Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

A F	or the	2021 calendar year, or tax year beginning and	ending							
B c	heck if pplicable	C Name of organization CRATER LAKE COUNCIL, INC		D Employer identific	cation number					
	Addres	BOY SCOUTS OF AMERICA								
	Name change	02 0206020								
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 3039 HANLEY ROAD	, and the second							
	termin- ated			G Gross receipts \$ 1,680,700.						
	Amend return	1 , , , , , , , , , , , , , , , , , , ,		H(a) Is this a group return						
	Applica	F Name and address of principal officer: UAMED WEDIFALL	for subordinates? Yes X No							
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in						
	ax-exe	mpt status: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) o	or 527	1	list. See instructions					
		e:▶ WWW.CRATERLAKECOUNCIL.ORG		H(c) Group exemption	n number ▶ 1761					
K F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1920 N	State of legal domicile: OR					
Pa		Summary								
an an	1 1	Briefly describe the organization's mission or most significant activities: $\ \overline{ ext{THE}}\ \ \overline{ ext{E}}$	BOY SC	OUTS OF AMER	RICA HAS					
Governance		ONE MISSION, WHICH EXTENDS TO ALL LOCAL CO								
rna	2 (Check this box $lacktriangle$ if the organization discontinued its operations or disposi	ed of more	than 25% of its net ass						
o Ve	ı			3	27					
ত জ		Number of independent voting members of the governing body (Part VI, line 1b)			26					
es		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			27					
Activities &		Total number of volunteers (estimate if necessary)			895					
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.					
_	b l	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.					
		Ocal-linelines and speeds (Dad MIII line 41s)		Prior Year 592,066.	Current Year 641,498.					
ne	l	Contributions and grants (Part VIII, line 1h)		20,768.	64,124.					
Revenue	l	Program service revenue (Part VIII, line 2g)		55,308.	509,370.					
Be		nvestment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		200,857.	174,161.					
	l	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		868,999.	1,389,153.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	3,050.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
	45 (Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		589,909.	503,082.					
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
beu	b .	Total fundraising expenses (Part IX, column (D), line 25) ► 59,10	00.							
Ä	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		410,619.	382,801.					
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,000,528.	888,933.					
		Revenue less expenses. Subtract line 18 from line 12		-131,529.	500,220.					
TO S			Ве	ginning of Current Year	End of Year					
Net Assets or	20	Total assets (Part X, line 16)		2,849,490.	3,468,889.					
t As	21	Total liabilities (Part X, line 26)		123,728.	512,221.					
		Net assets or fund balances. Subtract line 21 from line 20		2,725,762.	2,956,668.					
	rt II	Signature Block								
		ties of perjury, I declare that I have examined this return, including accompanying schedules		· · · · · · · · · · · · · · · · · · ·	knowledge and belief, it is					
true,	correct	t, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge.						
		Signature of officer		 Date						
Sig	- 1	, -		Date						
Her	e	JAMES WESTFALL, SCOUT EXECUTIVE Type or print name and title								
		V 31	Ιr	Date Check	PTIN					
Da!	, ,	Print/Type preparer's name Preparer's signature Preparer's T DETTED CON CDA MICHAEL T DETTED CON								
Paid	1	MICHAEL J PETERSON, CPA MICHAEL J PETERS	ОΝ, Ι	1/14/22 self-employ	P01833529 39-0758449					
	arer	Firm's name WIPFLI LLP Firm's address 1502 LONDON ROAD, SUITE 200		Firm's EIN	JJ-0/30449					
use	Only	DULUTH, MN 55812		Dhone no 21	8.722.4705					
	the ID	S discuss this return with the preparer shown above? See instructions		PHONE NO. 4 1	X Yes No					
ivid	ule IH	U GIOGGO THIS TELUITI WITH THE PREPAREI SHOWN ADOVE! SEE INSTRUCTIONS			L41 TESINO					

1 01111 550 (2021)		20022	-		•
Part III	Statement of	f Prograi	m Service	Acco	mplishmer	its

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	THE BOY SCOUTS OF AMERICA HAS ONE MISSION, WHICH EXTENDS TO ALL LOCAL
	COUNCILS: "THE CORPORATION SHALL PROMOTE, WITHIN THE TERRITORY COVERED
	BY THE CHARTER FROM TIME TO TIME GRANTED IT BY THE BOY SCOUTS OF
	AMERICA AND IN ACCORDANCE WITH THE CONGRESSIONAL CHARTER, BYLAWS, AND
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	· / / · · · · · · · · · · · · · · · · ·
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	$(\text{Code: } ____) \text{ (Expenses \$ } _________________________) \text{ (Revenue \$ } __________________________________$
	CUB SCOUTS - THE ORGANIZATION PROVIDED PROGRAM SUPPORT, TRAINING,
	CAMPING OPPORTUNITIES, AND MARKETING SUPPORT TO 566 CUB SCOUTS. THE
	ORGANIZATION MAINTAINS FOUR CAMPS FOR THE USE OF CUB SCOUTS. CUB
	SCOUTS IS A PROGRAM FOR BOYS AND GIRLS IN GRADES K-5 AND THEIR
	FAMILIES.
4b	(Code:) (Expenses \$ 188,631. including grants of \$ 0.) (Revenue \$ 39,573.)
40	SCOUTS BSA - THE ORGANIZATION PROVIDES PROGRAM SUPPORT, TRAINING,
	CAMPING OPPORTUNITIES, AND MARKETING SUPPORT TO 737 SCOUTS. THE
	ORGANIZATION MAINTAINS FOUR CAMPS FOR THE USAGE OF SCOUTS. SCOUTS BSA
	IS A PROGRAM FOR BOYS AND GIRLS IN GRADES K-5 AND THEIR FAMILIES.
	15 A PROGRAM FOR BOYS AND GIRLS IN GRADES K-5 AND THEIR FAMILIES.
4c	(Code:) (Expenses \$ 37,726 . including grants of \$ 0 .) (Revenue \$)
	EXPLORING AND VENTURING - THE ORGANIZATION PROVIDES PROGRAM SUPPORT,
	TRAINING, CAMPING OPPORTUNITIES, AND MARKETING SUPPORT TO 67 EXPLORERS
	AND VENTURE SCOUTS FOCUSED ON THE EXPLORATION OF CAREERS AND HOBBIES.
	THE ORGANIZATION MAINTAINS FOUR CAMPS FOR THE USAGE OF SCOUTS.
	EXPLORING IS A CAREER EXPLORATION PROGRAM FOR BOYS AND GIRLS FROM AGES
	12-21. VENTURING IS AN OUTDOOR ADVENTURE PROGRAM FOR BOYS AND GIRLS
	AGES 14-21.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 • including grants of \$ 0 •) (Revenue \$ 0 •)
4e	Total program service expenses ► 754,525.
	Form 990 (2021)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
U	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,	-		
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		37	
	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
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,	- "		<u></u>
	investment, and program service activities outside the United States, or aggregate 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 for any	110		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10		16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
40	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 Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_		\ . ,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

