo	rm 990) 2021	TECUMSEH	COUNCIL	#439	BOY	SCOUTS	OF	31-053696	6			Page 3
11	Does the	organization co	onduct gaming activitie	s with nonmem	bers?							Yes	No
12		-	ntor, beneficiary or trus										
	_	_	aritable gaming?						-			Yes	Пио
13			of gaming activity cond										٠٠٠ لـــا
	The eres	nic percentage v	or garming activity con-	audicu III.			a B			13a			%
a	The orga	nizations facility	ress of the person wh				47. Naja		······································	13b	ā s	,	 %
b	An outsid	e racility						.}} ∦	k	13D	B B		- %
14	Enter the	name and add	ress of the person wh	o prepares the o	organizatio	n's gami	ng/special eve	ints boo	oks and		y		
	records:									a	ed -		
	Name 🕨												
	Address	•											
	, taa1000 ,											•	
4	D #			ainel wants frame .	dana tha c	. raani=at	ion rossiuss a	amina					
15a		_	ive a contract with a t	· ·								V	
	revenue?										Ш	Yes	∐ No
b			nt of gaming revenue r						and the				
	amount o	f gaming revent	ue retained by the thir	d party ► \$ ়									
С	If "Yes," e	enter name and	address of the third p	arty:									
	Name >												
	Address	•											
	/ ladicoo	••••••	• • • • • • • • • • • • • • • • • • • •										
40	Oi		-11										
16	Gaming	manager inform	auon.										
	Name >												
	Gaming 1	manager compe	ensation 🕨 💲										
	Description	n of services p	provided >										
	Direc	ctor/officer	Employee	<u></u> П и	ndependen	t contra	ctor						
					•								
17	Mandator	y distributions:											
17			ed under state law to	maka abaritable	diatributia	no from	the gaming or	rocode	to				
а	_											Yes	Пио
	retain the	state gaming i	icense?								ш	163	
b			ributions required unde				er exempt org	anizatio	ons or				
		he organization	's own exempt activitie	es during the tax	year ►	\$			01 1	/""\ I. /-	.	-1	
Pa	rt IV	Supplemen	tal Information.	Provide the	explanati	ons rec	quired by Pa	art I, li	ne 2b, columns	(III) and (V); an	a	
		Part III, lines	s 9, 9b, 10b, 15b,	15c, 16, and	l 17b, as	applic	able. Also p	provide	e any additional	intormatio	n.		
		See instruc	tions.										
• • • • •													
• • • • •													
											<i>.</i>		
											<i>.</i>		
• • • • •								,					
										Schedule G	(For	m 99	0) 2021

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

TECUMSEH COUNCIL #439 BOY SCOUTS OF

31-0536966 AMERICA FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 A COPY OF THE 990 IS PROVIDED TO EACH MEMER OF THE ORGNIZATION'S GOVERNING BODY PRIOR TO FILING. QUESTIONS OR CONCERNS ARE ADDRESSED AT A SUBSEQUENT BOARD MEETING. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY THE VICE PRESIDENT OF ADMINISTRATION WILL BE IN CHARGE OF MONITORING AND ENFORCING COMPLIANCE ON A REGULAR BASIS. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE COUNCIL COMPENSATION COMMITTEE AS A PART OF THE BUDGETING PROCESS REVIEWS AND APPROVES COMPENSATION. BOY SCOUTS OF AMERICA'S NATIONAL OFFICE PROVIDES ESTABLISHED COMPENSATION RANGES BASED ON JOB TITLE AND RECOMMENDS SALARY INCREASES TO THE COMPENSATION COMMITTEE FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, POLICIES & FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC FOR INSPECTION UPON REQUEST. FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION \$ 64,490 TRANSFER FROM TECUMSEH ENDOWMENT FUND -160,000 SETTLEMENT TRUST CONTRIBUTION -95,510 TOTAL

32952 06/24/2022 8:57 AM Pg 38

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

31

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ▶ Attach to Form 990.

Open to Public 2021

OMB No. 1545-0047

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

Inspection Employer identification number

31-0536966

(f) t controlling entity Direct (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line (c)
Legal domicile (state or foreign country) (b) Primary activity TECUMSEH COUNCIL #439 BOY SCOUTS OF (a)
Name, address, and EIN (if applicable) of disregarded entity AMERICA Part

ල

9

 ε

£

9

Section 512(b)(13) controlled entity? Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (f)
Direct controlling
entity N/A(e)
Public charity status
(if section 501(c)(3)) 12C (d) Exempt Code section 501C3 (c) Legal domicile (state or foreign country) НО PROVIDE ON (b) Primary activity 31-1243813 (a) Name, address, and EIN of related organization 45506 SCOUTS OF AMERICA TRUST FUND НО 326 SOUTH THOMPSON AVENUE SPRINGFIELD OH BOY Part II Ξ

×

<u>4</u> ල

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

3

<u>8</u>

Schedule R (Form 990) 2021

02952 06/24/2022 8:57 AM Pg 39

Schedule R (Form 990) 2021

TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Page 2

Schedule R (Form 990) 2021 ŝ (i) Section 512(b)(13) controlled entity? (k) Percentage ownership (i) General or managing partner? ¥88 ¥88 Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. (h) Percentage ownership (f)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1085) (g)
Share of
end-of-year assets (h) Dispro-portionate alloc.? Yes (g) Share of end-of-year assets Share of total income (f) Share of total income (C corp, S corp, Type of entity or trust) (d)
Direct controlling
entity (e)
Predominant income (related, excluded from (zx under sections 512-514) (d)
Direct controlling |
entify (c) Legal domicile foreign country) (state or (c)
Legal
domicile
(state or
foreign Primary activity Primary activity (a)
Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV Part III A ල 3 € E 2 ন্ত <u>ල</u> E

Schedule R (Form 990) 2021 TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

8
Duning the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II—1V.
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,

Schedule R (Form 990) 2021 TECUMSEH COUNCIL #439 BOY SCOUTS OF 31-0536966

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

X X X X X X X X X X X X X X X X X X X	Name, address, and EIN or entity	Legal Jomicile state or	Predominant Arr income (related, unrelated, excluded	Are all partners section 501(c)(3)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership
			tions 512-514)	ganizations?						1
			:							
	2)									

	(5)									
	(4)									
	(9)							-		
	(9)									
			•							
	(7)									

	(8)									
	(6)									
			 							
	(0)									
	11)									

Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.
	•
	Public Inspection Copy
• • • • • • • • • • • • • • • • • • • •	·
•	
. ,	
	<u> </u>
• • • • • • • • • • • • • • • • • • • •	
	<u></u>

990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2021 Open to Public Inspection

