Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

<u>A</u>	For	the 2	2021 calendar y	year, or tax year beg	inning		, 2021, a	and endi	ng		, 20	
В	Chec	k if app	plicable:	C Name of organization	utdoor Alliance	:				D Empl	oyer identification num	ber
	Addre	ess cha	ange	Doing business as							46-3272914	
Ī		e chan	-		P.O. box if mail is not delivered	to street address)		Room/sui	te	E Telep	hone number	
$\overline{}$		return	_	1602 L Street					616		(202) 780-96	50
$\overline{}$			· /terminated		rovince, country, and ZIP or for	eign postal code				G Gross	s receipts	50
H		nded re				eigii posiai code					•	050
H				Washington, D					11/)	\$	1,253	X No
Ш	Appli	cation	pending		principal officer: Adam Cra	amer			· · · ·		for subordinates? Yes	=
				Same as C abo		П					es included?	∐ No
			t status: X 501			4947(a)(1) or	527				st. See instructions	
		site:		utdooralliance		1			H(c) Group e	xemption	number	
	_		ganization: X Corp	poration Trust A	ssociation Other	I	Year of formation	on: 201	. 3 M S	tate of leg	gal domicile: DC	
Pä	art I		Summary									
		1 E	Briefly describe t	the organization's mis	ssion or most significant	activities: Our	mission	is to	unite t	the v	oices of out	<u>door</u>
e		9	enthusiasts	s to protect t	he human-powere	d outdoor re	creation	exper	rience a	nd co	onserve Amer	:ica's
Governance		E	oublic land	ds.								
ern		_										
ò				_	on discontinued its oper							
		3 1	Number of voting	g members of the gov	erning body (Part VI, lin	ne 1a)				3		12
Activities &		4 N	Number of indep	pendent voting member	ers of the governing boo	dy (Part VI, line 1b)				4		12
Ξ		5 7	Total number of i	individuals employed	in calendar year 2021 (Part V, line 2a)				5		6_
Ċţ		6 7	Total number of	volunteers (estimate	if necessary)					6		
∢		7a 1	Total unrelated b	ousiness revenue from	n Part VIII, column (C), I	line 12				7a		0_
		b N	Net unrelated bu	usiness taxable incom	e from Form 990-T, Par	t I, line 11				7b		0
									Prior Year		Current Year	
		8 (Contributions an	nd grants (Part VIII, lin	e 1h)				1,312	,342	1,233	,117
ne		9 F	Program service	revenue (Part VIII, li	ne 2g)				·		•	0
en/	1		-		(A), lines 3, 4, and 7d)				2	,410		89
Revenue					lines 5, 6d, 8c, 9c, 10c,					,465	20	,753
					(must equal Part VIII, c				1,318		1,253	
	1				t IX, column (A), lines 1-					,580		,063
					IX, column (A), line 4)					,,,,,		0
	1				vee benefits (Part IX, col				514	,111	552	,914
ses	1				, column (A), line 11e)	` ,	•			/	332	0
Expenses	'				olumn (D), line 25)							
Š	٠ ₁		-	• •	lines 11a-11d, 11f-24e)				252	,821	260	,046
					st equal Part IX, column					•		
				,	e 18 from line 12					,512		,023
_		9 1	Teveriue less ex	cperises. Subtract iiii	e to nonnine iz		<u></u>			,705		936
S	ຊຸ ຸ		Total assets (Day	rt V line 16\				Begir	nning of Curre		End of Year	
sset	Bala		,	,				-	1,035		1,342	
Net Assets or	E 2		,	•				·		,834		,156
	ਟ 2 art l	_	Signature		t line 21 from line 20			•	1,024	, 665	1,327	,601
					eturn, including accompanying	schedules and statemen	ts and to the bes	at of my kno	wledge and be	lief it is		
					officer) is based on all informat				ago ana zo			
Sig	ın		Adam Cr Signature of o							 Da	te	
He										Da	ic .	
пе	16				xecutive Office	r						
				name and title	Dranguage circusture		Data				DTIN	
D-	لہ:		Print/Type prepare		Preparer's signature		Date		Check	∐ if	PTIN	
Pa		ue	John Mull:		John Mullins		10-17-20		self-emp	oloyed	P01429307	
	pa		Firm's name	Mullins	•			F	irm's EIN			
US	e O	nıy	Firm's address	7625 Wi	sconsin Avenue			P	hone no.			
			<u> </u>		la MD 20814					202-	770-6371	
Maν	the	IRS (discuss this retu	urn with the preparer s	shown above? See instr	ructions					🛛 Yes	No

4e Total program service expenses ► 657,544

EEA Form 990 (2021)

) (Revenue \$

Other program services (Describe on Schedule O.)

