ILLOV	NACOUNĆ 06/28	3/2019 10 29 AI	1 ,				294	9 3 2.0	8,03618 9
Forr	" 99(	j		of Organizat		•	come Tax	(	OMB No 1545-0047
Depa	rtment of the Tre		▶ Do not	c), 527, or 4947(a)(1) c enter social security	numbers on tl	nis form as it may b	e made public	dations)	2017 Open to Public Inspection
			rear, or tax year beginni	o www.irs.gov/Form9 ng 10/01/17				190	II inspection
	Check if applicable		organization	ng 10/01/1/	, and end	ing 03/30/		D Employer i	dentification number
	Address change		ILLOW	A COUNCIL INC	C BOY SC	OUTS TR			
	Name change	Doing b	usiness as	,				42-61	.43453
	•		and street (or P O box if mail is n		ss)		Room/suite	E Telephone	
	nitial return Final return/		N BRADY STREET own, state or province, country, ar					363-3	88-7233
	erminated		NPORT	IA 5280				C Cross room	ols \$ 532,790
	Amended return		nd address of principal officer	1R 3200				G Gross recei	552,750
	Application pendin	9 STA	NLEY D. GOOD	(EAR			H(a) is this a g	roup return for sub	ordinates? Yes X No
		441	2 N BRADY ST	REET			H(b) Are all su	ibordinates includ	ed? Yes No
		DAV	ENPORT	IA	52806	$\sim$	II "No	o," attach a list (s	ee instructions)
	Tax-exempt statu	ıs X	501(c)(3) 501(c) (	) ◀ (insert no )	4947(a)(1) o	527	7)		
J	Website <b>&gt;</b>	N/A					H(c) Group ex	emption number	<b>&gt;</b>
	Form of organizati	on Co	poration X Trust Asso	ciation Other		L )	ear of formation	1958	M State of legal domicile IA
_P	art I	Summary	· · · · · · · · · · · · · · · · · · ·						
			organization's mission of	-					
ခ္			PROVIDES FUNDS		•			MERICA.	
Governance	FUN	NDS ARE	USED FOR SCOUT	CAMPS AND O'I	HER SCO	JTING OPERA	rions.		
, ver	O Charle	41 b <b>b</b>				d of then 250	D/ = 5 .4 = + 4 =		
ŏ		this box	if the organization disc nembers of the governing	•	•	o of more than 25	% of its fiet ass	3	1
8		•	ident voting members of t	• •	•	<b>,</b> )		4	1
ië		•	dividuals employed in cale	• • • •		,,		5	0
Activities &		umber of vo	6	5					
⋖			siness revenue from Part	• •	12			7a	0
			ness taxable income from					7b	0
					RECE	;	Prior Y		Current Year
9			grants (Part VIII, line 1h)	ીક્રો	RECE	VED		8,896	29,854
Revenue	_	m service re	5,712	106,208					
ş			(Part VIII, column (A), line		JUL 19	2019		55,712	100,208
			t VIII, column (A), lines 5, d lines 8 through 11 (mus		<b>1</b>	1/4/	-	4,608	136,062
$\dashv$			amounts paid (Part IX, co		WE BEN			4,950	99,250
			for members (Part IX, colu			<u> </u>			0
ν			pensation, employee ben		n (A), lines 5-	10)	-		0
Expenses	16a Profess	sional fundr	ising fees (Part IX, colum	n (A), line 11e)					0
ğ.	b Total fu	ındraising e	kpenses (Part IX, column	(D), line 25) ▶		0			
ш	17 Other e	expenses (P	art IX, column (A), lines 1	1a–11d, 11f–24e)				4,201	12,079
			ld lines 13–17 (must equa		, line 25)	1		9,151	111,329
- S	19 Revenu	ue less expe	nses Subtract line 18 from	m line 12			Beginning of Ci	4,543	24,733 End of Year
Net Assets or Fund Balances	20 Total a	ssets (Part	( line 16)			ł		4,738	1,798,816
Ass J Bal		-	t X, line 26)			Ī		0	0
FE			balances Subtract line 21	from line 20		Ī	1,74	4,738	1,798,816
Pa	art II S	Signature	Block						
			clare that I have examined the clarations of preparer (other t						edge and belief, it is
		Ö	Stanley 1	I Lewelyer	<u>u/</u>			7-	9-19
Sig	n 🖊	Signature of o	flicer					Date	<del></del>
Her	e L	STAN	LEY D. GOODYE	EAR		EXEC	BOARD T	REASURE	R
		Type or print	ame and title						
_		pe preparer's	name	Preparer's signa	/ 1		Date	Check	if PTIN
Paid	DAKK	Y L. ANDE		Dan		evson	06/2	3/19 self-empl	oyed
-	Darer Figure	name 🕨		OWER, WHIT		<u> </u>		Firm's EIN	······
use	Only		1805 STATE						E60 0E0 47E7
N.A		address	BETTENDORF,					Phone no	563-359-4757
			rn with the preparer show		ctions)				X Yes No
DAA	aperwork Re	auction ACt	Notice, see the separate ins	structions.					Form <b>990</b> (2017)