<u>A</u>	For the 2021 of	alendar year, or tax year beginning , and ending			
<u>B</u> _	Check if applicable:	C Name of organization BOY SCOUTS OF AMERICA TRUST FUND] ') Employer	Identification number
Ш	Address change	#439 TECUMSEH COUNCIL		A	
$\overline{\Box}$	Name change	Doing business as			243813
	1	Number and street (or P.O. box if mail is not delivered to street address) 326 SOUTH THOMPSON AVENUE	Room/suite		number 825-6449
_	Initial return	City or town, state or province, country, and ZIP or foreign postal code		55, c	
Ш	terminated	SPRINGFIELD OH 45506	i.	Gross rece	ipts\$ 169,033
П	Amended return	F Name and address of principal officer.		GIOSS IECE	
雨	Application pending	ROBERT LAVOIE JR.	H(a) is this a group	p return for su	ubordinates? Yes X No
ш	reproduct portaing	326 SOUTH THOMPSON AVENUE	H(b) Are all subor	rdinates inclu	uded? Yes No
			1		See instructions
			-		
	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (Insert no.) 4947(a)(1) or 527	┨		
<u>J</u>		WW.TECUMSEHCOUNCILBSA.ORG	H(c) Group exemination: 19		M State of legal domicile: OH
	Form of organization		rear of formation: 13	,3 /	M State of legal dofficale; O11
	.,	immary			
		escribe the organization's mission or most significant activities:			
8	SEE.	SCHEDULE O			
паг					
Governance			-0/ -f !!t		
တိ	2 Check th	is box ▶ if the organization discontinued its operations or disposed of more than 25	o% of its net asse		2
ంక		of voting members of the governing body (Part VI, line 1a)			2
iës		of independent voting members of the governing body (Part VI, line 1b)		·	0
Activities		nber of individuals employed in calendar year 2021 (Part V, line 2a)		· -	2
ĄĊ		nber of volunteers (estimate if necessary)		· 	0
		elated business revenue from Part VIII, column (C), line 12		1 1	0
	b Net unre	ated business taxable income from Form 990-T, Part I, line 11	Prior Year		Current Year
	8 Contribut	ions and grants (Part VIII, line 1h)		,950	7,550
e	9 Program	1		0	0
Revenue	10 Investme	service revenue (Part VIII, line 2g) nt income (Part VIII, column (A), lines 3, 4, and 7d)	138	,994	161,483
æ	14 Other re	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0		0
		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	151	,944	169,033
_		nd similar amounts paid (Part IX, column (A), lines 1–3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	0
		paid to or for members (Part IX, column (A), line 4)		0	0
	45 Colorine	other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
Expenses	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)		0	. 0
ed	b Total fun	draising expenses (Part IX, column (D), line 25) ▶ 0			
Щ	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		0	0
		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		0	0
		less expenses. Subtract line 18 from line 12	151	,944	169,033
ъ	8		Beginning of Curre		End of Year
Net Assets or	20 Total as:	ets (Part X, line 16)	2,013		2,216,401
Ş.	21 Total liab	illities (Part X, line 26)	0.010	0	493,395
	22 Net asse	ts or fund balances. Subtract line 21 from line 20	2,013	,1/4	1,723,006
	Part II Si	gnature Block			
Ļ	Inder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and stateme	ents, and to the bes	stofmykn	owledge and belief, it is
t	rue, correct, and c	omplete. Declaration of preparer (other than officer) is based on all information of which preparer	nas any movieage	·	
				Date	
Si	gn 📗	Signature of officer	mrim DID		•
He		ROBERT LAVOIE JR. EXECU	TIAE DIK	ECTOF	
		Type or print name and title	Date	041	X if PTIN
_	1	Preparer's signature Preparer's signature Mark Smith, CRA		Check	
Pa	randt			22 self-em	31-0787612
	eparer Firm's n		Fir	m's EIN ▶	JI 0/0/012
US	e Only	801 FALLS CREEK DR			937-898-1376
	Firm's a			one no.	X Yes No
Ma	y the IRS discu	ss this return with the preparer shown above? See instructions			25 165 140

	BOY SCOUTS OF AMER		31-1243813	Page
	Statement of Program Servic Check if Schedule O contains a		ne in this Part III	X
	cribe the organization's mission:	Tooponed of floto to dity in		
SEE SCH	HEDULE O			
•				;00V
2 Did the org	ganization undertake any significant pro	gram services during the year w	hich were not listed on the	
				Yes X N
	escribe these new services on Schedul			
Did the org services?	ganization cease conducting, or make			Yes X N
	escribe these changes on Schedule O.			
	ne organization's program service acco		e largest program services, as mea	sured by
	Section 501(c)(3) and 501(c)(4) organi		amount of grants and allocations	to others,
the total ex	kpenses, and revenue, if any, for each	program service reported.		
la (Code:) (Expenses \$	including grants of \$	\	enue \$
	ENT FUND FOR THE TE	CUMSEH COUNCIL.		1 SERVICE
FUND.				
* * * * * * * * * * * * * * * * * * * *				
Ih (Cada)) (Expenses \$	including grants of \$) (Rev	enue \$
N/A	, (Expenses φ		, (NO.	οπαο Ψ
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				. , ,
• • • • • • • • • • • • • • • • • • • •		,		, , , , , , , , , , , , , , , , , , , ,
* * * * * * * * * * * * * * * * * * * *				
• • • • • • • • • • • • • • • • • • • •				
c (Code:) (Expenses \$	including grants of \$) (Rev	enue \$
N/A				
		,		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		• • • • • • • • • • • • • • • • • • • •		
		••••		
• • • • • • • • • • • • • • • • • • • •				
Id Other proc	gram services (Describe on Schedule (D.)		
(Expenses		ing grants of \$) (Revenue \$)
	ram service expenses ▶			

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	<u> </u>	
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in liobbying activities, or have a section 501(h)	r/		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			ł
	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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			1
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? 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			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	68,835,657
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.	STANK.	E SERVE	Service .
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			1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	<u> </u>	<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			77
	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	l		37
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ا ا	37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7.7
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		37	
	"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		X
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	446		v
	foreign investments valued at \$100,000 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	4=		x
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		х
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		х
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		х
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		-42
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		x
	If "Yes," complete Schedule G, Part III	20a		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		-
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			

Part IV Checklist of Required Schedules (continued)

ı a	Oneckist of Required Octicules (communical)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	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	1		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	W.		
	\$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 Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ļ
	to defease any tax-exempt bonds?	24c		
	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			4.5
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			х
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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			l
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		x
	persons? If "Yes," complete Schedule L, Part III		N. Prince	
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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a		x
L	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
b	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
С	(6.4 - 1) - constate Onto study 1. Port 11/	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
00	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
-	complete Schedule N, Part II	32		X
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	33		X
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	34	X	ļ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	ļ
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	35b	Х	<u> </u>
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	36		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	37		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.	38	X	<u></u>
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			П
	Check if Schedule O contains a response or note to any line in this Part V		Yes	N ₀
		19450	res	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Takes the number of Forms W.2G included on line 1a Foter -0- if not applicable 1b 0	1		
b	Enter the number of Forms VV-2G included on line ra. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c		Appendix of
	reportable gaming (gambling) winnings to prize winners?		m 99	0 (203

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9 9a Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? h Section 501(c)(7) organizations. Enter: 10 10a Initiation fees and capital contributions included on Part VIII, line 12 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter: 11a Gross income from members or shareholders а Gross income from other sources. (Do not net amounts due or paid to other sources 11b against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? 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 13h the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 X excess parachute payment(s) during the year? If "Yes." see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in 17 activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069

Form 990 (2021) BOY SCOUTS OF AMERICA TRUST FUND 31-1243813 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response 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 Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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. Enter the number of voting members included on line 1a, above, who are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X anv other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 6 X Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe on Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 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 X 16a with a taxable entity during the year? 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available 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) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ▶

326 SOUTH THOMPSON AVE

он 45506

JENNY SPENCER

SPRINGFIELD

Form 990 (2021) I	зоч	SCOUTS	OF	AMERICA	TRUST	FUND	31-1243813	Page

Part VII	Compensatio	n of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent										

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 lax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount o 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 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, 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.