6,574 including grants of \$

(Expenses \$

1) Outdoor Alliance Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5		.,
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	3		Х
0	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D. Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
Т	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		
12-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	120		
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a	Х	
b	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	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	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a		20a		Х
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Page 3

1) Outdoor Alliance
Checklist of Required Schedules (continued) Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
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	Х	
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
_	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?			
00	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		
27	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			X
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i>			
	"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		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
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		х
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		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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			
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	20		
Par	19? Note: All Form 990 filers are required to complete Schedule O. t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u> </u>
Par	Check if Schedule O contains a response or note to any line in this Part V			
	Chesian Schodale & Containe a respense of floto to any fine in the fact v 11111111111		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	110
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c	х	

Forr	m 990 (2021) Outdoor Alliance 46-32729	14	F	age 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6	х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
10a b		10a	Yes	
_	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?		Yes	
b	Did the organization have local chapters, branches, or affiliates?	10b		
b 11a	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a		
b 11a b	Did the organization have local chapters, branches, or affiliates?	10b 11a	х	
b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b	x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b	x x x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	x x x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	10b 11a 12a 12b	x x x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b 12c 13	x x x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b 12c 13	x x x x	
b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b 12c 13 14	x x x	x
b 11a b 12a c 13	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13	x x x x	
b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	10b 11a 12a 12b 12c 13 14	x x x x	x
b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10b 11a 12a 12b 12c 13 14	x x x x	x
b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b 11a 12a 12b 12c 13 14	x x x x	x
b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	10b 11a 12a 12b 12c 13 14	x x x x	x
b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	x x x x	x
b 11a b 12a c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14	x x x x	x
b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	x x x x	x
b 11a b 12a c 13 14 15 a b 16a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	x x x x	x
b 11a b 12a c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Las the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt satus with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable),	10b 11a 12a 12b 12c 13 14 15a 15b	x x x x	x
b 11a b 12a c 13 14 15 a b 16a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	x x x x	x

19 and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records 20

Form 990 (2021) Outdoor Alliance 46-3272914 Page 7

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

See instructions for the order in which to list the persons above.

						,				
				((C)					
(A)	(B)	Position (do not check more than one		(D)	(E)	(F)				
Name and title	Average	,				han one s both a		Reportable	Reportable	Estimated amount
	hours					r/trustee		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations W-2/	compensation from the
	(list any hours for			1099-MISC/	1099-MISC/	organization and				
	related	lividu	tituti	icer	y em	jhes: iploy	rmer	1099-NEC)	1099-NEC	related organizations
	organizations	tor tr	onal		ploy	t con ee				
	below	uste	trust		ee	npen				
	dotted line)	Ф	tee			ısate				
						ä				
(1) Adam Cramer	40.00									
Chief Executive Officer		х		х		Х		174,000	0	4,568
(2) Luther Propst	4.00									
Chair		х						0	0	0
(3) Lindsey Davis	2.00									
Director		х						0	0	0
(4) Mark Singleton	2.00									
Director		х						0	0	0
(5) Todd Walton	2.00									
Director		х						0	0	0
(6) Peter Metcalf	2.00									
Director		х						0	0	0
(7) Joan May	2.00									
Director		х						0	0	0
(8) Gabe_Vasquez	2.00									
Director		х						0	0	0
(9) Kent McNeill	2.00									
Director		х						0	0	0
(10)Beth_Spilman	2.00									
Director		х						0	0	0
(11)Chris Winter	2.00									
Treasurer		х		Х				0	0	0
(12)Katherine Tsai	2.00									
Vice Chair		х		Х				0	0	0
(13)Michael Collins	2.00									
Secretary		х		х				0	0	0
<u>(14)</u>	L									

Form 990 (2021) 46-3272914 Outdoor Alliance Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) Position (A) (B) (D) (E) (F) (do not check more than one Name and title Average Reportable Reportable Estimated amount box, unless person is both an hours compensation compensation of other officer and a director/trustee) from the from related compensation per week organization (W-2/ organizations (W-2/ from the (list any Individual trustee or director 1099-MISC/ 1099-MISC/ organization and Institutional trustee Highest compensated <ey employee</p> hours for 1099-NEC) 1099-NEC) related organizations related organizations below dotted line) <u>(15)</u> (16) (17) (18) (19) (20)(21) (22) (23) (24)(25) Subtotal Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) 0 4,568 174,000 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1 Yes No 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 X For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Х Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) Name and business address Description of services Compensation