DAA

Form 990 (2017) IL	LOWA COUN	CIL INC BOY	SCOUTS TR	42-6	143453		Page 2
		ram Service Accor		•	· · · · · · · · · · · · · · · · · · ·		
Check	c if Schedule C	O contains a respon	se or note to any	line in this Pa	art III		
1 Briefly describe th							
					BOY SCOUTS OF	AMERICA.	
FUNDS ARE	USED FOR	SCOUT CAMPS	AND OTHER	SCOUTING	OPERATIONS.		
2 Ded the expenses	en underteke enu	a a a subsect a coordan a co	uses during the year	which was not li	ntad on the	<del></del>	
prior Form 990 or		significant program sen	nces during the year v	vilich were not il	sted on the	☐ Yes	X No
If "Yes," describe		es on Schedule O					[
		ling, or make significant	changes in how it con	ducts, any progr	am		
services?				,, p3-		Yes	X No
If "Yes," describe	these changes or	n Schedule O					
	-		nts for each of its thre	e largest progra	m services, as measured by		
expenses Section	n 501(c)(3) and 50	01(c)(4) organizations ar	e required to report th	e amount of gra	nts and allocations to others,		
the total expenses	s, and revenue, if	any, for each program s	ervice reported				
4a (Code	) (Expenses \$		including grants of		99,250 ) (Revenue \$		)
					BOY SCOUTS OF	AMERICA.	
FUNDS ARE	USED FOR	SCOUT CAMPS	AND OTHER	SCOUTING	OPERATIONS.		
4b (Code	) (Expenses \$		including grants of	 \$	) (Revenue \$		
(5555	, (				, (, -, -, -, -,		,
4c (Code	) (Expenses \$		including grants of	\$	) (Revenue \$		)
		<u> </u>	·				
4d Other program se	rvices (Describe ii	•			•		
(Expenses \$		including grants		) (R	evenue \$	)	
4e Total program ser	vice expenses 🕨	99,	250				_

is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule 8, Schedule of Contributors (see instructions)?  2		n 99d (2017) ILLOWA COUNCIL INC BOY SCOUTS TR 42-614/3453	<u> </u>	<u>\                                    </u>	'age <u>3</u>
1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  2 Is the organization engage in direct or indirect official company and activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II section 501(c)(4), 501(c)(5), or 501(c)(6) organization that recovers membership dues.  3 Is the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) organization that recovers membership dues.  4 Is the organization as section 501(c)(4), 501(c)(6), or 501(c)(6) organization that recovers membership dues.  5 Is the organization as section 501(c)(4), 501(c)(6), or 501(c)(6) organization that recovers membership dues.  5 Is the organization as section 501(c)(4), 501(c)(6), or 501(c)(6) organization that recovers membership dues.  6 Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advised or high a conservation easement, including easements to preserve open space, the environment, historic land aces, or historic structures? If "Yes," complete Schedule D, Part II Types," complete Schedule D, Part II Types," complete Schedule D, Part II Types, "complete Schedule D, Part II Types," complete Schedule D, Part IV to Did the organization disease in provide credit connessing, delit management, credit repair, or did repair to provide credit connessing, delit management, credit repair, or did repair to the pair types, "complete Schedule D, Part IV to Did the organization report an amount for ferries	_P	art IV Checklist of Required Schedules			
complete Schedule A 2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  2				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Dot the organization engage in direct or indirect of pricing follotical campagina activities, or have a section 501(i) cardidates for public office? If "Yes," complete Schedule C, Part I  4 Section 501(i(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) celection in effect during the tax year? If "Yes," complete Schedule C, Part II  5 the organization associan 501(i(3), 501(i(5), or 501(i(5)) organization that receives membership dues, assessments, or similar amounts as schedule in Review in Procedure 99:19" If "Yes," complete Schedule C, Part II  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule C, Part II  Tys," complete Schedule D, Part II  Tys," complete Schedule D, Part II  Tys, "complete Schedule D, Part III  Tys," complete Schedule D, Part III  Did the organization maintain and part X, Inne 21, for escoriov or custodial account loabely, series as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt in enginement, or complete Schedule D, Part IV  Did the organization answer to any of the following questions is "Yes," time no omplete Schedule D, Part IV  III III be organization answer to any of the following questions is "Yes," time no omplete Schedule D, Part IV  Did the organization answer to any of the following questions is "Yes," time no omplete Schedule D, Part IV  Did the organization and part X, in the Str. "Yes," complete Schedule D, Part IV  Did the organization and part X, in the Str. "Yes," complete Schedule D, Part IV  Did	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
3 Dit the organization engage in direct or midirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  4 Section 501(c)(3) organizations. Did the organization engage in looklying activities, or have a section 501(b) election in effect during the fax year? If "Yes," complete Schedule C, Part II  5 Is the organization associan 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 58-197 If "Yes," complete Schedule C, Part II  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors nave the right to provide advise on the distribution or investment of amounts in such funds or accounts III  7 Yes," complete Schedule D, Part II  8 Did the organization receive or hold a conservation easement, including essements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II  9 Did the organization receive or hold a conservation easement, including essements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II  9 Did the organization reports 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 in egotation service? If "Yes," complete Schedule D, Part VI  10 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, in provide credit counseling, debt management, credit repair, or debt in egotation service? If "Yes," complete Schedule D, Part VI  10 Did the organization report an amount for investigation, hold assets in temporary restituded endowments or expert and provided schedule D, Part VI  11 If the organization report an amount f		complete Schedule A	1		<u></u>
acadidates for public office? If Yes,* complete Schedule C, Part I Section of Official) organizations. Did the organization engage in lobbying activities, or have a section 501(h) selection in effect during the lax year? If Yes,* complete Schedule C, Part II Is the organization a section 501(c)(d), 501(c)(d	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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election in effect during the lax year? if "Yes." complete Schedule C, Part II  Is the organization a section 50 (16(4), 501 (6(5)) or 501 (6(5)) or 501 (6(6)) or 501 (6(5)) or 501 (6(		candidates for public office? If "Yes," complete Schedule C, Part I	3		X
5 is the organization a section 501 (e)(4), 501 (e)(5), or 501 (e)(6) or organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  7 have the right to provide advice on the distribution or investment of amounts in such funds or accounts 7 II "Yes," complete Schedule D, Part II  10 the to agranization receives or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures "If "Yes," complete Schedule D, Part II  10 the to agranization meaver on hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures "If "Yes," complete Schedule D, Part III  10 but the organization market on collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  10 but the organization report on amount in Part X, line 21, for escrive or custodial account habitity, serve as a custodian for amounts not listed in Part X, or provide credit counteing, debt management, credit repart, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 bit the organization, directly or through a related organization, hold assets in temporarity restincted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI  11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI  12 but the organization sanswer or any of the following questions is "Yes," then complete Schedule D, Part VI  13 but the organization report an amount for investments—other securities in Part X, line 12 If It at is 5% or more of the stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  14 but the organization report an amount for other labelities in Part X, line 12 If It at its 5% or more of the stotal assets reported in Part X, line 16? If "Yes," complete	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IVI  10 Did the organization are not an amount in Part X, ine 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? If "Yes," complete Schedule D, Part V  10 Did the organization or short or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization report an amount for land, buildings, and equipment in Part X, line 102 If "Yes," complete Schedule D, Part VIII  12 VIII, VIII, IX, or X as applicable  13 Did the organization report an amount for investments—other securities in Part X, line 12 If at its 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  13 Did the organization report an amount for investments—organize reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  14 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  15 Did the organization orbital an amount for offer isabilities 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 X III  16 Did the organization orbital an amount for other labilities in Part X, line 15 that part X, line 15 that III X X  17 Did the organ		have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  7		"Yes," complete Schedule D, Part I	6		х
8 Dut the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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? If "Yes," complete Schedule D, Part IV 9 9 X 10 Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X 11 filt be organization and amount for individual processions is "Yes," then complete Schedule D, Part V 11 filt be organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II 11 X X 10 bit 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 V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V III 11 X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 bit X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 bit X X 11 bit Stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 bit X X 11 bit Did the organization included in consolidated financial statements for the tax year? II "Yes," complete Schedule D, Part X 11 bit X X 12 bit th	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  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  12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule E, Parts XI and XII is optional is the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts III and IV  16 X  17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  18 Did the organization report more than \$15,000 o	d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
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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	18				
If "Yes," complete Schedule G, Part III			18		X
	19				
		it "Yes," complete Schedule G, Part III	19		