See the instructions for the order in N Check this box if neither the organizers						tion c	omi	pensated any current office	er, director, or trustee.	
(A) Name and title	(B) Average hours per week	(de	o not o x, unle	Posi check ess pe	ition more rson i	than or s both s	ne an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ROBERT LAVOIE JE EXECUTIVE DIRECTOR	1.00 40.00	x		х				0	105,567	29,409
(2) MACK FIFE VICE PRESIDENT	1.00 1.00			x				0	0	0
(3)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
		<u> </u>	L			<u></u>				1

	(A) Name and title	(B) Average hours per week	(do	o not o	Posi heck i	tion more	than o s both or/trusto	ne an		(D) Reportable compensation from the			(E) Reportable compensations from relate	e on		(F) mated a of othe	r
	PUO	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organization (W-7 -1099-MISC/ 1099-NEC)	21		organizations 1099-MISC 1099-NEC	(W-2/ C/ 🖎 ——	e org	from the sanization and organ	e n and
										±		***************************************					
													100000000000000000000000000000000000000			× 1111	
										www.rzss							
																	
												,					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											10	5,567			9,409
1b c d	Subtotal Total from continuation sheet Total (add lines 1b and 1c)	ets to Part VII, S	Sect	ion /	١			>						5,567 5,567			9,409
2	Total number of individuals (in reportable compensation from	cluding but not li	mite	d_to	thos	e lis	ted a	bov	e) who	received mo	re than	\$100,					Yes No
3 4 5	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organindividual Did any person listed on line for services rendered to the organization.	complete Schede 1a, is the sum nizations greater	dule of rethar	J for eport 1 \$18 com	suce able 50,00 	h ind con 00? i atio	divide npen: If "Ye n froi	<i>ial</i> sations," of 	on and complet	other compe e Schedule	nsation J for su	from t	he dual			3 4 5	x
	on B. Independent Contractor Complete this table for your fi	ors															
1	compensation from the organi	ve nignest comp zation. Report co (A) business address	mpe	ensal	ion f	or th	ne ca	ilend	dar yea	r ending with	or with	nin the	organizati	on's tax y	ear.	Con	(C) npensation
	Name and	business address									Descrip	GGT OF S	ETVICES				i por roduoti
			.,														
2	Total number of independent received more than \$100,000	contractors (inclu	iding	but m th	not	limit	ed to	the	se liste	d above) wh	10			0			n 990 (2021)

Page 9

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512-514 (C) Unrelated (B) Related or exempt (A) Total revenue function revenue business revenue 1a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, 7,550 and similar amounts not included above g Noncash contributions included in lines 1a-1f 7,550 h Total. Add lines 1a-1f..... > Business Code Service f All other program service revenue g Total. Add lines 2a-2f. 3 Investment income (including dividends, interest, and 161,483 161,483 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6a Gross rents 6a b Less: rental expenses 6b c Rental inc. or (loss) 6c d Net rental income or (loss) 7a Gross amount from (ii) Other (i) Securities sales of assets 7a other than inventory b Less: cost or other Other Revenue basis and sales exps. 7c c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9b b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory Business Code 11a d All other revenue e Total. Add lines 11a-11d 161,483 169,033 Total revenue. See instructions

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			mplete column (A).	П
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	00				
8	Pension plan accruals and contributions (include				
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b					
C					
C					
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
ē	' · · ·				
40	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13 14	Office expenses Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
	(A) amount, not mind 2 to expenses on constant 2.7				
ì					
(1				
(All other expenses				0
25		0	0	<u> </u>	, 0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) if				000

Form 990 (2021) BOY SCOUTS OF AMERICA TRUST FUND Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 9,270 16,505 Cash—non-interest-bearing Savings and temporary cash investments Savings and temporary cash investments
Pledges and grants receivable, net 2 49,408 47,892 3 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Inventories for sale or use _____ 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 1,393,450 1,404,209 Investments—publicly traded securities 11 755,030 553,811 Investments—other securities. See Part IV, line 11 12 12 13 Investments—program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 2,216,401 Total assets. Add lines 1 through 15 (must equal line 33) 2,013,174 16 16 493,395 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 493,395 0 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here ▶ X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 1,115,658 1,411,876 Net assets without donor restrictions 607,348 601,298 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances .

2,216,401 Form 990 (2021)

1,723,006

31

32

33

2,013,174

2,013,174

32

orm	990 (2021) BOY SCOUTS OF AMERICA TRUST FUND 31-1243813				Pag	ge 12
	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		16	59,0	<u>)33</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				
3	Revenue less expenses. Subtract-line 2 from line 1	3			59,0	
4	Revenue less expenses. Subtract-line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2, 01	.3,1	<u> 174</u>
5	Net unrealized gains (losses) on investments	5	1 1/2	21	18,5	<u> 571</u>
6	Donated services and use of facilities	6		-/		
7	Investment expenses	7		-1	L5,6	<u> 580</u>
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-66	52,0	92
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		1,72	23,0	006
Pa	rt XII Financial Statements and Reporting		L			
1 U	Check if Schedule O contains a response or note to any line in this Part XII					П
	Official in Collecture of Containing a foopening of free to any line in the fraction			1,,,,,,,	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 O.					
0-	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		x
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			10.5	AND S	
	·					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			2b	х	
b	Were the organization's financial statements audited by an independent accountant?			20	XXXX	assa.
	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:					
	Separate basis X Consolidated basis Both consolidated and separate basis			23.54500	- Appending	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			.	x	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	<u> </u>	\$355 dis
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.				JANAST .	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					77
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					1
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		<u></u>

Form 990 (2021)

SCHEDULE A

(Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ.

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

BOY SCOUTS OF AMERICA TRUST FUND #439 TECUMSEH COUNCIL

Employer Identification number 31–1243813

Pa	ırt l	Reas	on for Public Charity	Status. (All organizations	must d	omplete	this part.) See instruction	s, //						
The	orga	nization is not	a private foundation because	e it is: (For lines 1 through 12,	check only	one box.)							
1	П	A church, cor	nvention of churches, or ass	ociation of churches described	in section	170(b)(1)(A)(i).							
2	П	A school des	ool described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3	П	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4	П	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	\Box	•		f a college or university owned	or operate	ed by a go	overnmental unit described in		• • • •					
Ŭ	ш	· ·	(b)(1)(A)(iv). (Complete Part	•	o. opo.a.	, ₅ .								
6	П			overnmental unit described in s	section 1	70(b)(1)(A))(v).							
7	Н	•		substantial part of its support from										
•	ш		section 170(b)(1)(A)(vi). (Co		J		3							
8	\Box		munity trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	П				-	ed in conj	unction with a land-grant college	1						
•	ш	or university		of agriculture (see instructions).										
	$\overline{}$	university:					and around a second around							
10	Ш			pt functions, subject to certain			ns, membership fees, and gross	•						
				d unrelated business taxable in										
				0, 1975. See section 509(a)(2)										
11	П			exclusively to test for public safe										
12	X	•	•	•	•			es of						
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check													
	the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.													
	a X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving													
		the suppo	orted organization(s) the pow	er to regularly appoint or elect	a majority	of the dir	ectors or trustees of the							
			0 0	omplete Part IV, Sections A a										
	b	Type II.	A supporting organization su	pervised or controlled in conne	ction with	its suppor	ted organization(s), by having							
					same pers	sons that o	control or manage the supported							
			ion(s). You must complete											
	С	Type III	functionally integrated. A s	upporting organization operated	d in conne	ection with	, and functionally integrated with	1,						
				structions). You must complete				(e)						
	d	that is no	non-runctionally integrated. The	a organization generally must s	atisfy a di	stribution i	with its supported organization requirement and an attentivenes	s						
				nust complete Part IV, Section										
	е			eived a written determination from										
	C	functional	lly integrated, or Type III no	n-functionally integrated suppor	rting organ	nization.								
	f		mber of supported organizati						1					
	g	Provide the f	ollowing information about th	ne supported organization(s).										
	Nam	ne of supported	(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of						
,		ganization		(described on lines 1-10		ur governing	support (see	other support (see						
				above (see instructions))		ment?	instructions)	instructions)						
					Yes	No								
(A)	TE	CUMSEH	COUNCIL #439	10			169 607		1					
			31-0536966	10	X		168,697							
(B)														
(C)														
(D)														
(E)														
					Acceptance		168,697		1					

Schedule A (Form 990) 2021

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2021 (f) Total (c) 2019 (d) 2020 Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2020 Schedule A, Part II, line 14 15 33 1/3% support test-2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ______ 33 1/3% support test-2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

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

(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.)