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

46-3272914

Form 990 (2021) Outdoor Alliance
Part VIII Statement of Revenue

		Check if Schedule O contains a response or r	ote to any line in thi	s Part VIII			<u> [</u>
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					ranouon revenue	baomeos revenue	sections 512–514
	1a	Federated campaigns 1a					
s s	b	Membership dues 1b	57,000				
r a	С	Fundraising events 1c					
S, G	d	Related organizations 1d					
ar A	е	Government grants (contributions) 1e	88,114				
S,E	f	All other contributions, gifts, grants,					
ig is		and similar amounts not included above 1f	1,088,003				
들	g	Noncash contributions included in					
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f 1g	\$ 20,500				
	h	Total. Add lines 1a-1f		1,233,117			
			Business Code				
ø	2a						
۵ <u>۲</u>	b						
Sei	С						
an eve	d						
Program Service Revenue	е						
P	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest,	and				
		other similar amounts)	▶	89			89
	4	Income from investment of tax-exempt bond produced	ceeds 🟲				
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
-	b	Less: cost or other basis					
une		and sales expenses 7b					
evenue	l	Gain or (loss)					
æ		Net gain or (loss)					
Other Re	8a	Gross income from fundraising					
δ		events (not including \$					
		of contributions reported on line					
	١.	1c). See Part IV, line 18					
	l	Less: direct expenses					
	9а	Gross income from gaming					
	١.	activities, See Part IV, line 19 9a					
	l .	Less: direct expenses 9k					
		` ′ " " —	····· •				
	10a	Gross sales of inventory, less]				
		returns and allowances					
		3	1				
	C	Net income or (loss) from sales of inventory	1				
v	14-	Other	Business Code	00 550	00 750		
nou re		Other	900099	20,753	20,753		
Miscellanous Revenue	b						
sce Zev	4 C	All other revenue					
Ξ̈́		Total. Add lines 11a-11d		20 752			
		Total revenue. See instructions		20,753	20 752	0	00
	14	I OLGI I E VETIUE. OCC III SU UCUONS		1,253,959	20,753		89

21) Outdoor Alliance Statement of Functional Expenses Part IX

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			(0)	
	not include amounts reported on lines 6b, 7b, Db, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	130,063	130,063		
2	Grants and other assistance to domestic	,	,		
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	174,000	98,196	53,030	22,774
6	Compensation not included above, to disqualified	,	,	,	,
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	306,380	172,904	93,376	40,100
8	Pension plan accruals and contributions (include	,	,	,	,
	section 401(k) and 403(b) employer contributions)	13,706	7,735	4,177	1,794
9	Other employee benefits	19,031	10,740	5,800	2,491
10	Payroll taxes	39,797	22,459	12,129	5,209
11	Fees for services (nonemployees):		,	,	-,
а	Management				
b	Legal	3,885		3,885	
С	Accounting	22,953		22,953	
d	Lobbying	,		·	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)	189,135	188,852	2	281
12	Advertising and promotion	4,296	4,296		
13	Office expenses	20,359	6,809	12,921	629
14	Information technology	, , , , , ,	-,	, -	
15	Royalties				
16	Occupancy	15,600	8,803	4,754	2,043
17	Travel	,	,	·	· ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,374	2,147	147	1,080
20	Interest	,	,		,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,468	4,540	928	
23	Insurance	2,976		2,976	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	951,023	657,544	217,078	76,401
26	Joint costs. Complete this line only if the				<u> </u>
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

Part X

Outdoor Alliance 46-3272914 Page 11

(B) (A) Beginning of year End of year 1 Cash - non-interest-bearing 59,558 123,486 2 2 659,491 985,998 3 252,120 3 172,985 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 Assets Inventories for sale or use 8 9 9 3,556 3,918 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 42,098 b Less: accumulated depreciation 10b 31,292 10c 15,210 10,806 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 42,764 42,764 15 2,800 2,800 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,035,499 16 1,342,757 17 17 10,834 15,156 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, -iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 26 <u>15,1</u>56 10,834 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 706,092 27 976,601 28 Net assets with donor restrictions 318,573 28 351,000 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 Total net assets or fund balances 1,024,665 32 1,327,601 33 33 1,342,757 1,035,499

		46-32729	914	Pa	age 12
Pai	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	1,	253,	959
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		951,	023
3	Revenue less expenses. Subtract line 2 from line 1	. 3		302,	936
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	1,	024,	665
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10	1,	327,	601
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		. 3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		

EEA

SCHEDULE A (Form 990)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ.