Part IV Checklist of Required Schedules (continued)

			Yes	No
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	
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
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		
		245		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24-		
	to defease any tax-exempt bonds?	24c		
d o=-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	$\rightarrow$	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	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, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity 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 Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? 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	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			_
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		х
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 in Schedule O for Part VI, lines 11b and	<u></u> -	1	
- •	19? Note. All Form 990 filers are required to complete Schedule O	38	$\mathbf{x}$	

DAA

L Ca	Check if Schedule O contains a response or note to any line in this Pal	rt V				
	Official Action of the Action				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			<u></u>		
	reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					;
	Statements, filed for the calendar year ending with or within the year covered by this return	_ 2a	0			نــــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedul			3b		
4a			1			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	tinancial				v
	account)?			4a		Х
b	If "Yes," enter the name of the foreign country	. 1 . 4	_			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Account	S	*		
E 0	(FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	,				X
5a	, , ,			5a		X
b c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	action,		5b 5c		-22
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	l the		30		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	i tile		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	itions or		<u> </u>		
-	gifts were not tax deductible?			6b		i
7	Organizations that may receive deductible contributions under section 170(c).			- 52		1
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	r aoods				
	and services provided to the payor?	3		7a		$\overline{\mathbf{x}}$
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
	required to file Form 8282?			7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file	Form 8899	9 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ızatıon file	a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ained by th	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			<u>'</u>		
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter	1	1			4
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter	1	1			- ]
	Gross income from members or shareholders	11a		_		1
b	Gross income from other sources (Do not net amounts due or paid to other sources					l
	against amounts due or received from them )	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		$\dashv$		ţ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			425		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
h	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which	426		,		
_	the organization is licensed to issue qualified health plans	13b		$\dashv$	_ ^	i
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	[ 130	<u></u>	14a		<u>x</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ule O		14b		
DAA	1 100, 1100 it 1100 a 1 offit 120 to report these payments. If 140, provide an explanation in Schedu	<u> 0</u>			m 990	(2017)
				1 01		

X

Form 990 (2017) ILLOWA COUNCIL INC BOY SCOUTS TR

	<u> </u>					
"Yes" r	esponse	to lines	2 through	7b below,	and for a "No"	

Governance, Management, and Disclosure For each [Part VI] response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1			i
	If there are material differences in voting rights among members of the governing body, or					İ
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1 '			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	following			i
а	The governing body?	•	J	8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at				1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	rnal R	evenue C	ode)	•	
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the for	m?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	licts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			13	х	
14	Did the organization have a written document retention and destruction policy?			14	х	
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1.5.5	t	<u> </u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			-  -		
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure				1	<del></del>
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50)	l(c)/3\c	only)			
	available for public inspection. Indicate how you made these available. Check all that apply		~···j)			
	Own website Another's website X Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intere	st nalia	v and			
13	financial statements available to the public during the tax year	st polic	, and			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	de 🕨				
	JAD CITY BANK & TRUST 4500 N BRADY STREET	13 📂				
_	VANDODE TA 528	١6	E 6	3-38	0_1	700