ion A. Public Support						
dar year (or fiscal year beginning in) 🕒 📗	(a) 2017	(b) 2018	(c) 2019	(d) 2020 🥒	(e) 2021	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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	超 销 碧 "碳					
Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					MARKAGE STORM TO THE TOTAL TO T	
The value of services or facilities furnished by a governmental unit to the organization without charge		***************************************		1 1000000		
Total. Add lines 1 through 5						
Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
Public support. (Subtract line 7c from						
ion B. Total Support						
dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
Amounts from line 6						
Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					,	
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 regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
Total support. (Add lines 9, 10c, 11,						
First 5 years. If the Form 990 is for the or	rganization's first,					> 🔲
Public support percentage for 2021 (line 8	, column (f), divide	ed by line 13, colur				%
					16	%
tion D. Computation of Investme	nt Income Pe	rcentage				
	ina 10a saluma (), divided by line 1	3, column (f))			<u>%</u>
Investment income percentage for 2021 (I	ine roc, column (i	•				
Investment income percentage from 2020	Schedule A, Part I	II, line 17				%
Investment income percentage from 2020 to 33 1/3% support tests—2021. If the orga	Schedule A, Part I nization did not ch	II, line 17 neck the box on line	e 14, and line 15 is	more than 33 1/3	%, and line	. [7]
Investment income percentage from 2020 s 33 1/3% support tests—2021. If the orga 17 is not more than 33 1/3%, check this b	Schedule A, Part I nization did not chox and stop here	II, line 17neck the box on line. The organization	e 14, and line 15 is qualifies as a publ	more than 33 1/3 icly supported org	%, and line	. [7]
Investment income percentage from 2020 to 33 1/3% support tests—2021. If the orga	Schedule A, Part I nization did not ch ox and stop here nization did not ch	II, line 17 neck the box on line The organization neck a box on line	e 14, and line 15 is qualifies as a publ 14 or line 19a, and	s more than 33 1/3 icly supported org line 16 is more th	e%, and line anization	▶□
	dar year (or fiscal year beginning in) Gifts, grans, contributions, and membership fees received. (bb not include any 'unusual grants.) 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support. (Subtract line 7c from line 6.) ion B. Total Support dar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the or organization, check this box and stop her tion C. Computation of Public Support percentage for 2021 (line 8) Public support percentage from 2020 Schettion D. Computation of Investmet	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from other than disqualified persons 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 Add lines 7a and 7b Public support. (Subtract line 7c from line 6.) ion B. Total Support dar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization's first, organization, check this box and stop here then C. Computation of Public Support Percer Public support percentage for 2021 (line 8, column (6, divide Public support percentage for 2021 (line 8, column (6, divide Public support percentage for 2020 Schedule A, Part III, litton D. Computation of Investment Income Pe	Cits, grants, contributions, and membriship fees received. (Do not include any unusual grants.) 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses activities not included on line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization's first, second, third, fourt organization, check this box and stop here Lion D. Computation of Public Support Percentage Lion D. Computation of Investment Income Percentage	The value of services or facilities from activities that are not an unrelated trade or business and or services performed, or facilities from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 2 and 3 received from disqualified persons Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7 a and 7b Public support. (Subtract line 7c from line 6.) Total Support Bors included on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here Bion C. Computation of Public Support Percentage Public support percentage for 2021 (line 8, column (f), divided by line 13, column (ff)) Public support percentage for 2020 Schedule A, Part III, line 15. Bion D. Computation of Investment Income Percentage	Lar year (or fiscal year beginning in) Cas, genes, contributions, and membrating his second to the control of the control	Second S

Page 3

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

183

Section	A. All Supr	ortina (Draanizations	1

- Are all of the organization's supported organizations listed by name in the organization's governing 1 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.
- Did the organization have any supported organization that does not have an IRS determination of status 2 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- 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.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- 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.
- 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).
- 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).
- 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.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - 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.)

Ì	7	Yes	No
	1	X	
	2		x
	 3a		x
	3b		
	3с		
	4a		x
	4b		
	4c		
			y
	5a 5b 5c	\$100 m	
	6		×
	7		X
	8		x
	9a		x
	9b		
	90		х
	10a		x
	10b		
Sch	edule	A (Form	990) 2021