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

mation. Inspection

Employer identification number

	_	Alliance	rity Ctatus (Al	Il organizations mus	ot compl	oto thio r	46-327291				
Part		Reason for Public Cha	<u> </u>				Jart.) See mstructi	0115.			
	$\overline{}$	ization is not a private foundation be	•	•	•	,					
1	=	A church, convention of churches, of			•)(1)(A)(i).					
2	=	A school described in section 170 (l	,,,,,,,	,	,						
3	Ц.	A hospital or a cooperative hospital	service organization	on described in section '	170(b)(1)(<i>A</i>	4)(iii).					
4	Ш	A medical research organization op	erated in conjunction	on with a hospital describ	ed in sect	ion 170(b)	(1)(A)(iii). Enter the				
	_	hospital's name, city, and state:									
5	Ш	An organization operated for the be	nefit of a college o	r university owned or ope	erated by a	a governme	ental unit described in				
		section 170(b)(1)(A)(iv). (Complete	e Part II.)								
6		A federal, state, or local governmen	t or governmental	unit described in section	170(b)(1)	(A)(v).					
7	X	An organization that normally receiv	es a substantial pa	art of its support from a g	jovernmen	tal unit or t	from the general public				
		described in section 170(b)(1)(A)(v	ri). (Complete Part	II.)							
8											
9	\Box	An agricultural research organizatio	n described in sec	tion 170(b)(1)(A)(ix) ope	erated in co	onjunction	with a land-grant colleg	je			
		or university or a non-land-grant col	lege of agriculture	(see instructions). Enter	the name,	city, and s	state of the college or				
		university:		,		•	-				
10	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
11	=		•	•				_			
12	_	An organization organized and ope	•	·							
		one or more publicly supported orga		. ,, ,			` , ` ,	Check			
	1	the box in lines 12a through 12d tha	• •				•				
а		Type I. A supporting organization	•	· · · · · · · · · · · · · · · · · · ·			. ,	ng			
		the supported organization(s) the			ority of the	directors	or trustees of the				
		supporting organization. You m	-								
b		Type II. A supporting organizati	•			_	. ,				
		control or management of the s	upporting organiza	ition vested in the same	persons th	at control of	or manage the supporte	ed			
		organization(s). You must com	plete Part IV, Sec	ctions A and C.							
С		Type III functionally integrate	d. A supporting org	ganization operated in co	nnection w	ith, and fu	nctionally integrated wit	th,			
		its supported organization(s) (s	ee instructions). Yo	ou must complete Part	IV, Section	ns A, D, aı	nd E.				
d		Type III non-functionally integ	grated. A supportin	g organization operated	in connect	ion with its	supported organization	n(s)			
		that is not functionally integrate	d. The organizatior	n generally must satisfy a	a distributio	n requiren	nent and an attentivene	ess			
		requirement (see instructions).	You must comple	te Part IV, Sections A a	nd D, and	Part V.					
е		Check this box if the organization	on received a writte	en determination from the	e IRS that	it is a Type	I, Type II, Type III				
		functionally integrated, or Type	III non-functionally	integrated supporting or	ganization						
f	Er	nter the number of supported organi	zations								
g	Pr	ovide the following information about	ut the supported or	ganization(s).							
(1	i) Na	me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o	ır governing	(v) Amount of monetary support (see instructions)	othe	Amount of r support (see nstructions)		
					Yes	No					
(A)											
(B)											
(B)											
(C)											
(D)											
(E)											
Total											

46-3272914 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

	on A. Public Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e)	2021	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	909,715	871,037	872,846	1,312,342	1,233	3,117	5,199,057
2	Tax revenues levied for the							
	organization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add lines 1 through 3	909,715	871,037	872,846	1,312,342	1,233	3,117	5,199,057
5	The portion of total contributions by							
	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)							2,149,910
6	Public support. Subtract line 5 from line 4 .							3,049,147
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e)	2021	(f) Total
7	Amounts from line 4	909,715	871,037	872,846	1,312,342	1,233	3,117	5,199,057
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties, and income from							
	similar sources	65	65	2,685	2,410		89	5,314
9	Net income from unrelated business			,	,			,
	activities, whether or not the business							
	is regularly carried on							
10	Other income. Do not include gain or							
	loss from the sale of capital assets							
	(Explain in Part VI.)			5,362	3,465	20	0,753	29,580
11	Total support. Add lines 7 through 10			3,332	3,100		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,233,951
12	Gross receipts from related activities, etc.	(see instruction	ons)			12		3/233/332
13	First 5 years. If the Form 990 is for the or					a sect	ion 501(c)(3)
-	organization, check this box and stop her							
Secti	on C. Computation of Public Suppo							
14	Public support percentage for 2021 (line 6			11. column (f))		14		58.26 %
15	Public support percentage from 2020 Sch		-			15		56.01 %
16a	33 1/3% support test - 2021. If the organ					-	or more.	check this
	box and stop here. The organization qua							
b	33 1/3% support test - 2020. If the organ	•	• • •	•				_
	this box and stop here . The organization							
17a	10%-facts-and-circumstances test - 202							
	10% or more, and if the organization mee							
	Part VI how the organization meets the fa					-	-	
	organization			-	-	-		
b	10%-facts-and-circumstances test - 202							
b								
	15 is 10% or more, and if the organization						-	-
	in Part VI how the organization meets the			~		-	-	_
10	organization							_
18								. —
	instructions			<u> </u>	<u> </u>			
EEA							Schedule.	A (Form 990) 2021