LLOWACOUNC 06/28/2019 10 29 AM									
Form 990 (2017) ILLOWA CC	DUNCIL IN	IC B	OY	SC	ruo	'S	TR 42-614	, , !3453	Page <b>7</b>
								ghest Compensated	<del></del>
Independent Co	•					•		,	. , ,
Check if Schedu	ile O contains	s a re	spon	se c	r no	te t	o any line in this Part	VII	
Section A. Officers, Directors	, Trustees, Key	Empl	oyees	, and	d Hig	hes	t Compensated Employe	es	
1a Complete this table for all person organization's tax year	s required to be	listed	Repo	t con	npens	satio	on for the calendar year en	ding with or within the	
<ul> <li>List all of the organization's cu compensation Enter -0- in columns (</li> </ul>	(D), (E), and (F)	if no co	mpen	satio	n was	s pa	ıd	,, ,	
<ul> <li>List all of the organization's cu</li> </ul>									
<ul> <li>List the organization's five curili who received reportable compensation organization and any related organize</li> </ul>	on (Box 5 of For								
<ul> <li>List all of the organization's for \$100,000 of reportable compensation</li> </ul>	n from the orgar	nization	and a	any r	elated	d org	janizations		
<ul> <li>List all of the organization's for organization, more than \$10,000 of re</li> </ul>									
List persons in the following order in compensated employees, and forme	dividual trustees				-		-		
Check this box if neither the orga	inization nor any	relate	d orga	nızat	ion c	omp	ensated any current office	r, director, or trustee	
(A) Name and Tille	(B) Average hours per week (list any	box, t		erson	ıs both	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) QUAD CITY BANK &	TRUST		+				<u> </u>		
(1,) ~	4.00								
TRUSTEE	0.00	:	X		<u> </u>		11,104	0	0
(2)									
(3)				-					
(4)									
(5)									
(6)				<u> </u>	 				
(7)				<u>                                      </u>					
							ı	i	

(8)

(9)

(10)

(11)

Pa	rt VII 'Section A Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
	(A) Name and title	(B) Average hours per week (list any hours for	bo off	x, unle	Pos check ess pe nd a d	rson	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
										_	
								_			
1b c <u>d</u>	Sub-total  Total from continuation sheet  Total (add lines 1b and 1c)	ets to Part VII, S	Secti	on A				<b>&gt;</b>	11,104		
2	Total number of individuals (increportable compensation from				hose	liste	ed ab	ove	e) who received more than \$	100,000 of	
3	Did the organization list any fo employee on line 1a? If "Yes," For any individual listed on line	complete Sched	ule J	for s	such	ındı	vidua	ĺ			Yes No
5	organization and related organ individual Did any person listed on line 1a	izations greater to a receive or accr	han ue c	\$150 ompe	0,000 ensa	ว <i>? if</i> tion	"Yes from	," co any	omplete Schedule J for such	'n	4 X
Secti	for services rendered to the orgion B. Independent Contracto		?S, C	comp	nete	SCN-	eauie	3 70	or such person		5 X
1	Complete this table for your five compensation from the organization	e highest compe zation Report co	nsat mpe	ed in nsati	depe	ende or the	nt co e cal	ntra enda	actors that received more th ar year ending with or within	an \$100,000 of i the organization's tax yea	ır
	Name and	(A) business address							Descript	(B) ion of services	(C) Compensation
2	Total number of independent c received more than \$100,000 c								e listed above) who	0	
DAA		1							<del></del>	•	Form <b>990</b> (2017)

Pa	rt V	III Stater Check	ment of Reve	nue ) con	taıns a	response	or note to any line	in this Part VIII		
						•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats its	1a	Federated car	npaigns	1a						
Star	b	Membership o		1b	٠					
S, C	С	Fundraising e	vents	1c						
ᇐ	d	Related organ	iizations	1d		****				
S.E	е	Government grants	(contributions)	1e						
Program Service Revenue Contributions, Gifts, Grants	f	All other contributio and similar amounts	ns, gifts, grants, s not included above	1f		29,854				
age of	g		ons included in lines 1a-1	f S	5					
<u>ಸ್ ಹ</u>	h	Total. Add line	es 1a-1f			<u> </u>	29,854			
nue						Busn Code				
ève	2a									
9	b									
ΕZ	C A						<u> </u>			
S	d									
grai	e	All other progr	am service reven							
Pro	, ,	Total. Add line		ue						
	<u>g</u> 3		come (including di	viden	ds intere	set				
		and other simi		VIGCII	35, micre	.s., •	34,168			34,168
	4		nvestment of tax-	exemp	t bond p	roceeds >				
	5	Royalties				<b>&gt;</b>				
	_	,	(ı) Real		(11)	Personal				
	6a	Gross rents								
	b	Less rental exps								
	С	Rental inc or (loss)								
	d	Net rental inco		-		<b></b>				
	7a	Gross amount from	(i) Securities		(11	ı) Other				
		sales of assets other than inventory	468,	768						
	b	Less cost or other								
		basis & sales exps	396,	728						
	С	Gain or (loss)	72,	040						
	d	Net gain or (lo	ss)	_		<b>•</b>	72,040			72,040
g.	8a	Gross income fro	om fundraising event	s						ŀ
nue		(not including \$								
Sev.		of contributions r	eported on line 1c)							
er F		See Part IV, line	18	a						
Other Revenue		Less direct ex	-	b						+
			(loss) from fundra	aising	events	<u> </u>				
	9a		om gaming activities							
		See Part IV, line		a	-					ļ i
		Less direct ex	•	р[					- <del></del>	
			(loss) from gamır	ng actı F	vities	<u> </u>				
	10a		inventory, less							
		returns and all		a						'
		Less cost of g		b [						
- 1	С	_	(loss) from sales	OI INV	entory	Busn Code				
	11a	iviisi	Cenanicous Revenue			Duan Code			7.00	
	b					<del></del>				
	c									
	d	All other reven	iue							
ļ	_	Total. Add line				<b>•</b>				
			e. See instructions	:		•	136,062	0	0	106,208

Form 990 (2017)

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) Program service (C) Management and Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 98,650 98,650 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 600 600 individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 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 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes Fees for services (non-employees) Management b Legal 975 975 c Accounting Lobbying e Professional fundraising services See Part IV, line 17 Investment management fees q Other (If fine 11g amount exceeds 10% of line 25, column 11,104 11,104 (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) b С đ e All other expenses 111,329 99,250 12,079 0 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