CRATER LAKE COUNCIL, INC Form 990 (2021) BOY SCOUTS OF AMERICA Part 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 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 employees? If "Yes," complete			
	Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	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		<u> </u>
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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 member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 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
	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			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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?		3.7	1
Pa	Note: All Form 990 filers are required to complete Schedule 0	38	X	Щ_
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		Щ_

132004 12-09-21

Form **990** (2021)

93-0386820 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х **3a** Did the organization have unrelated business gross income of \$1,000 or more during the year? За **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, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **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). Х **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a Х 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7с **d** If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Х 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: 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 **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. 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 Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? If "Yes," see the 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 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

If "Yes," complete Form 6069

Form 990 (2021)

Part VI Governance, Management, and Disclosure. For each "Yes" 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. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 27 **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. 26 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х 15b 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 with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ightharpoonup OR , CASection 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. X Upon request Own website Another's website 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 JODY STONEBROOK - 541-664-1444 3039 HANLEY ROAD, CENTRAL POINT, OR 97502

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JAMES WESTFALL	40.00									
SCOUT EXECUTIVE		Х		Х				121,720.	0.	32,171.
(2) CURT BURRILL	1.00									
COUNCIL PRESIDENT		Х		X				0.	0.	0 .
(3) ROCKY CAMPBELL	1.00									
PAST COUNCIL PRESIDENT	1 22	Х		Х				0.	0.	0
(4) ADAM AUGUST	1.00									
VP FINANCE	1 00	Х	_	Х				0.	0.	0 .
(5) ROBERT EVANS	1.00	.,		,,					_	
VP GOVERNANCE	1 00	Х	_	Х				0.	0.	0 .
(6) MATTHEW PATTEN VP GOVERNANCE	1.00	v		х				_	0	_
(7) ERIK JOHNSEN	1.00	Х		^				0.	0.	0 .
VP MEMBERSHIP	1.00	Х		Х				0.	0.	0 .
(8) JANEL YERGEN	1.00	Λ	\vdash	^				0.	0.	0
VP PROGRAM	1.00	Х		Х				0.	0.	0
(9) JOHN KRAWCZYK	1.00	22						0.	.	0
VP PROPERTIES	1.00	Х		х				0.	0.	0
(10) RUSSELL DYSART	1.00							•	•	
TREASURER		х		х				0.	0.	0
(11) BILL ANDERSON	1.00									
MEMBER AT LARGE		Х						0.	0.	0
(12) MEL ASHLAND	1.00									
AUDIT CHAIR		Х						0.	0.	0
(13) MICHAEL BLISS	1.00									
HIGH ADVENTURE/AQUATICS CHAIR		Х						0.	0.	0 .
(14) RANDY DELONGE	1.00									
SAFE SCOUTING CHAIR		Х						0.	0.	0
(15) RUSSELL DUNN	1.00									
MEMBER AT LARGE		Х						0.	0.	0
(16) JOE DAVIS	1.00									
MEMBER AT LARGE		Х						0.	0.	0
(17) BOB HANN	1.00	_								_
COUNCIL COMMISSIONER		Х						0.	0.	0

Form **990** (2021)

CRATER LAKE COUNCIL, INC BOY SCOUTS OF AMERICA 93-0386820 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (D) (E) (F) Position Average Reportable Name and title Reportable **Estimated** (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations ndividual trustee or director the compensation hours for organization (W-2/1099-MISC/ from the Highest compensated related nstitutional truste (W-2/1099-MISC/ 1099-NEC) organization organizations 1099-NEC) and related below organizations line) 1.00 (18) RICHARD KEMMLING NEW UNIT CHAIR Х 0 . 0. 0. (19) JENNY KUECK 1.00 0. X 0 . 0. PROPERTIES COMMITTEE (20) LEE MILLIGAN 1.00 MEMBER AT LARGE Х 0 0. 0. (21) JOHN PACKER 1.00 MEMBER AT LARGE X 0. 0. (22) WALTER SCHLOER 1.00 MEMBER AT LARGE Х 0. 0. 0. (23) JENNIFER STEPHENS 1.00 MARKETING CHAIR Х 0. 0. 0. (24) FRED SCHROEDER 1.00 0. FREMONT DISTRICT COMMISSIONER Х 0 0. (25) ROBERT VAUGHN 1.00 0. MEMBER AT LARGE 0. 0. (26) SHARON WATSON 1.00 MEMBER AT LARGE U 0 0. 32,171. 720. 0. 1b Subtotal 0. 0. 0. Total from continuation sheets to Part VII, Section A 720. 0. 32.171. Total (add lines 1b and 1c) 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 Х line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization Х and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X 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) (B) (C) Name and business address Description of services Compensation NONE