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	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						
	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						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support		•		•		
Calen	dar year (or fiscal year beginning in)▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6				, ,		
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 on 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,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	•			-		` ' ` '
04	organization, check this box and stop her					<u> </u>	<u></u>
	on C. Computation of Public Suppo		•	10 1 (0)		1 1	
15	Public support percentage for 2021 (line 8		•			15	%
16	Public support percentage from 2020 Sch					16	%
	on D. Computation of Investment In			l' 40 l	(0)	14=1	
17	Investment income percentage for 2021 (17	<u>%</u>
18	Investment income percentage from 2020					18	%
19a	33 1/3% support tests - 2021. If the orga						
h	17 is not more than 33 1/3%, check this b	-	_				_
b	33 1/3% support tests - 2020. If the organization						⊾ □
20	line 18 is not more than 33 1/3%, check this box						····▶ ∐
20	Private foundation. If the organization di	u not check a	DUX UN IME 14	, 19a, OF 19D, C	HECK THIS DOX	anu see instru	วแบบระ . 🕨 📋

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	11 0 0		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	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.	3с		
4a	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 lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes,"</i>			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
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.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990) 2021 Outdoor Alliance 46-3272914 Page 5
Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		103	140
	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
а		44.0		
	11c below, the governing body of a supported organization?	11a 11b		
b	A family member of a person described in line 11a above?	TID		
С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	44.		
Cooti	provide detail in Part VI.	11c		
Secu	on B. Type I Supporting Organizations			N 1.
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on 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 (se	e ins	tructi	ons).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3h		

 Schedule A (Form 990) 2021
 Outdoor Alliance
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Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trus	t on Nov. 20, 1970 <i>(exp</i>	lain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizatio	ons must complete Sect	ions A through E.
Soct	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
Seci	ion A - Adjusted Net Income		(A) Phor fear	(optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
			(1.) 1.101.100.	(optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	,		
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally ir	itegrated Type III suppo	rting organization

EEA Schedule A (Form 990) 2021

(see instructions).

Schedul	e A (Form 990) 2021 Outdoor Alliance		46-	327	2 914 Page 7
Part		3) Supporting Organ	izations (continu	ied)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer		ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	izations	3	
4	Amounts paid to acquire exempt-use assets	11		4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	· VI)	5	
6	Other distributions (describe in Part VI). See instructions.	•	,	6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	oonsive		
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	•	(2)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributio Pre-2021	ns	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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 C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Se	ection 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
Name o	of organization			Employer iden	tification number
Outdo	or Alliance			46-3272914	
Part	I-A Complete if the	e organization is exempt und	der section 501	(c) or is a section 527	organization.
1	Provide a description of the o	organization's direct and indirect politica	al campaign activities	in Part IV. See instructions fo	r
	definition of "political campaig				
2		penditures. See instructions			
3	·	campaign activities. See instructions			
Part		e organization is exempt und		· /· /	
1	-	se tax incurred by the organization und			
2		se tax incurred by organization manage			
3		section 4955 tax, did it file Form 4720	-		
4a					· · · · L Yes L No
b Dort	If "Yes," describe in Part IV.	e organization is exempt und	dor coation 501	(a) expent section FO	1/0\/2\
Part		<u> </u>		• • •	1(0)(3).
1	, ,	pended by the filing organization for sec	•		
2		organization's funds contributed to oth		·	
2	ŭ	S	· ·		
3	•	ditures. Add lines 1 and 2. Enter here a		·	
3	·			•	
4		Form 1120-POL for this year?			· · · · · Yes No
5		and employer identification number (El			
•	·	s. For each organization listed, enter the	,		ŭ
	. ,	outions received that were promptly and	•	0 0	
	•	nd or a political action committee (PAC)	•		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
(1)					
(2)					
(3)					
(4)			_		
(5)					
(6)			-		