<u> </u>	art )					
		Check if Schedule O contains a response or note t	o any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			_1	
	2	Savings and temporary cash investments		36,489	2	36,314
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former offi	cers, directors,			1
		trustees, key employees, and highest compensated emp	loyees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified personal	ons (as defined under section	' '		• /
	Ì	4958(f)(1)), persons described in section 4958(c)(3)(B), a	and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary e	mployees' beneficiary			
ţ		organizations (see instructions) Complete Part II of Sche	dule L		6	
Assets	7	Notes and loans receivable, net			7	
ä	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities		1,708,249	11	1,762,502
	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			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34	)	1,744,738	16	1,798,816
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of	Schedule D		21	
Š	22	Loans and other payables to current and former officers,	directors,			
Liabilities		trustees, key employees, highest compensated employee	es, and			
apı		disqualified persons Complete Part II of Schedule L			22	
<b>=</b>	23	Secured mortgages and notes payable to unrelated third	parties		23	
	24	Unsecured notes and loans payable to unrelated third pa	rties		24	
	25	Other liabilities (including federal income tax, payables to	related third			
		parties, and other liabilities not included on lines 17-24)	Complete Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
		Organizations that follow SFAS 117 (ASC 958), check	chere ▶ X and			
ces		complete lines 27 through 29, and lines 33 and 34.				
<u>a</u>	27	Unrestricted net assets		1,404,462	27	1,428,686
Ba	28	Temporarily restricted net assets			28	<u>.</u>
pu	29	Permanently restricted net assets		340,276	29	370,130
Ē		Organizations that do not follow SFAS 117 (ASC 958	), check here ▶ 🔲 and			1
ō		complete lines 30 through 34	_			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	· · · · · · · · · · · · · · · · · · ·
Ass	31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
let et	32	Retained earnings, endowment, accumulated income, or	other funds		32	
_	33	Total net assets or fund balances	1	1,744,738	33	1,798,816
	34	Total liabilities and net assets/fund balances		1,744,738	34	1,798,816

orm	990 (2017) ILLOWA COUNCIL INC BOY SCOUTS TR 42-6143453				Pag	<u>e 12</u>
Ŋа	rt XI.」 Reconciliation of Net Assets ,					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				62
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u> 329</u>
3	Revenue less expenses Subtract line 2 from line 1	3				<u> 133</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	]	L,74		
5	Net unrealized gains (losses) on investments	5		2	9,3	<u> 345</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 in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	1	L,79	8,8	<u> 16</u>
Рa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					Ш
			_	Y	'es	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			, l		. 1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					l
	Schedule O				_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					1
	reviewed on a separate basis, consolidated basis, or both					J
	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					- 1
	separate basis, consolidated basis, or both			1		•
	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		
	If the organization changed either its oversight process or selection process during the tax year, explain in					1
	Schedule O					·
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			}		
	the Single Audit Act and OMB Circular A-133?		L	3a		<u>x</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				T	_
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2017)

SCHEDULE A (Form 990 or 990-EZ) 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

2017

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

ILLOWA COUNCIL INC BOY SCOUTS TR

42-6143453

Employer identification number

Schedule A (Form 990 or 990-EZ) 2017

P	art I	Reas	on for Public Charity	Status (All organization	ns must c	omplete	this part ) See instruction	ns					
The	orga	nization is not	a private foundation becaus	e it is (For lines 1 through 12,	, check only	one box )		_					
1	$\bigcap$	A church, co	nvention of churches, or ass	ociation of churches described	d in section	170(b)(1)	(A)(i). i / )						
2	П			A)(ıi) (Attach Schedule E (Fo			· · · · · · · · · · · · · · · · · · ·						
3	H			ce organization described in s									
4	H	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
7		city, and state	- ·	an conjunction with a nospita	ii described	iii Scelloi	Trouble the no.	spitars frame,					
5				of a college or university owne	d or operate	nd by a go	vernmental unit described in						
J		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				=	coation 17	0/6\/4\/A\	(··)						
7	H	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
′	Ш	described in section 170(b)(1)(A)(vi). (Complete Part II )											
8				70(b)(1)(A)(vi). (Complete Pa	art II )								
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
•		-	<u> </u>	of agriculture (see instructions)		•		•					
		university	or a mon land gram conego c	raginountare (ode monacione)	,		, and state of the conege of						
10		-	on that normally receives (1	) more than 33 1/3% of its sui	pport from c	ontribution	ns, membership fees, and gross	<b>S</b>					
	_	receipts from	activities related to its exem	pt functions—subject to certain	in exception	s, and (2)	no more than 33 1/3% of its						
			-	d unrelated business taxable			· · · · · · · · · · · · · · · · · · ·						
		acquired by t	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )										
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).													
12	X	•	•	· ·	•		s of, or to carry out the purpose						
							09(a)(2). See section 509(a)(3 d complete lines 12e, 12f, and	•					
	_		•	• • • • • • • • • • • • • • • • • • • •			•	-					
	а			erated, supervised, or controll er to regularly appoint or elec			ganization(s), typically by giving						
				omplete Part IV, Sections A		or the dire	ctors or trustees or the						
	b			pervised or controlled in conn		ıts support	ed organization(s) by having						
	-						ontrol or manage the supported						
				Part IV, Sections A and C.	•								
	С						and functionally integrated with	h,					
		its suppo	rted organization(s) (see inst	ructions) You must complet	te Part IV,	Sections A	A, D, and E.						
	ď	_					with its supported organization						
			• -		•		quirement and an attentiveness	S					
	_	· ·		nust complete Part IV, Secti									
	е			eived a written determination f -functionally integrated suppo			а туре і, туре іі, туре ііі						
	f		nber of supported organization	, , , , , , , , , , , , , , , , , , , ,	53				1				
	g		ollowing information about th										
()	) Name	of supported	(II) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of					
	org	anization	` '	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see					
				above (see instructions))		iment?	instructions)	instructions)					
					Yes	No							
(A)	ТТ	LOWA CC		Y SCOUTS OF AM			00 650		_				
			36-2616917	7	X		98,650		<u> </u>				
(B)													
						ļ							
(C)													
<b>/5</b> :						<del> </del>							
(D)													
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

ILLOWA COUNCIL INC BOY SCOUTS TR 42-61A3453 Schedule A (Form 990 or 990-EZ) 2017 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 **b**) 2014 (c) 20/15 (d) 2016 (e) 2017 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 11 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line/11, column (f)) 14 15 15 Public support percentage from 2016 Schedule A, Part II, line 14 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test-2016. 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 10%-facts-and-circumstances test—2017. 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-orcumstances" 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 10%-facts-and-circumstances test—2016. 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 "fag(s-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2017

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 or if the organization fails to qualify under the tests listed below please complete Part II.)