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

Form 990 BOY SCOUT	'S OF AM	IER	IIC	A					93-038	6820	
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average				ition			Reportable	Reportable	Estimated	
Name and title	hours	(cl				app	LΛ	compensation	compensation	amount of	
	per	(0)	I COM	an	ııaı	app T	'y <i>)</i>	from	from related	other	
	week					ao		the	organizations	compensation	
		(list any ਫ਼ਿੱ				l ge		organization	(W-2/1099-MISC)	from the	
	hours for					d em		(W-2/1099-MISC)	(** 2/ 1033 141100)	organization	
	related	e or	tee			sate		(** 2/ 1000 101100)		and related	
	organizations	ruste	l trus		yee	m per				organizations	
	below	dual	rion	_	old m	st co	-			organizationio	
	line)	ivipu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(27) JACKSON ZAGONE	1.00	_	⊢	-	_	<u> </u>	<u> </u>				
	1.00	7.7							^	0	
OA LODGE CHIEF		Х						0.	0.	0.	
		L	L	L	L	L					
		1									
			\vdash								
-											
			\vdash								
							Ī				
		L	L	L	L	L	L				
			\vdash								
		ĺ					Ī				
		<u> </u>		<u> </u>			<u> </u>				
Total to Part VII, Section A, line 1c											

Form 990 (2021) BOY SCO
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		One of the content of		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
			11 705				30000013 3 12 3 14
nts		Federated campaigns 1a	11,785.				
Sra		Membership dues1b	06.606				
s, (Am		Fundraising events1c	96,626.				
Contributions, Gifts, Grants and Other Similar Amounts	•	Related organizations 1d					
s, (ini	•	Government grants (contributions) 1e	181,428.				
ioi	1	All other contributions, gifts, grants, and					
but		similar amounts not included above 1f	351,659.				
ÖĘ	9	Noncash contributions included in lines 1a-1f	31,424.				
Sor		Total. Add lines 1a-1f	•	641,498.			
<u> </u>			Business Code	, ,			
	2	CAMPING REVENUE	713990	58,866.	58,866.		
ice		ACTIVITY REVENUE	713990	5,258.	5,258.		
er ue			113330	3,230.	3,230.		
n S	(
Jrar Se	(
Program Service Revenue	•						
۵		All other program service revenue		54.104			
		Total. Add lines 2a-2f		64,124.			
	3	Investment income (including dividends, interes					
		other similar amounts)		4,472.			4,472.
	4	Income from investment of tax-exempt bond pr	roceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 8	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
			_				
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a 109, 205.	. ,				
			323,103.				
a)		Less: cost or other basis	133,490.				
ň		and sales expenses 76 0.	205 602				
eve		Gain or (loss) 7c 109, 205.		E04 000			E04 000
her Revenue		Net gain or (loss)	·····	504,898.			504,898.
je l	8 8	Gross income from fundraising events (not					
ᅙ		including \$ 96 , 626 of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	2,427.				
	ı	Less: direct expenses8b	14,934.				
	(Net income or (loss) from fundraising events		-12,507.			-12,507.
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
	1	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	>				
		Gross sales of inventory, less returns	,				
			205,892.				
			143,123.				
		Net income or (loss) from sales of inventory	143,123.	62,769.	62,769.		
$\overline{}$		Net income of (loss) from sales of inventory	Business Code	02,703.	02,703.		
Miscellaneous Revenue	44 -	INSURANCE REIMBURSEMEN	524126	55,655.			55,655.
ne e	11 6	PARTICIPANT INSURANCE	900099	23,484.	23,484.		33,033.
llan (en			200022	43,404.	43,404.		
sce Be	(000000	11 760			11 760
Σ	(All other revenue	900099	44,760.			44,760.
		Total. Add lines 11a-11d		123,899.	150 255		F07 070
	12	Total revenue. See instructions)	1,389,153.	150,377.	0.	597,278.

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 respons	e or note to any line in t	his Part IX(B)	(C)	[
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	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	3,050.	3,050.		
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	153,891.	131,662.	14,819.	7,410
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	Other salaries and wages	266,729.	228,203.	25,684.	12,842
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	35,826.	31,208.	3,078. 1,589.	1,540 794
9	Other employee benefits	10,087.	7,704.		794
10	Payroll taxes	36,549.	31,220.	3,553.	1,776
11	Fees for services (nonemployees):				
а	Management				
b	Legal	FF 171	46.005	F F17	0.750
С	Accounting	55,171.	46,895.	5,517.	2,759
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	2 240		2 240	
f	Investment management fees	2,240.		2,240.	
g	Other. (If line 11g amount exceeds 10% of line 25,	2 576	2 140	201	1/5
	column (A), amount, list line 11g expenses on Sch O.)	3,576.	3,140.	291. 11.	145 495
12	Advertising and promotion	33,526.	28,625.	2,934.	1,967
13	Office expenses	8,562.	7,278.	856.	428
14 45	Information technology	0,302.	1,210.	050.	420
15 16	Royalties	57,036.	49,693.	2,693.	4,650
16 17	Occupancy	27,838.	23,813.	2,683.	1,342
17 18	Travel Payments of travel or entertainment expenses	27,030.	23,013.	2,003.	1,542
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,181.	1,854.	218.	109
20	Interest	-,			
21	Payments to affiliates	19,694.	19,694.		
22	Depreciation, depletion, and amortization	37,982.	36,296.	1,124.	562
 23	Insurance	46,915.	40,204.	4,474.	2,237
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.)				
а	SUPPLIES	29,607.	29,095.	175.	337
b	EQUIPMENT RENT AND MAIN	21,689.	19,122.	1,660.	907
С	UNCOLLECTIBLES	14,817.			14,817
d	RECOGNITION AWARDS	7,760.	4,112.	350.	3,298
е	All other expenses	13,494.	11,450.	1,359.	685
25	Total functional expenses. Add lines 1 through 24e	888,933.	754,525.	75,308.	59,100
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 if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Form 990 (2021)
Part X Balance Sheet