Schedule C (Form 990) 2021 Outdoor Alliance 46-3272914 Page 2

Pa	art	II-À	Complete if the organization	is exempt under section 501(c)(3) and file	ed Form 5768 (el	ection under
			section 501(h)).			
Α	Ch	eck 🕨	if the filing organization belongs to a	an affiliated group (and list in Part IV each affiliated group	member's name,	
			address, EIN, expenses, and share	of excess lobbying expenditures).		
В	Ch	eck 🕨	if the filing organization checked bo	x A and "limited control" provisions apply.		
			Limits on Lobby	ing Expenditures	(a) Filing	(b) Affiliated
			(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals
•	1a	Total lol	bbying expenditures to influence public o	pinion (grassroots lobbying)	2,007	
	b	Total lol	bbying expenditures to influence a legisla	ative body (direct lobbying)		
	С	Total lol	bbying expenditures (add lines 1a and 1b	o)	2,007	
	d	Other e	xempt purpose expenditures		928,516	
	е	Total ex	empt purpose expenditures (add lines 1	c and 1d)	930,523	
	f	Lobbyir	ng nontaxable amount. Enter the amount	from the following table in both		
	columns.				164,578	
	L	If the a	mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	L	Not ove	er \$500,000	20% of the amount on line 1e.		
	L	Over \$5	500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	L	Over \$1	1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	L	Over \$1	1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
_		Over \$1	17,000,000	\$1,000,000.		
	g	Grassro	oots nontaxable amount (enter 25% of lin	e 1f)	41,145	
	h	h Subtract line 1g from line 1a. If zero or less, enter -0-				
	i	Subtrac	t line 1f from line 1c. If zero or less, ente	r-0		
	j	If there	is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 4720		_
		reportin	g section 4911 tax for this year?		<u> [</u>	Yes No
			4-Yea	r Averaging Period Under Section 501(h)		

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total			
2a	Lobbying nontaxable amount	143,019	154,085	159,177	164,578	620,859			
b	Lobbying ceiling amount (150% of line 2a, column (e))					931,289			
С	Total lobbying expenditures	10,275	5,006	8,018	2,007	25,306			
d	Grassroots nontaxable amount	35,755	38,521	39,794	41,145	155,215			
е	Grassroots ceiling amount (150% of line 2d, column (e))					232,823			
f	Grassroots lobbying expenditures	7,701	1,049	2,957	2,007	13,714			
^	Schodulo C (Form 990) 2024								

Schedule C (Form 990) 2021 Outdoor Alliance 46-3272914 Page 3

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? h d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? f Direct contact with legislators, their staffs, government officials, or a legislative body? a h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2h 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying **Supplemental Information** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

EEA Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Outdoor Alliance 46-3272914 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . . . 3 Aggregate value of grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose 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 (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located 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 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes 9 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. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedule D (Form 990) 2021 Outdoor Alliance 46-3272914 Page 2

Par	t III Organizations Maintaining Co	llections of Art, His	storical Treasures	s, or Other Similar	Assets (continued)
3	Using the organization's acquisition, accession,	and other records, check	any of the following that	make significant use of i	its
	collection items (check all that apply):				
а	☐ Public exhibition	d	Loan or exchange p	orograms	
b	Scholarly research	е	Other		
С	Preservation for future generations				
4	Provide a description of the organization's collect	ctions and explain how the	y further the organization	on's exempt purpose in P	art art
	XIII.	•	,		
5	During the year, did the organization solicit or re-	ceive donations of art, his	torical treasures, or oth	er similar	
	assets to be sold to raise funds rather than to be				Yes No
Par	t IV Escrow and Custodial Arrang				
	Complete if the organization and		m 990, Part IV, line	e 9, or reported an a	amount on Form
	990, Part X, line 21.			•	
1a	Is the organization an agent, trustee, custodian of	or other intermediary for c	ontributions or other as	sets not	
	included on Form 990, Part X?				Tyes No
b	If "Yes," explain the arrangement in Part XIII and				
	, i	,			Amount
С	Beginning balance			. 1c	
d	Additions during the year				
е	Distributions during the year				
f	Ending balance				
2a	Did the organization include an amount on Form				Yes No
b	-			•	_ =
	t V Endowment Funds.	'			
	Complete if the organization ans	swered "Yes" on For	m 990, Part IV, line	e 10.	
	. (a	a) Current year (b) Pr	ior year (c) Two year	s back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance			,,,,	,,,,
b	Contributions				
С	Net investment earnings, gains, and				
	losses				
d	Grants or scholarships				
е	Other expenditures for facilities and				
	programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the current	year end balance (line 1g	, column (a)) held as:	•	•
а	Board designated or quasi-endowment	-	. (//		
b	Permanent endowment				
С	Term endowment				
	The percentages on lines 2a, 2b, and 2c should	equal 100%.			
3a	Are there endowment funds not in the possession		are held and administer	red for the	
	organization by:				Yes No
	(i) Unrelated organizations				3a(i)
	(ii) Related organizations				3a(ii)
b	If "Yes" on line 3a(ii), are the related organization				
4	Describe in Part XIII the intended uses of the org	•			<u> </u>
Par	t VI Land, Buildings, and Equipme				
	Complete if the organization and		m 990, Part IV, line	e 11a. See Form 99	0, 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		42,098	31,292	10,806
e	Other		12,000	32,232	10,000
	Add lines 1a through 1e. (Column (d) must equal	Form 990, Part X, column	(B), line 10c.)		10,806