	If the organization fails to	qualify under th	ne tests listed l	pelow, please c	omplete Part II	)	/
Sec	tion A. Public Support	\				/	
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017 /	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		<u> </u>	/			
8	Public support. (Subtract line 7c from		· \ /				
500	tion B. Total Support		X				
_	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(4) 2016	(a) 2017	(f) Total
9	Amounts from line 6	(a) 2013	(6) 2014	(0) 2015	(d) 2016	(e) 2017	(i) iotai
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		/				
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				\		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12)	2-2-2-2-4-2-2-5-2-4	annual Aband Care	alb as Ethb to	504	-\/2\	
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	, secona, tnira, tou	πn, or tiπn tax year	as a section 501(	5)(3)	▶ □
Sec	tion C. Computation of Public St		tage				
15	Public support percentage for 2017 (line 8.			(f))		15	%
16	Public support percentage from 2016 Sche			· v://	`	16	<del>//</del> %
	tion D. Computation of Investme					1 101	,,,
17	Investment income percentage for 2017 (li			column (f))	<u> </u>	17	%
18	Investment income percentage from 2016					18	<u>~~~~</u> %
19a	33 1/3% support tests—2017. If the orga			14, and line 15 is i	more than 33 1/3%	· ·	
	17 is not more than 33 1/3%, check this bo					<b>\</b>	▶ □
b	33 1/3% support tests—2016. If the orga			•		1	
	line 18 is not more than 33 1/3%, check thi					•	<b>&gt;</b>
20	Private foundation. If the organization did					-	▶ □
		<del></del>					

# | Part IV !

**Supporting Organizations** 

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

Section A. All Sup	porting Organizations
--------------------	-----------------------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) 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
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in 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 10b below
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings )

	Yes	No
		[
	<u>x</u>	
1_		
		ļ
2		X
3a		X
3b		
3c		<del></del> i
4a		X
-70		
4b		
4c		
- <u>-</u> -		
5a		
5b		
5c		
<u> </u>		
6		X
		1
7		X
8		X
95		X
9a		
9b		X
1 20		<del></del> -
9c	<del></del>	X
		-
10a		X
10b		
(Form 99	0 or 990-	EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

Pa	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		X
b	A family member of a person described in (a) above?	11b		Х
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		х
	ion B. Type I Supporting Organizations	1110		
0000	ton D. Type i dappoining digamentone		Yes	No
4	Did the directors trustees or membership of one or more supported erganizations have the newer to		163	110
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported		<del></del> -	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	X	
2	Did the organization operate for the benefit of any supported organization other than the supported			'
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		X
Sect	ion 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		
Sect	ion D. All Type III Supporting Organizations	<del></del>		
			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	2		
•	the organization maintained a close and continuous working relationship with the supported organization(s)			<u> </u>
3	By reason of the relationship described in (2), 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			
<u> </u>	supported organizations played in this regard	3		L
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below			
þ	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 government entity (see instruct	ions)		
		r		r
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		ļ	
	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			l
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) 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	1 1		
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			, · · · · ·
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
L	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<del></del>		<b>-</b>
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		ı

Schedule A (Form 990 or 990-EZ) 2017 IDDOWA COORCID INC DOI SC	.0013 IF	12 0143	Page 6
Part V   Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizati	ons,	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust o	n Nov 20, 197	0 (explain in Part VI) Se	•
instructions All other Type III non-functionally integrated supporting organizations	s must complet	e Sections A through E	
Section 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	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)		•	, ]
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% 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 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	1	
2 Enter 85% of line 1	2	•	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to		x *	
emergency temporary reduction (see instructions)	6	<b>,</b> .	
7 Check here if the current year is the organization's first as a non-functionally integra		pporting organization (se	
instructions)	71	., 5 5 (	

Schedule A (Form 990 or 990-EZ) 2017

Par	t:V: Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)				
Sect	ion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exempt purpose	es	5 t				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported						
	organizations, in excess of income from activity	,					
3'	Administrative expenses paid to accomplish exempt purposes of support	rted organizations	*				
4	Amounts paid to acquire exempt-use assets	,					
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which the organizat						
	(provide details in Part VI) See instructions						
9	Distributable amount for 2017 from Section C, line 6		•				
10	Line 8 amount divided by line 9 amount						
	-	(i)	(ii)	(iii)			
	Section E - Distribution Allocations (see instructions)	Distributable ,					
			Pre-2017	Amount for 2017			
1	Distributable amount for 2017 from Section C, line 6			,			
2	Underdistributions, if any, for years prior to 2017						
	(reasonable cause required-explain in Part VI) See						
	instructions		Market and statement of the more comments.				
3	Excess distributions carryover, if any, to 2017			SARSTON N			
a							
	From 2013 ,						
	From 2014						
	From 2015						
	From 2016						
	Total of lines 3a through e	SAMMON BURGARY CON LAND ON LOW LOW, MINESON					
	Applied to underdistributions of prior years		SMC Transfer Seeds at A not the latter to the form the see				
<u>h</u>	Applied to 2017 distributable amount			DEVICES SITE TO SEE A SEE AS A SECOND			
	Carryover from 2012 not applied (see instructions)						
	Remainder Subtract lines 3g, 3h, and 3i from 3f	managaran an al desagni de esta esta esta esta esta esta esta est					
4	Distributions for 2017 from						
	Section D, line 7 \$						
<u>a</u>	Applied to underdistributions of prior years	2000 A 700 A 100 Condita sites" (September 10)					
	Applied to 2017 distributable amount			Secretaria a company of the transfer of the company			
С	Remainder Subtract lines 4a and 4b from 4	LTMGCMAR CHILLS CHIRL SECURIT CHIRLS SE	Market Section (1997)				
5	Remaining underdistributions for years prior to 2017, if						
	any Subtract lines 3g and 4a from line 2 For result						
	greater than zero, explain in Part VI See instructions		S ADMINISTRAÇÃO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE PORTO DE P				
6	Remaining underdistributions for 2017 Subtract lines 3h						
	and 4b from line 1 For result greater than zero, explain in						
	Part VI See instructions			2000 C. 49 / W. C. 99 . 80 Y. A. 4			
7	Excess distributions carryover to 2018 Add lines 3j						
	and 4c	William with Martin and a set that address out and					
8	Breakdown of line 7						
a	Excess from 2013			教育を対象が対象			
b	Excess from 2014		など、などを変われる。				
С	Excess from 2015		<b>经现在的</b>	直所產業等不在全部的			
d	Excess from 2016			的認識等的為的			
е	Excess from 2017	經歷的發展的關鍵	PARES DE L'ANDE	的。 於學的是他們們們			