Par	t A	Balance Sneet					
		Check if Schedule O contains a response or note to	o any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			197,169.	1	702,221
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			164,652.	3	214,081
	4	Accounts receivable, net			17,693.	4	6,459
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substant					
		controlled entity or family member of any of these p	oerso	ns		5	
	6	Loans and other receivables from other disqualified	d pers				
		under section 4958(f)(1)), and persons described in		6			
y,	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			103,384.	8	91,637
B	9	B			24,677.	9	24,302
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D1	10a	2,241,904.			
	b	Less: accumulated depreciation1	10b	1,897,408.	375,468.	10c	344,496 736,526
	11	Investments - publicly traded securities		636,990.	11	736,526	
	12	Investments - other securities. See Part IV, line 11			12		
	13	Investments - program-related. See Part IV, line 11			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		1,329,457. 2,849,490.	15	1,349,167 3,468,889	
	16	Total assets. Add lines 1 through 15 (must equal li	Total assets. Add lines 1 through 15 (must equal line 33)				
	17	Accounts payable and accrued expenses	12,222.	17	436,462		
	18	Grants payable		18			
	19	Deferred revenue			3,593.	19	1,605
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Par	rt IV c	of Schedule D	107,913.	21	74,154
နွ	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substant	tial co	ontributor, or 35%			
ap		controlled entity or family member of any of these p				22	
-	23	Secured mortgages and notes payable to unrelated				23	
	24	Unsecured notes and loans payable to unrelated th				24	
	25	Other liabilities (including federal income tax, payab					
		parties, and other liabilities not included on lines 17	7-24).	Complete Part X			
		of Schedule D		·····	102 700	25	F10 001
_	26	Total liabilities. Add lines 17 through 25		, 77	123,728.	26	512,221
ړ		Organizations that follow FASB ASC 958, check	here	· • X			
ဗို		and complete lines 27, 28, 32, and 33.			CEE EE4		026 270
<u>a</u>	27				655,554.	27	836,270
<u>8</u>	28	Net assets with donor restrictions			2,070,208.	28	2,120,398
Ĭ		Organizations that do not follow FASB ASC 958,					
<u> </u>		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or equip				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated incor			2 725 762	31	2 056 662
≥	32	Total net assets or fund balances		<u> </u>	2,725,762.	32	2,956,668
	33	Total liabilities and net assets/fund balances			2,849,490.	33	3,468,889

Pa	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	1,38					
2	Total expenses (must equal Part IX, column (A), line 25)	2			33.			
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,72	62.				
5	Net unrealized gains (losses) on investments	5	1	4,5	<u>91.</u>			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-28	3,9	05.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	2,95	6,6	68.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
	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:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit						
	Act and OMB Circular A-133?		3a		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2021)			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

INC **Employer identification number** Name of the organization CRATER LAKE COUNCIL, BOY SCOUTS OF AMERICA 93-0386820 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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). 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, city, and state: 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) 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 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% 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). 11 12 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. 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

93-0386820 Page 2

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	ction A. Public Support									
Cale	ndar 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.")	801,423.	548,858.	673,121.	592,066.	641,498.	3256966.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	801,423.	548,858.	673,121.	592,066.	641,498.	3256966.			
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)						557,544.			
	Public support. Subtract line 5 from line 4.						2699422.			
	ction B. Total Support									
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total			
7	Amounts from line 4	801,423.	548,858.	673,121.	592,066.	641,498.	3256966.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	20.	898.	25,548.	55,308.	4,472.	86,246.			
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.)						2212212			
11	Total support. Add lines 7 through 10						3343212.			
12	Gross receipts from related activities,						,283,133.			
13	First 5 years. If the Form 990 is for the	-		•			. —			
800	organization, check this box and stor						>			
	ction C. Computation of Publi			. (0)			80.74 %			
14						14	25 25			
16a										
h										
D							. \Box			
170										
11 d		-								
	· ·		•	-		· ·	. .			
h		· ·		,						
J		ū				Ť	1070 01			
	,		•							
18	•									
b 17a b	Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) Public support percentage from 2020 Schedule A, Part II, line 14 15 86.26 M 16a 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 b 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 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, check this box and stop here. Explain in Part VI how 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 organization Public support test - 2021. 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 organization Public supported organization should be a supported organization should be									

Schedule 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.)

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,					
Cale	ndar 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	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
-	3 received from disqualified persons						
k	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 line 6.)						
	ction B. Total Support		T	T	T	T	1
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	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						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
10	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		rot opening their	foundly an extra to	l	01(a)(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•		
Sec	check this box and stop here ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •			
	Public support percentage for 2021 (li			column (fl)		15	%
	Public support percentage from 2020	, , , , , , , , , , , , , , , , , , , ,	,			16	%
	ction D. Computation of Inves					1	70
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the						
-	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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.)