Cabadula D (Farm 000) 2021	Outdoon 311ianaa	46-3272914	Page 3
Schedule D (Form 990) 2021	Outdoor Alliance	46-32/2914	rage 3

Schedule D (Form			46-	-3272914	Page 3
Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Fo	rm 990 Part IV line	11h See Forn	n 000 Part X	line 12
	 (a) Description of security or category (including name of security) 	(b) Book value		 c) Method of valuation or end-of-year market 	
(1) Financial	derivatives			•	
(2) Closely-he	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related. Complete if the organization answered "Yes" on Fo	rm 000 Part IV line	11c See Forn	n 000 Part X	line 13
•	<u> </u>				
	(a) Description of investment	(b) Book value	•	c) Method of valuation end-of-year market	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets. Complete if the organization answered "Yes" on Fo	rm 000 Dart IV line	11d Soc Form	n 000 Dort V	/ line 15
		illi 990, Part IV, illie	Tid. See Foil	1	
(4)	(a) Description			(b) B	look value
(1)					
(2)					
(4)					
(5)					
(6)					
(7)					
(8)				1	
(9)				1	
	n (h) must equal Form 000. Part V. col. (P) line 15.)				

Other Liabilities. Part X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

		6-3272914	Page 4
Part	·	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1 :	1,285,159
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	31,200
3	Subtract line 2e from line 1	3	1,253,959
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1,253,959
Part		er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	982,223
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	4	
b	Prior year adjustments	-	
С	Other losses	-	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	31,200
3	Subtract line 2e from line 1	3	951,023
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	
b	Other (Describe in Part XIII.)	4	
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	951,023
Part	• • • • • • • • • • • • • • • • • • • •		
	e 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	
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
01. E	Footnote for uncertain tax position under FIN 48 (Part X)		
The A	Alliance follows the Financial Accounting Standards Board Accounting Standa	ards Codifi	ication,
which	n provides guidance on accounting for uncertainty in income taxes recognize	ed in the A	Alliance's
finar	ncial statements, if any. At year end, the Alliance had no unrecognized tax	benefits	related t

The Alliance follows the Financial Accounting Standards Board Accounting Standards Codification, which provides guidance on accounting for uncertainty in income taxes recognized in the Alliance's financial statements, if any. At year end, the Alliance had no unrecognized tax benefits related to uncertain tax positions in its information return that would qualify for either recognition or disclosure in its financial statements. The Alliance's policy would be to recognize interest and penalties on tax positions related to its unrecognized tax benefits in income tax expense in the financial statements. Through year end, there have been no matters that would have resulted in an accrual for interest and/or penalties.

EEA Schedule D (Form 990) 2021

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

2021 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Name of the organization						Employer identification	tion number
Outdoor Alliance						46-3272914	
Part I General Information on	Grants and Ass	istance					
1 Does the organization maintain records to	substantiate the am	ount of the grants or ass	istance, the grantees' e	ligibility for the grants	or assistance, and		
the selection criteria used to award the gr	ants or assistance?						. X Yes No
2 Describe in Part IV the organization's prod							
Part II Grants and Other Assistan	ce to Domestic O	rganizations and Do	omestic Governme	nts. Complete if the	organization answere	d "Yes" on Form 9	90,
Part IV, line 21, for any recipi	ent that received r	nore than \$5,000. Pa	rt II can be duplicate	d if additional space	e is needed.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Access Fund		(ii applicable)	grant	HOHCASH ASSISTANCE	other)	Horicasii assisiance	Education and
(1) Access Fund PO Box 17010							Public Land
	04-2121165	E01 (a) (3)	12 250		N/A	N/A	
Boulder CO 80308	94-3131165	501 (c) (3)	13,350		N/A	N/A	Policy Education and
(2) American Whitewater							Public Land
629 W Main St	02 7002760	E01 (-) (2)	10.050		37/3	. / .	
Sylva NC 28779	23-7083760	501 (c) (3)	19,850		N/A	N/A	Policy
(3)Winter Wildlands Alliance							Education and
910 W Main St Ste 235	00 0500451	F01 () (0)	15 000		/-		Public Land
Boise ID 83702	82-0523471	501 (c) (3)	17,900		N/A	N/A	Policy
(4) Surfrider Foundation							Education and
PO BOX 73550	05 2041026	E01 (a) (2)	0 500		37 / 3	7/7	Public Land
San Clemente CA 92673	95-3941826	501 (c) (3)	8,500		N/A	N/A	Policy
(5) The Mountaineers							Education and
7700 Sand Point Way NE	07 000000	501 () (0)	F0 000		/-		Public Land
Seattle WA 98115	27-3009280	501 (c) (3)	50,000		N/A	N/A	Policy
(6)Concerned Off-Road Bicyclis							Education and
26500 West Agoura Rd. Suite	05 4104454	501 () (0)	5 250		/-		Public Land
Calabasas CA 91302	95-4124454	501 (c) (3)	5,350		N/A	N/A	Policy
(7)							
(8)							
(9)							
(10)							
	<u> </u>		4.11				
2 Enter total number of section 501(c)(3) ar	· ·					_	
3 Enter total number of other organizations	listed in the line 1 tab	ole					