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.

Open to Public

OMB No. 1545-0047

Inspection Name of the organization Employer identification number ILLOWA COUNCIL INC BOY SCOUTS TR 42-6143453 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990. Part VIII, line 1 \$

b Assets included in Form 990, Part X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10										
Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value						
	(investment)	(other)	depreciation							
1a Land										
b Buildings										
c Leasehold improvements										
d Equipment										
e Other				•						

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

Schedule D (Form 990) 2017

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Page	-74
Page.	•

Schedule D (Form 990) 2017 ILLOWA COUNCIL INC. Part VII Investments—Other Securities.		42-6143453	Page
Complete if the organization answered "Ye			ie 12
(a) Description of security or category  (including name of security)	(b) Book value	(c) Method of valuation  Cost or end-of-year market valu	e
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)	-		_
(B)			
(C)			
(D)			
(E)			
(F)	- "		
(G)			
(H)	-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶			
Part VIII   Investments—Program Related.			
Complete if the organization answered "Ye	s" on Form 990, Part IV, lin	e 11c See Form 990, Part X, lin	e <u>13</u>
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market valu	е
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13 ) ▶			
Part IX Other Assets.  Complete if the organization answered "Ye	s" on Form 990. Part IV. lin	e 11d See Form 990, Part X, lin	e 15
(a) Descript			Book value
(1)			
(2)			
(3)		<u> </u>	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>	
Other Liabilities.  Complete if the organization answered "Ye	s" on Form 990, Part IV, lin	e 11e or 11f See Form 990, Pa	rt X,
line 25			
1 (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)		1	
(4)		]	
(5)			
(6)		]	
(7)		1	_
(8)		1	
(9)		1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶		1	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the	ne footnote to the organization's fir	nancial statements that reports the	
organization's liability for uncertain tax positions under FIN 48 (ASC 74			

### Part XIII | Supplemental Information.

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Add lines 2a through 2d

Subtract line 2e from line 1

b Other (Describe in Part XIII)

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

2e

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4c

Schedule D (Form 990) 2017 ILLOWA COUNCIL INC BOY SCOUTS TR

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Page 5

Part XIII | Supplemental Information (continued)

Schedule D (Form 990) 2017

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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public

OMB No 1545-0047

Inspection

Employer identification number

ž × GEN SUPPORT GRANT (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance Yes 42-6143453 noncash assistance (g) Description of 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance 98,650 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 36-2616917 170 (B) TR ILLOWA COUNCIL INC BOY SCOUTS General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? (1) ILLOWA COUNCIL, INC. BOY SCOUTS OF IA 52806 AMERICA - 4412 N BRADY STREET (a) Name and address of organization or government DAVENPORT Part Part 3 9 6 6 | ල <u>4</u> (5) 8

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Enter total number of other organizations listed in the line 1 table

Schedule 1 (Form 990) (2017)

Schedule I (Form 990) (2017)

Part III

ILLOWA COUNCIL INC BOY SCOUTS TR 42-6143453

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

				. '*				
(e) Method of valuation (book, FMV, appraisal, other)								information
(e) Method of valuation (book, FMV, appraisal, other)								), and any other additional i
(d) Amount of noncash assistance								2, Part III, column (b
(c) Amount of cash grant								equired in Part I, line
(b) Number of recipients								ride the information re
(a) Type of grant or assistance								IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information
	-	2	3	4	2	9	7	Part IV

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2 REQUISITION OF FUNDS BY THE ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA ARE

EVIDENCED BY RESOLUTION OF THE EXECUTIVE BOARD OF THE ILLOWA COUNCIL, INC.

BOY SCOUTS OF AMERICA.

SCHEDULE O (Form 990 or 990-EZ) 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 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ILLOWA COUNCIL INC BOY SCOUTS TR

Employer identification number 42-6143453

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
THE TRUSTEE, QUAD CITY BANK & TRUST COMPANY, PER THE TRUST AGREEMENT, HAS
THE POWER AND AUTHORITY, SUBJECT TO THE PROVISIONS OF THE CHARTER, BYLAWS,
AND RULES AND REGULATIONS OF THE BOYS SCOUTS OF AMERICA, TO RECEIVE, TAKE,
HOLD, USE, CONTROL, MANAGE, INVEST, AND REINVEST THE ASSETS IN THE TRUST AS
THEY DEEM MOST SUITABLE. ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA RETAINS
THE RIGHT TO AMEND THE TRUST AGREEMENT, CHANGE TRUSTEES AND REQUEST
DISTRIBUTIONS FROM THE TRUST SUBJECT TO CONDITIONS OUTLINED IN THE TRUST
AGREEMENT.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