11 Has the organization accepted a gift or contribution from any of the following porsons? 1 A person who directly or indirectly contribution from any of the following porsons? 1 A person who directly or indirectly controls, either alone or logother with persons described on lines 11b and 11b before the governing body of a supported graganization? 2 A family, interfield of appeared dispersion and in a list show? 3 A family interfield of appeared dispersion and in a list show? 4 A family interfield of appeared dispersion and in a list show? 5 A family interfield of appeared dispersion and interfield of a list show? 5 A family interfield of appeared dispersion and interfield of a list show the supported organization's officers, criticals as all times during the text year? If "Th's election is the capitalization and organization's officers, criticals in all times during the text year? If "Th's election is the capitalization and more than one supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, criticals as all times during the text year? 5 Did the organization possible for the beriefild of any supported organization other than the supported organization of section and the supported organization other than the supported organization of the supported organization other than the supported organization of the organization of the supported organization of the organization organization supported organization organization. 1 Ween a majority of the organization ditent, election or fruitsees during the tax year also a majority of the d		e A (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST FUND 31-124381	3		Page 5
11 In this the capacitation accepted a gift or contribution from any of the following persons? A person who checkly or influency controls, either also are to specifier with persons described on fines 11b and 11b below the governing body of a supported organization and the property of the person of of th	Pan	Supporting Organizations (continued)		Yes	No
a A person who directly of indirectly controls, either alone or together with persons described on lines 1th and 1to below the governing body of a supported ingrantation? b A family, member of a period described in line 1th above? c A 33% controlled eithly of a supported programment of the grant of the grant of the grantation of grantation of the gra	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family,mentified of puritipations despitited on line 11s above? If 17e is not 11s, and 11s above? If 17e is not 11s, and 11s above? If 17e is not 11s, and 11s, a	а				
c A 35% controlled whitly grild beginn described on the 1th cgril to above the Year to tige into, into, in 1to, year to the circumstance of the governing body, efficars acting in their official capacity, or memberahip of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations forces, directors, or trustees at all mise during the tax year if it is not trusteed and times during the tax year if it is not supported organizations apported organization and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated, supervised, or controlled the organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated, supervised, or controlled the supported organization of the benefit of any supported organization of the benefit of any supported organization of the benefit of any supported organization of the top organization of the supported organization of the third to provide the supported organization of the supported organization organization of the supported organization of the supported organization organization organization organiz					
Section B. Type I Supporting Organizations 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 V thou the supported organization's officers, directors, or trustees at all times during the tax year? If 'No', 'describe in Part V thou the supported organization's officers, directors, or trustees were allocated among the supported organization operated for supported organization and more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operated for the benefit of any supported organization of the than the supported organization operated organization operated organization's than organization of the third than the supported organization's the trust in the supported organization's or trustees of each of the organization's upported organization's that the supported organization's or trustees of each of the organization's upported organization's that the supported organization's provided organization			11b	<u>ji</u>	<u> </u>
Section B. Type I Supporting Organizations 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 officers, directors, or trustees were efficiently operated, supervised, or controlled the organization's activities. If the organization than one supported organization, describe how the powers to appoint and/or renove officers, directors, or trustees ever efficienced among the supported organization, describe how then powers to appoint advice the benefit of any supported organization of the tent the supported organization device than the supported organization of the companization of the supported organization or management of the supported organization or the supported	С			7	37
1 Did the governing body, members of the governing body, officars 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 organizations officers, directors, or trustees at all times during the tax year? If Wo? "describe in Part VI have the supported organizations" describe how the powers to appoint and/or renove officers, directors, or trustees were allocated among the supported organization, describe how the powers to eppoint and/or renove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization there than the supported organization operate for the benefit of any supported organization there than the supported organization operated cannot out the purposes of the supported organization (*P*e*,* explain in Part VI have providing such benefit cannot out the purposes of the supported organizations (*P*e*,* explain in Part VI have providing such benefit cannot out the purposes of the supported organizations (*P*e*,* explain in Part VI have control or trustees of each of the organizations are supported organizations (*P*e*) of *P*o*,* except the interest of the supporting organization was vested in the same persons that controlled or managed the supported organizations (*P*e*) or *P*o*,* except the organization provide to each of its supported organizations, by the last day of the fifth month of the organization supported organizations (*P*e*explain*) or *P*explain*, *P*explain*	0 = 4!	provide detail in Part VI.	<u> 110</u>	<i>y</i>	
1 Did the governing body, members of the governing body, officors acting in their official capacity, or membership of one or more supported againstance have the power to regularly appoint or elect at least a majority of the organization's officors, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization's describe how the powers to appoint addor some controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint addor some controlled the supported organization and what conditions or restrictions, If any, applied to such powers during the tax year. 2 Did the organization operated, supervised, or controlled the supporting organization of the than the supported organization(s) that operated, supervised, or controlled the supporting organization and than the supported organization of the than the supported organization of the supporting organizations. 2 Expension 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 directors or trustees of each of the organization's supported organizations. 3 Eventually a supporting organization was vested in the same persons that controlled or managed the supported organization's. 4 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of the supported organization's trayer, (i) a copy of the Form 990 that was most recently filed as of the data day of the fifth month of the organization provides on the organization majority of the organization maintained a close and continuous working relationship with the supported organization's upported organization's querient policies and in directing the use of the organization's apported organization's apported organization's as apported organization's active the organization's as apported organization's active the organization's as a	Section	on B. Type I Supporting Organizations		Vos	No.
more supported organizations have the power to regularly appoint or elect at least a majority of the organization officers, directors, or trustees at all times during the tax year? if No? 'describle in Part V how the supported organizations officers, directors, or trustees was all mines during the tax year? if No? 'describle in Part V how the supported organization operate for the benefit of any supported organization operate for the benefit of any supported organization operate for the benefit of any supported organization operated organization operated carried out the purposes of the supported organization operated, supervised, or controlled the supporting organization (*Yes,* explain in Part V how providing such benefit carried out the purposes of the supported organization (s) that operated, supervised, or controlled the supporting organization (*Yes,* explain in Part V how providing organizations of the organizations of the organizations of the organization of the organizations of the supported organizations (s) if No.* describe in Part V how control or management of the supporting organizations (s) if No.* describe in Part V how control or management of the supporting organizations (s) if No.* describe in Part V how control or managed the supported organizations was vested in the same persons that controlled or managed the supported organizations (s) if No.* describe in Part V how control organizations (so year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) or year (ii) and the organizations governing documents in effect on the date of notification, and (ii) copies of the organizations governing documents in effect on the date of notification, and (ii) copies of the organization supported organizations and organizations (ii) described on line 2, above, did the organization is the pert of the organization with the organization with the organization is a	4	Did the reversing hady, members of the governing hady officers noting in their official canacity, or membership of one or		169	INO
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 arganizations activities. It the organization are than one supported organization, describe how the powers to appoint anctor remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated, supervised, or controlled the supporting organization officer than the supported organization of the thin the supported organization of the thin the supported organization of the time that the supported organization of the time that the supported organization of the time that the supported organization of the supported organizations of the supported organizations of the supporting organizations of the supported organizations of the supporting organizations of the supporting organizations or trustees of each of the organizations's supported organizations of the organizations of the organizations's supported organizations's supported organizations of the organizations of the supported organizations's support	7				
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 efficers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization operate for the benefit of any supported organization other than the supported organization operated, supervised, or controlled the supporting organization of the results of the organization operated out the purposes of the supported organization (s) that operated, supervised, or controlled the supporting organization (s) that operated, supervised, or controlled the supported organization (s) that operated, supervised, or controlled the supported organization (s) that operated, supervised, or controlled the 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 management of the supporting organizations was vested in the same persons that controlled or managed in supported organizations and the supported organizations and the supported organizations of the supported organizations of the supported organizations and the support provided during the prior tax year, (i) a copy of the Form 950 that was most recently filed as of the date of notification, and (iii) copies of the organization's supervised produces of the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed organization's powering or (i) service organization's ordicers, directors, or trustees either (i) appointed organization's powering or (ii) service organization's org					
organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported 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 V I how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations. Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization is the supported organization is a supported organization was vested in the same persons that controlled or managed the supported organization is a supported organization was vested in the same persons that controlled the supported organization was vested in the supported organization is a supported organization was organization. Supported organization is a supported organization was organization in each of the organization was received in the supported organization is supported organization.					
supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Old the organization 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? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization? If have generated, supervised, or controlled the supporting organizations Soction C. Type II Supporting Organizations 1 Were a majority of the organization directors or trustees during the tax year also a majority of the director's or trustees of each of the organization was upported 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 the supported organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization supported organizations and the same persons that controlled or managed the supported organization is only the provided organization is only to the organization is					
2 Did the organization operate for the benefit of any supported organization (the supported organization) that operated, supervised, or controlled the supporting organization (the "es" explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations. 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization's). 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's fax year, (i) a cryp of the Form 890 that was most recently field as of the date of notification, and (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, discostor, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization's provided? 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant volce in the organization's investment policies and in discelling the use of the organization's accordance or assets at all times during the tax year? If "Yea," describe in Part VI the vole the organization's apported organization supported organization supported organization supported organization supported organization's apported organization supported organization's and the theory of the organization's provided organization's provided organization's provided organization's provided organization's provided organization's provided organiza			1_1_	X	
organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part Winow providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations 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 Winow control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization from your time notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 900 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's opporting or the governing body of a supported organization. If "No," explain in Part V how the organization maintained a close and continuous working relationship with the supported organization's income or assets at all times during the tax year? If "Yes," describe in Part V the role the organization's income or assets at all times during the tax year? If "Yes," describe in Part V the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations 1 Oheck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions). 2 Activities Test. Answer lines 2 a and 25 below. a Did substantially all of the organization's activities during the tax year directly furthered their exempt purposes, how the organization is the perent of each of its supported organizations, and	2	• • • • • • • • • • • • • • • • • • • •			
Now providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations 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's supported organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) 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 field as of the date of notification, and (iii) coples of the organization's powering documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, cirectors, or trustees either (ii) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization's III "No," explain in Part VI how the organization supported active organization's investment policies and in directing the use of the organizations have a significant volce in the organization's investment policies and in directing the use of the organization's supported organization's supported organization substitute that the organization used to satisfy the Integral Part Test during the year (see Instructions). Section 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). 2 Activities Test. Answer lines 2 as and 2 below. 3 Did substantiall					
Section C. Type II Supporting Organizations 1					
Were a majority of the organization's directors or fustees 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 the supported organization organizations. 1		supervised, or controlled the supporting organization.	2		X
or trustees of each 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 managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 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 the organization is described on line 2, above, did the organization's supported organizations have a significant voice in the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section 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). 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 2 Activities Test. Answer lines 2a and 2b below. 2 Did substantially all of the organization sacitivities during the tax year directly further the exempt purposes of the supported organization is the parent of each of its supported organizations, and how the organization how these activities the the organization has a thin the organization has the power to regularly apoint or elect a majority	Section	on C. Type II Supporting Organizations			
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 the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's governing body of a supported organization, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, and (iii) copies of the organization's provided? 2 Were any of the organization's directors, or trustees either (i) appointed or elected by the supported organization organization's organization organization's vibration and interest organization organization organization as a significant volce in the organization with the supported organization's a supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization satisfied the Activities Test. Complete line 2 below. 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions). 2 Activities Test. Answer lines 2 and 2b below. 2 Activities Test. Answer lines 2 and 2b below. 3 Did the organization supported organization's activitie			V-314,588.	Yes	<u>No</u>
or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's of the relationship described on line 2, above, did the organization? If 'No," explain in Part VI how the organization's land or distributions in the organization's investment policies and in directing the use of the organization's supported organization's supported organization's supported organization's supported organization's supported organization's activities Test. Complete line 3 below. 1 Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see instructions). 2 Activities Test. Answer lines 2 and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's activities during the tax year directly further the exempt purposes, how the organization was responsive to those supported organizations, and how the organization's word that these activities constituted substantially all of its activities. b Did the organization was responsive to the organization's position that its supported organization's	1				
Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's originalization's originalization's originalization's originalization's originalization's originalization's originalization's originalization's originalization's investment policies and in directing the use of the organization's a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's supported organization's supported organizations played in this regard. Section 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). 2 Activities Test. Answer lines 2 and 25 below. 3 Did substantially all of the organization's activities activities. Test organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 4 Activities Test. Answer lines 2 and 25 below. 5 Did the activities described on line 2, above, constitute during the tax year directly further the exempt purposes of the supported organization's audaptation was responsive to those supported organizations, and how the organization determined that these activities out of the organization's supported organization, and how the organization determined that these activities constituted substantially all of its activities. 5 Did the activities described on line					
Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 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 the organization and continuous working relationship with the supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section 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). 2 Activities Test. Answer lines 2a and 2b below. 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's activities during the tax year directly furthered their exempt purposes of the supported organization's activities during the tax year 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 the organization was responsive of the organization's supported or			1000000	2033999	
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 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 the organization maintained a close and continuous working relationship with the 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 supported organizations played in this regard. Section 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). a The organization satisfied the Activities Test. Complete line 2 below. b The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 1 Check the box next to the method that the organization was responsive? If "Yes," then in Part VI identify those supported organizations and by below. 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organization's positive directly further the 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 that, but for the organization's position that its supported organization (s) would have engag	<u> </u>				
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 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's, in Part VI how the organization's bear a significant viole 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 supported organizations played in this regard. Section 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). 1 The organization satisfied the Activities Test. Complete line 2 below. 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organization activities during the tax year directly further the exempt purposes of the supported organizations activities during the tax year directly further the exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization's benefit that these activities constituted substantially all of its activities. 2 b Did the organization was responsive to regularly	Section	on D. All Type III Supporting Organizations		Voe	No
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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 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 V thow the organization maintained a close and continuous working relationship with the supported organization(s). 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant volce 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 V the role the organization's supported organizations played in this regard. Section 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). 1 The organization satisfied the Activilies Test. Complete Iline 2 below. 2 Activities Test. Answer lines 2a and 2b below. 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organizations was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations was responsive to those supported organization determined that these activities cons		Did the association was life to each of its supported organizations, by the last day of the fifth month of the		103	
year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) coples of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 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 the organization maintained a close and continuous working relationship with the supported organization(s). 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 supported organizations played in this regard. Section 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). 1 The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities that, but for the organization's involvement, one or more of the organization's supported organizations, and how the organization's involvement. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of ea	1				
organization's governing documents in effect on the date of notification, to the extent not previously provided? 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's If "No," explain in Part VI thow the organization as income or assets at all times during the tax year? If "Yes," described 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 supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1					
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 the organization maintained a close and continuous working relationship with the supported organization(s). 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 supported organizations played in this regard. Section 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). 2 Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these 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 engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization's position that its supported organizati			1		
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organizations). 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 income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section 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). 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organizations activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the 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 described on line 2a, above, constitute activities that, but for the organization determined that these activities described organization's supported organization's position that its supported organization's movivement. 3 Parent of Supported Organizations. Answer lines 3 and 3b below. 4 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	2				
the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section 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). 1 The organization satisfied the Activities Test. Complete line 2 below. 2 Activities Test. Answer lines 2a and 2b below. 2 Activities Test. Answer lines 2a and 2b below. 2 Activities Test. Answer lines 2a and 2b below. 3 Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization determined that these 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 these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities on the organization's position that its supported organization(s) would have engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities of the organization's position that its supported organization's	2	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section 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). 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions). 1 The organization satisfied the Activities Test. Complete line 2 below. 2 Into organization supported a governmental entity, Describe in Part VI how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. 3 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. 3 Did the activities constituted substantially all of its activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of the supported organization of direction over the policies, programs, and activities of each of the supported organization of direction over the policies, programs, and activities of each of the supported organizations? If "Yes " describe			2		
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 supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations 1	3				
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. Complete In Integrated Integrat	Ū				
Section 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). Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. Complete line 3 below. The organization supported a governmental entity (see instructions).		supported organizations played in this regard.	3		
The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how 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 described on line 2a, above, constitute activities. Did the activities constituted substantially all of its activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in these activities but for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. 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. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of the supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard.	Secti	on E. Type III Functionally Integrated Supporting Organizations	···		
The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations is on 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. 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 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. Parent of Supported Organizations. Answer lines 3a and 3b below. 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of the supported organizations? If "Yes" or Roy," provide details in this regard.	1).		
The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations in 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. 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 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. Parent of Supported Organizations. Answer lines 3a and 3b below. 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. 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 played by the organization in this regard.	а				
Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations) 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. 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 involvement. 2 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard.	b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations) 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. 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 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. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	С		uctions,	Von	No
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. 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. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b	2		Talkasas.	res	NO
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. 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b	а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b		the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identity			
that these activities constituted substantially all of its activities. 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b		those supported organizations and explain now these activities directly furthered their exempt purposes,			
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 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b			2a	e 20 mari prizina	
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. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b					
"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. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b	a	bid the activities described on line 2a, above, constitute activities that, but for the organization's			
have engaged in these activities but for the organization's involvement. 3 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b		"You " explain in Part VI the reasons for the organization's position that its supported organization(s) would			
Parent of Supported Organizations. Answer lines 3a and 3b below. a 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. 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 played by the organization in this regard. 3b			2b		
a 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. 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 played by the organization in this regard. 3b	2	Parent of Supported Organizations, Answer lines 3a and 3b below.			
trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 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 played by the organization in this regard. 3a 3b		Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
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 played by the organization in this regard.	u	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard.	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 played by the organization in this regard.		\ <u>\</u>	000) 2021