ule I (Form 990) (2021) Outdoor Alliance t III Grants and Other Assistance	e to Domostia Individu	ala Complete if t	ho organization and	word "Voo" on Form 00	46-3272914
Part III can be duplicated if addi	itional space is needed	ais. Complete il ti	ne organization ans	swered res on Form 98	0, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
V Supplemental Information. Pro	ovide the information re	equired in Part I, I	ine 2; Part III, colum	nn (b); and any other add	ditional information.
Monitoring procedures	(Part I, line	2)			
rganization reviews project st	atus reports and v	erifies that t	he funding was u	sed as intended.	

Schedule I (Form 990) (2021)

EEA

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

Outdoor Alliance 46-3272914 **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b Х c Participate in or receive payment from an equity-based compensation arrangement? х If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a х х If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a х 6b х If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

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

(A) Name and Title		(B)Breakdown of W-2 ar	d/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	
Adam Cramer	(i)	174,000	0	0	4,568	0	178,568	0
1 Chief Executive Officer	(ii)	0	0	0	0	0	0	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
_ 4	(ii)							
_	(i)							
5	(ii)							
6	(i)							
6	(ii) (i)							
7	(ii)							
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9	(ii)							
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10	(ii)							
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_11	(ii)							
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12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
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_15	(ii)							
	(i)							
16	(ii)							

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2021

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Open to Public Inspection

Name of the organization Employer identification number Outdoor Alliance 46-3272914 Types of Property Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 2 Art - Historical treasures 3 Art - Fractional interests Books and publications 4 5 Clothing and household goods 6 Cars and other vehicles 7 8 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, 11 or trust interests 12 Securities - Miscellaneous Qualified conservation 13 contribution - Historic structures 14 Qualified conservation 15 Real estate - Residential Real estate - Commercial 16 17 18 19 20 Drugs and medical supplies 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts Other (Photography 25 х 1 20,500 Fair Value 26 Other ► (27 Other ► (28 Other ► (29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? х **b** If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Х b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Doop to Bub

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

46-3272914 Outdoor Alliance 01. Members or stockholder classes and rights (Part VI, line 6) The Alliance has member organizations. 02. Member election for additional members (Part VI, line 7a) Members elect the governing body. 03. Governing body decisions (Part VI, line 7b) Members have the power to amend the bylaws and vote to add board members. 04. Form 990 governing body review (Part VI, line 11) Form 990 is distributed to the officers of the Board of Directors, and approval for filing is conveyed to the Treasurer and Chief Executive Officer. 05. Conflict of interest policy compliance (Part VI, line 12c) Annually, each member organization submits a letter to Outdoor Alliance stating the conflict and nature of the conflict. 06. CEO, executive director, top management comp (Part VI, line 15a) In executive session, the Board of Directors review comparative salary data for comparative Chief Executive Officer positions and determine adjustment to the wage rate accordingly. 07. Governing documents, etc, available to public (Part VI, line 19) The Alliance makes its governing documents, conflict of interest policy and financial statements available to the public upon written request.

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

Name of the organization Outdoor Alliance	Employer identification number 46-3272914
08. Audited by an independent accountant (Part XII, line 2b)	
The Alliance's Board of Directors is responsible for oversight of the	e audit, including
selection of the independent accountant.	
09. List of other fees for services expenses (Part IX, line 11g)	
Consulting \$129,289	

EEA Schedule O (Form 990) 2021