Section A. All Supporting Organizations

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

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

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

132024 01-04-21

rai	Supporting Organizations (continued)			
	ſ		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?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		
Sec	non B. Type I Supporting Organizations		· ·	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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.	2		
Sec	tion 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).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
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		
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).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	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 ins	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
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		

Sche	dule A (Form 990) 2021 BOY SCOUTS OF AMERICA			93-0386820 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organiz	zations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain</i>	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		

Schedule A (Form 990) 2021

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

6

5 Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2021

e Excess from 2021

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

CRATER LAKE COUNCIL, Name of the organization BOY SCOUTS OF AMERICA

Employer identification number 93-0386820

	organization answered "Yes" on Form 990, Part IV, line		dvised funds	(b) Funds and other accounts
4	Total number at and of year	(4) Donor a	avisca iurius	(b) i unus and other accounts
1 2	Total number at end of year Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year) Aggregate value of grants from (during year)			
4	Aggregate value of grants from (during year) Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v		ate hold in donor advisor	d funds
3	are the organization's property, subject to the organization's	~		
6	Did the organization inform all grantees, donors, and donor ac			
Ü	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	•		
Pa				
1	Purpose(s) of conservation easements held by the organization			,
	Preservation of land for public use (for example, recreat			a historically important land area
	Protection of natural habitat	norr or oddodnorry		a certified historic structure
	Preservation of open space		110001141101101101	
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation co	ontribution in the form of	f a conservation easement on the last
_	day of the tax year.			Held at the End of the Tax Year
а				2a
b				
c	Number of conservation easements on a certified historic stru			
	Number of conservation easements included in (c) acquired a			
	listed in the National Register	·		
3	Number of conservation easements modified, transferred, rele			
	year ▶	3	,	3
4	Number of states where property subject to conservation eas	sement is located	•	
5	Does the organization have a written policy regarding the peri	iodic monitoring, in	spection, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, a	nd enforcing conservation	on easements during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the require	ements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its	revenue and expense s	tatement and
	balance sheet, and include, if applicable, the text of the footn	ote to the organiza	tion's financial statemer	nts that describes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of	-	•	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under FASB ASC 956	8, not to report in it	s revenue statement an	d balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, educ	ation, or research in furt	herance of public
	service, provide in Part XIII the text of the footnote to its finan	icial statements tha	t describes these items	
b	If the organization elected, as permitted under FASB ASC 956	8, to report in its re	venue statement and ba	alance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, educati	on, or research in furthe	rance 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 treat	asures, or other sim	ilar assets for financial (gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to	hese items:	
а	Revenue included on Form 990, Part VIII, line 1			> \$
<u>b</u>	Assets included in Form 990, Part X			> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2021

132051 10-28-21

-0386820 Page 2	0386	820	Page 2
-----------------	------	-----	--------

Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or O	ther S	imilar Asse	ets _{(conti}	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that ma	ke signi	ficant use of i	ts		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's	exempt	purpose in Pa	art XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	ures, or other si	milar ass	sets			
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes	s" on Fo	rm 990, Part I	V, line 9, or	•	
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contributions	or other assets	not incl	uded			_
	on Form 990, Part X?						Yes	X	No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:						
	Amount								
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2 a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	stodial account	liability?		X Yes		No
_	If "Yes," explain the arrangement in Part XIII.							X	
Pai	t V Endowment Funds. Complete i								
		(a) Current year	(b) Prior year	(c) Two years ba		Three years ba			
1a	Beginning of year balance	636,990.	556,896.	466,2	67.	526,65	3.	496,	028.
b	Contributions								
С	Net investment earnings, gains, and losses	101,776.	83,927.	93,9	05.	-17,74	0.	78,	539.
d	Grants or scholarships								
е	Other expenditures for facilities						_		
	and programs					40,00			000.
f	Administrative expenses	2,240.	3,833.	3,2	_	2,64			914.
g	End of year balance	736,526.	636,990.	556,8	95.	466,26	7.	526,	653.
2	Provide the estimated percentage of the curr		e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	37.4800	_%						
b	Permanent endowment .0000	%							
С		%							
	The percentages on lines 2a, 2b, and 2c sho	•							
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	d administered t	or the o	rganization			
	by:							Yes	No
	(i) Unrelated organizations								X
	(ii) Related organizations						3a(ii)		_X_
	If "Yes" on line 3a(ii), are the related organiza						3b		
4 Do:	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm		Dort IV line 11e C	aa Farm 000 Da	u+ V line	. 10			
	Complete if the organization answered								
	Description of property	(a) Cost or of	1		. ,	ımulated	(d) Boo	ok valu	е
	Land	basis (investm	· · · · · · · · · · · · · · · · · · ·		uepre	ciation	າ	1 1	1 /
_	Land			1,114.	1 50	1 015		$\frac{1,1}{\circ}$	
b	Buildings		1,//	2,898.	<u> , 58</u>	4,045.	18	8,8	<u></u>
_	Leasehold improvements		2.4	0 700	21	2 262	າ	7 /	27
d	Equipment	I		0,790.	31	3,363.		$\frac{7,4}{7}$	
	Other			7,102.				$\frac{7,1}{4}$	
ıota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part)</u>	X, column (B), line 10	0c.)		P	34	4,4	<i>7</i> 0.