Sched	ule A (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST	FU	ND 31-1243	813 Page 6
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	<u>aniza</u>	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov	v. 20,	1970 (explain in Part VI). S	See
	instructions. All other Type III non-functionally integrated supporting organizations must	t comp	lete Sections A through E	
Sec	tion 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		L. // N/
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		
	tion 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		
	o Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):	Wallet.		
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		
Sec	tion 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			
J	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated	Туре	III supporting organization	
•	(see instructions).			

	AMERICA TRUST FU		813 Page 7
Part V Type III Non-Functionally Integrated 509(a	a)(3) Supporting Organiza	tions (continued)	Y
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt	purposes		
2 Amounts paid to perform activity that directly furthers exempt pu			
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes o	N. 1/ W		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required—provide	de details in Part VI)		
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which the or	rganization is responsive		
(provide details in Part VI). See instructions.			
9 Distributable amount for 2021 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
	(i)	(ii)	(iii)
Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
		Pre-2021	Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021			
(reasonable cause required-explain in Part VI). See			
instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
I Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from			
Section D, line 7:			
a Applied to underdistributions of prior years			and the statement of the section of the
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021 Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021		A stranscriptor in a residence in the residence	Schedule A (Form 990) 202

Schedule A (For	m 990) 2021		ВС	Y SC	DUTS	OF	AMERI	CA T	TRUST	FUND		31-124	3813	Page 8
Part VI	Supplei	mental	Informa	tion. Pro	ovide the	e exp	olanations	s requ	ired by F	Part II, li	ne 10;	Part II, line, and 11c	e 17a or	17b; Part
	B. lines	1 and 2:	Part IV	 Section 	n C. line	1: P	art IV. Se	ection	D, lines	2 and 3	}; Part∃	IV, Sectior	ı E, lines	1c, 2a, 2b, Section E,
į.	lines 2,	5, and 6	₹Also c	omplete	this par	rt for	any add	itional	informat	tion. (Se	e instr	uctions.)	,	
				3 7						<u>)</u>	<u> </u>			<u> </u>
								,						

	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	,									
, ,														
												. , , , , , , , , , , , , , , ,		
•														
					• • • • • • • • •									
•														
•								• • • • • • • • • • • • • • • • • • • •						
												• • • • • • • • • • • • • • • • • • • •		

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.