THE TRUSTEE, QUAD CITY BANK & TRUST COMPANY, PER THE TRUST AGREEMENT, HAS

THE POWER AND AUTHORITY, SUBJECT TO THE PROVISIONS OF THE CHARTER, BYLAWS,

AND RULES AND REGULATIONS OF THE BOYS SCOUTS OF AMERICA, TO RECEIVE, TAKE,

HOLD, USE, CONTROL, MANAGE, INVEST, AND REINVEST THE ASSETS IN THE TRUST AS

THEY DEEM MOST SUITABLE. ILLOWA COUNCIL, INC. BOY SCOUTS OF AMERICA RETAINS

THE RIGHT TO AMEND THE TRUST AGREEMENT, CHANGE TRUSTEES AND REQUEST

DISTRIBUTIONS FROM THE TRUST SUBJECT TO CONDITIONS OUTLINED IN THE TRUST

AGREEMENT.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE INVESTMENT COMMITTEE OF THE ILLOWA COUNCIL INC., BOY SCOUTS OF AMERICA

AND A TRUST OFFICER AT THE QUAD CITY BANK & TRUST COMPANY, THE TRUSTEE

REVIEWS THE FORM 990 BEFORE FILING.

Name of the organization

Employer identification number

ILLOWA COUNCIL INC BOY SCOUTS TR

42-6143453

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE TRUST IS MANAGED IN CONJUNCTION WITH THE POLICIES AND PROCEDURES OF THE
ILLOWA COUNCIL, INC., BOY SCOUTS OF AMERICA. CONFLICT OF INTEREST AGREEMENT
AND COPIES ARE RETAINED BY THE REGIONAL OFFICE. THE BOARD MEMBERS AND ALL
EMPLOYEES WITHIN THE ORGANIZATION'S MANAGEMENT STRUCTURE WILL NOT ENDEAVOR
IN ANY CONFLICTING BUSINESS PRACTICES THAT MAY PERTAIN TO ANY SUCH
INDIVIDUALS BENEFITTING FROM SUCH ACTIONS AND SUCH BUSINESS AGREEMENTS OR
CONTRACTS WILL BE REVIEWED AS NECESSARY TO ASSURE THAT THEY FALL WITHIN
POLICY GUIDELINES WHILE SAFEKEEPING THE ORGANIZATION'S INTEREST.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND SIGNED
COPIES OF TAX RETURNS ARE MADE AVAILABLE FOR PUBLIC INSPECTION UPON
REQUEST.

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Parti

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Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

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OMB No 1545-0047

(f) Direct controlling entity Employer identification number Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year 42-6143453 End-of-year assets ê Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity ILLOWA COUNCIL INC BOY SCOUTS TR (a) Name, address, and EIN (if applicable) of disregarded entity

(g)
Section 512(b)(13)
controlled entity?
Yes No × (f)
Direct controlling entity N/A (e)
Public charity status
(if section 501(c)(3)) 1 (d) Exempt Code section 501C3 (c)
Legal domicile (state or foreign country) H CAMPGROUND (b) Primary activity 36-2616917 (a) Name, address, and EIN of related organization 52806 AMERICA - 4412 N BRADY STREET ILLOWA COUNCIL INC BOY SCOUTS ΙĄ DAVENPORT £ 3 <u>ල</u>

Part II

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Schedule R (Form 990) 2017

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Schedule R (Form 990) 2017

Page 2

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ILLOWA COUNCIL INC BOY SCOUTS TR

Schedule R (Form 990) 2017 4 1 15 4 Percentage ownership (I) Section 512(b)(13) controlled entity? Yes No 3 (J) General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Percentage ownership Ξ amount in box 20 of Schedule K-1 (ı) Code V—UBI (Form 1065) Share of end-of-year assets (h)
Disproportionate
alloc ? Yes No 9 Share of end-of-year assets <u>(6</u> Share of total (f) Share of total income (C corp, S corp, Type of entity or trust) (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling
entity foreign country) Legal domicile (state or (c) Legal Jomicile (state or foreign country) Primary activity Primary activity <u>@</u> Name, address, and EIN of related organization Name address, and EIN of related organization Part III Part IV Ą lΞ 3 10 4 Ξ  $\overline{\mathbf{c}}$ 3 3

Schedule R (Form 990) 2017

Page 3

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ILLOWA COUNCIL INC BOY SCOUTS TR

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

42-6143453

	isted in Parts II-IV?
plete line 1 if any entity is listed in Parts II, III, or IV of this schedule	the tax year, did the organization engage in any of the following transactions with one or more related organizations lis

- Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- - c Gift, grant, or capital contribution from related organization(s) b Gift, grant, or capital contribution to related organization(s)
    - d Loans or loan guarantees to or for related organization(s)
      - - e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
  - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)	ILLOWA COUNCIL, INC. BOY SCOUTS OF	Д	98,650	FMV
(2)				<b>.a.</b> 71
(3)				•
(4)				
(5)				
(9)				

Schedule R (Form 990) 2017

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Schedule R (Form 990) 2017 ILLOWA COUNCIL INC BOY SCOUTS TR

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

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Page 4

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

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(k) Percentage ownership		,											990) 20.
(J) General or managing partner?	Š												Form
(J) Genera manag partne	Yes												le R
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)						i							Schedule R (Form 990) 2017
					_								
(h) Disproportionate allocations?	ž												
Dispro	Yes												
(g) Share of end-of-year assets						;							
(f) Share of total income													
artners on (3) trons?	ş												
(e) Are all partners section 501(c)(3) organizations?	Yes No												
(d) Predominant income (related, unrelated, excluded from tax under	sections 512-514)												
	country)												
(b) Primary activity													
(a) Name, address, and EIN of entity													
		(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	

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Part VII

Supplemental Information.

Provide additional information for responses to questions on Schedule R See Instructions