Schedule D (Form 990) 2021 BOY SCOUTS	OF AMERICA	93	-0386820 _{Page} 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
	+		
(A)	+		
(B)			
(C)			
(D)	1		
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes'	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
	(,	(-,	
(1)	+		
(2)			
(3)	+		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (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 1	1d. See Form 990, Part X, line 15.	
) Description		(b) Book value
(1) CASH SURRENDER VALUE OF L	•		38,486.
(2) CHARITABLE REMAINDER TRUS			1,292,202.
	<u> </u>		18,479.
			10,413.
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	>	1,349,167.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	25)	•	

Schedule D (Form 990) 2021

X

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021 BOY SCOUTS OF AMERICA			93-1	U3000⊿U Page 4
Part XI Reconciliation of Revenue per Audited Financial St		Revenue per Re	turn.	
Complete if the organization answered "Yes" on Form 990, Part IV, 1 Total revenue, gains, and other support per audited financial statements			1	1,438,069.
Total revenue, gains, and other support per audited financial statementsAmounts included on line 1 but not on Form 990, Part VIII, line 12:			-	1,430,000.
a Net unrealized gains (losses) on investments	2a	14,591.		
b Donated services and use of facilities		•		
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)		36,565.		
e Add lines 2a through 2d			2e	51,156. 1,386,913.
3 Subtract line 2e from line 1			3	1,386,913.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	, ,			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,240.		
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	2,240.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 1	(2.)		5	1,389,153.
Part XII Reconciliation of Expenses per Audited Financial S		Expenses per F	teturr	1.
Complete if the organization answered "Yes" on Form 990, Part IV,				1 207 162
1 Total expenses and losses per audited financial statements			1	1,207,163.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ایا			
a Donated services and use of facilities				
b Prior year adjustments				
c Other losses		320,470.		
d Other (Describe in Part XIII.)		•	0-	320 470
e Add lines 2a through 2d			2e 3	320,470. 886,693.
3 Subtract line 2e from line 1			3	000,093.
 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	2,240.		
b Other (Describe in Part XIII.)		2,240.		
c Add lines 4a and 4b	<u></u>		4c	2,240.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line			5	888,933.
Part XIII Supplemental Information.	: 16.)			300,7000
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide			; Part >	K, line 2; Part XI,
PART IV, LINE 2B:				
THE COUNCIL ACTS AS THE FISCAL SPONSOR FO	OR VARIOUS	OTHER SCOU	TING	G UNITS.
AS THE FISCAL SPONSOR, THE COUNCIL COORD	INATES THE	FINANCIAL	ACT:	IVITIES,
THROUGH THE RECEIPT AND DISBURSEMENT OF	FUNDS, ON E	BEHALF OF T	HE V	VARIOUS
UNITS. REVENUE AND EXPENSES ARE NOT RECO	GNIZED IN T	HE ACCOMPA	NYII	NG
CONSOLIDATED STATEMENTS OF ACTIVITIES AND	D THE FUNDS	S ARE NOT A	VAII	LABLE FOR
OPERATING PURPOSES. CASH RECEIPTS IN EXC	ESS OF DISE	BURSEMENTS	ARE	REFLECTED
IN THE CUSTODIAL ACCOUNTS LIABILITY IN T				
FINANCIAL POSITION.	001(50211			
TIMMCIAN LONITION.				
PART V, LINE 4:				

THE TOTAL FUNDS AVAILABLE FROM THE ENDOWMENT FUND IN A GIVEN YEAR (THE

CRATER LAKE COUNCIL, INC 93-0386820 Page 5 BOY SCOUTS OF AMERICA Schedule D (Form 990) 2021 Part XIII Supplemental Information (continued) DISTRIBUTABLE INCOME) SHALL BE UP TO, BUT NOT TO EXCEED 5 PERCENT OF THE INVESTED ENDOWMENT ASSETS, INCLUDING DONOR RESTRICTED GIFTS AND UNRESTRICTED "QUASI ENDOWMENT" FUNDS, CALCULATED ON THE AVERAGE MARKET VALUE OF THE INVESTED FUNDS OVER THE PRECEDING THREE YEARS. PART X, LINE 2: THE COUNCIL ASSESSES WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION OF THE TECHNICAL MERITS OR THE POSITION, ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION. IF THE TAX POSITION DOES NOT MEET THE MORE LIKELY THAN NOT RECOGNITION THRESHOLD, THE BENEFIT OF THE TAX POSITION IS NOT RECOGNIZED IN THE FINANCIAL STATEMENTS. THE COUNCIL RECORDED NO ASSETS OR LIABILITIES FOR UNCERTAIN TAX POSITIONS OR UNRECOGNIZED TAX BENEFITS. PART XI, LINE 2D - OTHER ADJUSTMENTS: CHANGE IN CHARITABLE REMAINDER TRUST VALUE 36,565. PART XII, LINE 2D - OTHER ADJUSTMENTS: CONTRIBUTION TO SETTLEMENT TRUST 320,470.

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

	LAKE COUNCIL, INC						ntification number
	UTS OF AMERICA					93-0386	
Part I Fundraising Activities. required to complete this part	Complete if the organization answet.	red "Y	es" or	Form 990, Part IV, li	ine 17	7. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations 	e Solicitat	ion of	non-g gover	overnment grants			
d In-person solicitations 2 a Did the organization have a written or	or oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees,		
key employees listed in Form 990, P b If "Yes," list the 10 highest paid indiv compensated at least \$5,000 by the	viduals or entities (fundraisers) pursua				ne fur	Yes Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con contribu	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			•				
List all states in which the organizatio or licensing.	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is e	exempt from reg	gistration