Open to Public

OMB No. 1545-0047

Inspection

	of the organization	. 89	Employer Identification number
	OY SCOUTS OF AMERICA TRUST FUND		31-1243813
3 1 20	439 TECUMSEH COUNCIL		
Pa	rt I Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" on F	or Other Similar Funds or A	Accounts.
	Complete if the organization answered Tes join	(a) Donor advised funds	(b) Funds and other accounts
			(b) I dida and obtain 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	t the control bald is deposed and	
5	Did the organization inform all donors and donor advisors in writing tha		☐ Yes ☐ No
	funds are the organization's property, subject to the organization's exc		
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or don		☐ Yes ☐ No
7.7			Tes NO
Pa	art II Conservation Easements.	Form 990 Part IV line 7	
	Complete if the organization answered "Yes" on I		
1	Purpose(s) of conservation easements held by the organization (check		lung atout land area
	Preservation of land for public use (for example, recreation or edu		•
	X Protection of natural habitat	Preservation of a certified hi	ISTOTIC STRUCTURE
	X Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a cons	Held at the End of the Tax Year
	easement on the last day of the tax year.		
а			366 00
b	•		
C			2c
d	Number of conservation easements included in (c) acquired after 7/25/		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	ation during the
	tax year ▶		
4	Number of states where property subject to conservation easement is	located - 1	
5	Does the organization have a written policy regarding the periodic more		X Yes No
	violations, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservation of	easements during the year
	2		A large than some
7	Amount of expenses incurred in monitoring, inspecting, handling of vio	plations, and enforcing conservation ease	ments during the year
	> \$		4 0
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)((I) Yes No
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easer	nents in its revenue and expense stateme	ent and
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that	describes trie
	organization's accounting for conservation easements.	Historical Transumos or Other	Similar Assets
Pa	art III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" on	Form 990 Part IV line 8	Ollilliai Assets.
	Complete ii trie organization answered Tes on	totti ood, rait iv, mio o.	poo shoot works
1a	If the organization elected, as permitted under FASB ASC 958, not to	report in its revenue statement and balan	e of public
	of art, historical treasures, or other similar assets held for public exhib	emonts that describes these items	o or public
	service, provide in Part XIII the text of the footnote to its financial state	ort in its revenue statement and halance	sheet works of
b	If the organization elected, as permitted under FASB ASC 958, to reput	on adjustion or research in furtherance of	of public service.
	art, historical treasures, or other similar assets held for public exhibition	in, education, or research in furtherance t	c. pas sas
	provide the following amounts relating to these items:		▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		\$
	(ii) Assets included in Form 990, Part X	r other similar assets for financial gain n	rovide the
2	If the organization received or held works of art, historical treasures, or	ing to these items:	TOTIGO UTO
	following amounts required to be reported under FASB ASC 958 relat	ing to these items.	▶ \$
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		Schedule D (Form 990) 2021

4	Describe	in	Part	XIII	the	intende	d uses	of the	organization's	endowment funds.	
n.	4 1/1				: 1 .	dinac	and	Earli	nmont		

Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value (c) Accumulated (b) Cost or other basis (a) Cost or other basis Description of property depreciation (investment) (other) 1a Land **b** Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

3a(ii)

Schedule D (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST FUND 31-1243813 Page 3 Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (b) Book value (c) Method of valuation: (a) Description of security or category Cost or end-of-year market value (including name of security) 3 8 (1) Financial derivatives (2) Closely held equity interests 362,412 MARKET (3) Other VANGUARD INFORMATION TECHNOLOG A. 274,061 MARKET VANGUARD INSTITUTIONAL INDEX FUND (B) VANGUARD HEALTH CARE ETF 118,557 MARKET 755,030 Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related. Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (b) Book value (c) Method of valuation: (a) Description of investment Cost or end-of-year market value (1) (2) (3) (4)(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value (a) Description (1) (2) (3) (4) (5) (6) (7) (8) (9) \triangleright Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (a) Description of liability Federal income taxes (1) (2) (3) (4) (5)(6) (7)(8) (9)

chedule D (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST F	JND	31-1243813	3	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen	its Wii	th Revenue per Ret	turn.	
Complete if the organization answered "Yes" on Form 990, Pa				267,717
1 Total revenue, gains, and other support per audited financial statements			1	201,111
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ایا	010 E94		
a Net unrealized gains (losses) on investments	2a	218,571		
b Donated services and use of facilities	2b/			
c Recoveries of prior year grants	2c 2d	-104,207		
d Other (Describe in Part XIII.)			2e	114,364
e Add lines 2a through 2d			3	153,353
3 Subtract line 2e from line 1				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	15,680		
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b	<u> </u>		4c	15,680
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	169,033
Part XII Reconciliation of Expenses per Audited Financial Stateme			Retur	n.
Complete if the organization answered "Yes" on Form 990, Pa				
1 Total expenses and losses per audited financial statements			1	493,395
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
a Donated services and use of facilities	2a			
b Prior year adjustments	2b			
c Other losses	2c	400 005		
d Other (Describe in Part XIII.)	2d	493,395	30,480	402 205
e Add lines 2a through 2d			2e	493,395
3 Subtract line 2e from line 1	rI.		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b			
b Other (Describe in Part XIII.)			4c	
c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		,	5	
Part XIII Supplemental Information.				
rovide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV,	lines 1b	and 2b; Part V, line 4; Part V	art X,	line
Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny addil	tional information.		
PART II, LINE 5 - MONITORING AND ENFORCEMENT	POI	ICY		
THE TECUMSEH LAND TRUST COMES OUT ONCE A YEA	R AN	ID INSPECTS T	HE	GROUNDS TO
ENSURE COMPLIANCE.				
DADE IL TIME 4 - IMPENDED LICES FOR FUNDAMENT	אודים	IDS		
PART V, LINE 4 - INTENDED USES FOR ENDOWMENT				
TO PROVIDE FUNDS FOR THE BENEFIT OF THE TECU	MSE	COUNCIL BOY	SC	COUTS OF
10 11001011 10000 1000				
AMERICA TO COVER OPERATING AND CAPITAL EXPEN	DITU	JRES.		
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
PART X - FIN 48 FOOTNOTE				
THE COUNCIL IS A NOT-FOR-PROFIT ORGANIZATION	THA	T IS EXEMPT	T.K(DM INCOME
	D E	ነ1 (ሮ\ /3\	ישני	ΤΝΨΕ:ΡΝΔΤ.
TAXES UNDER SECTION 501(A) AS DESCRIBED UNDE	K 50) + (C) (3) OF 1		
REVENUE CODE AND COMPARABLE STATE LAW AS A	מעאר.	TTABLE ORGANI	ZA	TION, WHEREBY
KEVENUE CODE AND COMPARABLE STATE HAW AS A				

ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512 OF THE CODE, SUBJECT TO FEDERAL INCOME TAX. THE COUNCIL CURRENTLY HAS NO UNRELATED BUSINESS INCOME, ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED. THE COUNCIL HAS ADOPTED THE PROVISIONS OF THE FASE STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (ASC 740-10-25). THE COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISIONS; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALITIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER SETTLEMENT TRUST CONTRIBUTION \$ 493,395	Schedule D (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST FUND 3 Part XIII Supplemental Information (continued)	1-1243813	Page 5
BUSINESS INCOME. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED. THE COUNCIL HAS ADOPTED THE PROVISIONS OF THE FASB STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (ASC 740-10-25). THE COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISIONS; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207	ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION	N 512 OF THE CODE	<i>(</i>
THE COUNCIL HAS ADOPTED THE PROVISIONS OF THE FASB STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (ASC 740-10-25). THE COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISIONS; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	Dinne incharian		,
FOR UNCERTAINTY IN INCOME TAXES (ASC 740-10-25). THE COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISIONS; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	RECORDED.		
BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISIONS; ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	THE COUNCIL HAS ADOPTED THE PROVISIONS OF THE FASB S	STANDARD ON ACCOUN	TING
WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. FOR THE YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	FOR UNCERTAINTY IN INCOME TAXES (ASC 740-10-25). THE	COUNCIL DOES NOT	
YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL STATEMENTS. PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX PROVISI	ONS; ACCORDINGLY,	IT
PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TA	X BENEFITS. FOR T	HE
PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	YEAR ENDED DECEMBER 31, 2021, THERE WERE NO INTEREST	OR PENALTIES	
TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	RECORDED OR INCLUDED IN ITS CONSOLIDATED FINANCIAL	STATEMENTS.	
TRANSFER TO COUNCIL \$ -104,207 PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER			
PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINAN	ICIALS - OTHER	
	TRANSFER TO COUNCIL	\$ -104,	207
SETTLEMENT TRUST CONTRIBUTION \$ 493,395	TRANSFER TO COUNCIL	\$ -104,2	207
			207
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
·	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	
	PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINA	ANCIALS - OTHER	

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service 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.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization BOY SCOUTS OF AMERICA TRUST FUND Employer Identification number #439 TECUMSEH COUNCIL 31-1243813
FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
THE ORGANIZATION EXISTS TO PROVIDE ON-GOING SUPPORT FOR TECUMSEH COUNCIL
#439, BOY SCOUTS OF AMERICA. IT RAISES FUNDS & DISTRIBUTES INCOME TO THE
COUNCIL FOR THE PURPOSE OF PREPARING YOUNG PEOPLE TO MAKE ETHICAL & MORAL
CHOICES OVER THEIR LIFETIME BY INSTILLING IN THEM THE VALUES OF THE SCOUT
OATH & LAW.
FORM 990 - ORGANIZATION'S MISSION
THE ORGANIZATION EXISTS TO PROVIDE ON-GOING SUPPORT FOR TECUMSEH COUNCIL
#439, BOY SCOUTS OF AMERICA. IT RAISES FUNDS & DISTRIBUTES INCOME TO THE
COUNCIL FOR THE PURPOSE OF PREPARING YOUNG PEOPLE TO MAKE ETHICAL CHOICES
OVER THEIR LIFETIME & ACHEIVE THEIR FULL POTENTIAL USING THE METHODS WHICH
ARE NOW IN COMMON USE BY THE BOY SCOUTS OF AMERICA.
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
A COPY OF FORM 990 IS PROVIDED TO EACH MEMBER OF THE ORGANIZATION'S
GOVERNING BODY PRIOR TO FILING. QUESTIONS OR CONCERNS ARE ADDRESSED AT A
SUBSEQUENT BOARD MEETING.
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE VICE PRESIDENT OF ADMINISTRATION WILL BE IN CHARGE OF MONITORING AND
ENFORCING COMPLIANCE ON A REGULAR BASIS.
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

GOVERNING DOCUMENTS, POLICIES & FINANCIAL STATEMENTS ARE AVAILABLE

THE

02952B 06/24/2022 8:54 AM Pg 29

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

BOY SCOUTS OF AMERICA TRUST FUND

Department of the Treasury Internal Revenue Service Name of the organization

#439 TECUMSEH COUNCIL

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

Open to Public OMB No. 1545-0047 Inspection 2021 Employer identification number

31-1243813

33

(f)
Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax vear. (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line (c)
Legal domicile (state or foreign country) (b) Primary activity (a)
Name, address, and EIN (if applicable) of disregarded entity Part II Part € 3 ල Ξ 9

one or more related tax-exempt organizations during the tax year.	lax yeal.						
	(b) Primary activity	(c) Legal domidle (state	(d) Exempt Code section	(e) Public charity status	(f) Direct controlling	(g) Section 512(b)(13) controlled entity?	(b)(13) ntity?
		or foreign country)		(if section 501(c)(3))	entity	Yes	S S
(1) TECUMSEH COUNCIL #439 BOY SCOUTS OF							
326 SOUTH THOMPSON AVENUE 31-0536966					,		
SPRINGFIELD OH 45506	PROMOTE SC	НО	501C3	10	N/A		×
(2)							
(3)					40		
(4)							
(5)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{
m DAA}$

Schedule R (Form 990) 2021

(1)	domicial country)			(r) Share of total	(g) Share of end-of-		(i) Code V—UBI	General or	(k) Percentage
	country	Ollect Co.	income (related, unrelated, excluded from tax under	awoul	year assets	portionate alloc.?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ownership
			sections 512-514)			Ves No		Ves No	
)							
Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	Taxable as a sed organization	Corporation s treated as a	or Trust. Com corporation or	plete if the or trust during th	ganization answe		on Form 990, Part IV	oart IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp., or trust)	(f) Share of total income	(g) Share of end-of-year assets		(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
		(Carrier and Carrier and Carri		,					Yes No
							,,,,,		

31-1243813

Schedule R (Form 990) 2021 BOY SCOUTS OF AMERICA TRUST FUND

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1.if any entity is listed in Parts II, III, or IV of this schedule.	organizations listed in Part			Yes
isacuolis will die of more relate		<u>``</u>		ç
				<u>a</u>
				1 <u>0</u>
				10
				1d
				1e
				14
				19
				4
				i.
				1j
				*
Performance of services or membership or fundraising solicitations for related organization(s)				=
ted organization(s)				-E
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n X
				19
				10
				19
				1t ×
				18
who must complete this li	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	nships and transactior	n thresholds.	
	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ount involved
	ж	168,697	FMV	
				والمستدارية والمستدارية والمتال
			Schedule F	Schedule R (Form 990) 2021

Part VI

Page 4

BOY SCOUTS OF AMERICA TRUST FUND

31-1243813 Schedule R (Form 990) 2021

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

(a)	(6)		(e)	0	(6)		1	(E)	6	(<u>K</u>
Primary activity Legal	Legal	Predominant /	Are all partners	Share of total income	Share of end-of-year		onate ns?	Code V—UBI amount in box 20	General or managing	Percentage ownership
			501(c)(3) organizations?		assets			of Schedule K-1 (Form 1065)	partner?	
0			Yes No			Yes	Š		Yes No	
					***************************************				- ·	
:										

		•								
	-	44.47.77								
					:					

·										
•										
										i
:										
								Schedu	le R (Fоm	Schedule R (Form 990) 2021

	Form 990) 2021	BOY i	SCOUTS	OF AME	RICA TR	UST FUL	<u>ں</u>	1-12438	12	Page 5
Part VII	Provide ac	entai infor Iditional inf	rmation. formation f	or response	es to questi	ons on Sch	edule R. S	ee instructi	ons.	
)
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
• • • • • • • • • • • • • • • • • • • •										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
										,
								. , , , , , , , , , , , , , , , , , ,		
•										
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
					· · · · · · · · · · · · · · · · · · ·					
	,									
•										
						4				
								•••••		
	,,			. ,						