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

Schedule G (Form 990) 2021

Schedule G (Form 990) 2021

Part II	Fundraising Events.	Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000	,
	of fundraising event contri	butions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,0	00

		of fundraising event contributions and gr	oss income on Form 990-	EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Tatal avanta
			ROGUE VALLEY	BEND GOLF		(d) Total events
			GOLF TOURNAM		1	(add col. (a) through
					(total number)	col. (c))
ā			(event type)	(event type)	(total number)	
Revenue			4= ===	24 242		
ě	1	Gross receipts	47,523.	31,310.	20,220.	99,053.
ш						
	2	Less: Contributions	47,523.	31,310.	17,793.	96,626.
	3	Gross income (line 1 minus line 2)			2,427.	2,427.
	4	Cash prizes				
	5	Noncash prizes				
Ś	٦	Tronodon prizos				
JSe	_	Pont/facility costs	2,800.			2,800.
Direct Expenses	6	Rent/facility costs	2,000.			2,000.
ñ	_		222		1 555	1 700
ec.	7	Food and beverages	233.		1,555.	1,788.
⋳						
	8	Entertainment	- 400	4 0 6 5		10.015
	9	Other direct expenses	5,136.	4,367.	843.	10,346.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	14,934.
_	11	Net income summary. Subtract line 10 from I			<u></u>	-12,507.
Pa	ırt I	II Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.				
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
nue			(a) bingo	bingo/progressive bingo	(c) Other garming	col. (a) through col. (c))
Revenue						
ď	1	Gross revenue				
	2	Cash prizes				
ses						
Direct Expenses	3	Noncash prizes				
X	٦	Tronodon prizos				
š	4	Rent/facility costs				
Ë	7	Tienthacinty costs				
	_	Other direct eveness				
	5	Other direct expenses				
		W.L. 1	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	L No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<u> </u>	
9	Ent	ter the state(s) in which the organization condu	ucts gaming activities: _			
а	ls t	he organization licensed to conduct gaming a	ctivities in each of these s	states?		Yes No
b	If "	No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax y	ear?	Yes No
b	If "	Yes," explain:				
	' '''					
	_					

132082 10-21-21 Schedule G (Form 990) 2021

CRATER LAKE COUNCIL, INC BOY SCOUTS OF AMERICA

Sch	nedule G (Form 990) 2021 BOY SCOUTS OF AMERICA 93-	0386820	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
;	a The organization's facility	13a	%
ı	b An outside facility	13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address		
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
	of gaming revenue retained by the third party \$\bigs\bigs\bigs\bigs\bigs\bigs\bigs\bigs		
	c If "Yes," enter name and address of the third party:		
	on the first than a decision of the time party.		
	Name		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Description of services provided P		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
,	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	☐ No
	retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	. L les	140
	organization's own exempt activities during the tax year \$		
Pá	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	rt III, lines 9, 9	b, 10b,
_	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			
_			
_			
_			

CRATER LAKE COUNCIL, INC

Schedule G	G (Form 990)	BOY	SCOUTS	OF	AMERICA	93-0386820	Page 4
Part IV	G (Form 990) Supplemental Inform	mation	(continued)				g
	Cappionioniai inion		(continuea)				

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

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

CRATER LAKE COUNCIL, INC

BOY SCOUTS OF AMERICA

Employer identification number 93-0386820

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		_X_
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		<u> </u>
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	۱۵		

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)		
(A) Name and Title		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) JAMES WESTFALL	(i)	116,354.	0.	5,366.	2,250.	29,921.	153,891.	0.	
SCOUT EXECUTIVE	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i) (ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
_	(ii)								
	(i) (ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

rovide the information, explanation, or descriptions required	for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

CRATER LAKE COUNCIL, INC BOY SCOUTS OF AMERICA

Employer identification number 93-0386820

Pai	rt I Types of Property				<u>.</u>			
	·	(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		_	_
		арріісавіе		Form 990, Part VIII, line 1g	Horicasii contribe	ilion ai	Hourit	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	6	31,424.	FMV			
10	Securities - Closely held stock			,				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other • ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	zation durino	the tax vear for co	ontributions	•			
	for which the organization completed Form 82						0	
	3	,	3				Yes	No
30a	During the year, did the organization receive by	v contributio	n anv property rep	orted in Part I. lines 1 throug	nh 28. that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	quires the review of	of any nonstandard contribu	tions?	31		х
	Does the organization hire or use third parties							
	contributions?		~	* *		32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,			
-	describe in Part II.	(-,	71 1 1- 51-57	(, 5115	,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

CRATER LAKE COUNCIL, INC

Schedule M	(Form 990) 2021	BOY	SCOU	TS OF	' AMERICA			93-0386820	Page 2
Part II	Supplementa	l Infori	mation.	Provide	the information i	required by Part I, I	lines 30b, 32b, and 33	3, and whether the organization of both. Also com	ation
	this part for any a	dditional	l informat	ion.	or contributions,	, the number of iter	ns received, or a com	ibiliation of both. Also com	piete

Schedule M (Form 990) 2021

132142 11-17-21

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.

2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CRATER LAKE COUNCIL, INC BOY SCOUTS OF AMERICA

Employer identification number 93-0386820

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SHALL PROMOTE, WITHIN THE TERRITORY COVERED BY THE CHARTER FROM TIME TO TIME GRANTED IT BY THE BOY SCOUTS OF AMERICA AND IN ACCORDANCE WITH THE AND RULES AND REGULATIONS OF THE BOY CONGRESSIONAL CHARTER BYLAWS, THE SCOUTING PROGRAM OF PROMOTING THE ABILITY OF SCOUTS OF AMERICA, BOYS AND YOUNG MEN AND WOMEN TO DO THINGS FOR THEMSELVES AND OTHERS AND TEACHING THEM PATRIOTISM, TRAINING THEM IN SCOUTCRAFT, COURAGE SELF-RELIANCE, AND KINDRED VIRTUES, USING THE METHODS WHICH ARE NOW IN COMMON USE BY THE BOY SCOUTS OF AMERICA.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RULES AND REGULATIONS OF THE BOY SCOUTS OF AMERICA, THE SCOUTING

PROGRAM OF PROMOTING THE ABILITY OF BOYS AND YOUNG MEN AND WOMEN TO DO

THINGS FOR THEMSELVES AND OTHERS, TRAINING THEM IN SCOUTCRAFT, AND

TEACHING THEM PATRIOTISM, COURAGE, SELF-RELIANCE, AND KINDRED VIRTUES,

USING THE METHODS WHICH ARE NOW IN COMMON USE BY THE BOY SCOUTS OF

AMERICA."

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEARNING FOR LIFE - CO-EDUCATION SOCIAL AND LIFE SKILLS IN PARTNERSHIP WITH LOCAL SCHOOLS.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

ETHICS IN ACTION - TEACHING SCOUTS GUIDELINES FOR HANDLING ETHICAL
OUESTIONS

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2**

Name of the organization CRATER LAKE COUNCIL, INC BOY SCOUTS OF AMERICA

Employer identification number 93-0386820

JAMBOREE - NATIONAL EVENT OCCURS EVERY FOUR YEARS

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERSHIP OF THE CORPORATION IS COMPOSED OF ACTIVE MEMBERS AND MAY ALSO
INCLUDE ASSOCIATE MEMBERS AND HONORARY MEMBERS; THE CORPORATE MEMBERSHIP
SHALL BE KNOWN AND DESIGNATED COLLECTIVELY AS THE CRATER LAKE COUNCIL OF
THE BOY SCOUTS OF AMERICA. ALL ACTIVE, ASSOCIATE, AND HONORARY MEMBERS OF
THE CORPORATION MUST BE REGISTERED AS ADULT LEADERS AS ESTABLISHED BY THE
BOY SCOUTS OF AMERICA.

FORM 990, PART VI, SECTION A, LINE 7A:

ACTIVE MEMBERS MAY ELECT MEMBERS AT LARGE, REGULAR MEMBERS OF THE EXECUTIVE BOARD, AND OFFICERS OF THE CORPORATION OTHER THAN THE SCOUT EXECUTIVE.

FORM 990, PART VI, SECTION A, LINE 7B:

ACTIVE MEMBERS MAY VOTE AT THE ANNUAL MEETING TO RECEIVE AND APPROVE

FINANCIAL STATEMENTS AS OF THE CLOSE OF ITS MOST RECENT COMPLETE FISCAL

YEAR AND OTHER SUCH BUSINESS AS MAY COME BEFORE THE MEETING. ACTIVE MEMBERS

MAY ALSO VOTE IN REGULAR AND SPECIAL MEETINGS ON MATTERS INCLUDING BUT NOT

LIMITED TO WHETHER TO MERGE WITH ANOTHER COUNCIL OR COUNCILS.

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

FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND EXECUTIVE COMMITTEE.

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

AT LEAST ONCE A YEAR, THE COUNCIL DISTRIBUTES A CONFLICT OF INTEREST

CERTIFICATION AND DISCLOSURE FORM TO ITS OFFICERS, DIRECTORS, AND

PROFESSIONAL EMPLOYEES. THE COVERED PERSONS ARE REQUIRED TO COMPLETE AND

SIGN THE CERTIFICATION AND DISCLOSURE FORM, WHICH IS RETAINED IN THE

COUNCIL FILES. DISCLOSURE IS GIVEN TO THE COUNCIL BOARD PRESIDENT AND

REVIEWED BY THE BOARD. NO MEMBER OF THE EXECUTIVE BOARD OR MEMBER OF ANY

COMMITTEE THEREOF SHALL PARTICIPATE BY DISCUSSION, VOTING, OR BY ANY OTHER

ACTION TAKEN BY THE EXECUTIVE BOARD, OR ANY COMMITTEE THEREOF, IN THE

ENACTMENT OF OR DEFEAT OF A MOTION WHICH RELATES TO ANY TRANSACTION WITH

ANY PARTY REFERRED TO ABOVE. IN CASE ANY SUCH MATTER IS DISCUSSED AT ANY

MEETING WHERE ANY EXECUTIVE BOARD OR COMMITTEE MEMBER WHO HAS SUCH AN

INTEREST IS PRESENT, THEY SHALL PROMPTLY DISCLOSE THEIR INTEREST IN THE

MATTER TO BE VOTED ON TO THE CHAIRMAN OF THE MEETING. THEY SHALL NOT VOTE

ON THE MATTER AND, AT THE DISCRETION OF THE DISINTERESTED MEMBERS PRESENT,

MAY BE REQUIRED TO LEAVE THE MEETING DURING THE DISCUSSION AND THE VOTING

ON THE MATTER.

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

REVIEWS ARE HELD WITH THE TERRITORY DIRECTOR AND THE COUNCIL PRESIDENT

QUARTERLY AND ANNUAL RAISES ARE REVIEWED BY THE COMPENSATION AND BENEFITS

COMMITTEE OF THE COUNCIL. ALL COUNCIL RAISES ARE APPROVED BY THE

COMPENSATION AND BENEFIT COMMITTEE. EMPLOYEES RECEIVE QUARTERLY REVIEWS

FROM THEIR IMMEDIATE SUPERVISOR.

WHEN THE SCOUT EXECUTIVE IS HIRED, THE NATIONAL COUNCIL USES A COMPENSATION

SURVEY TO DETERMINE COMPENSATION. THE NATIONAL ORGANIZATION REVIEWS AND

APPROVES THE EXECUTIVE DIRECTOR'S COMPENSATION ANNUALLY.

FORM 990, PART VI, SECTION C, LINE 19:

132212 11-11-21 Schedule O (Form 990) 2021