

	** PUBLIC DISCLOSURE COPY **						
	0	00	Return of Organization Exempt From	m Incor	ne Tax	OMB No. 1545-0047	
Forn	n Y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code			s) 2021	
			Do not enter social security numbers on this form as it n	e public.	Open to Public		
Depar Intern	rtment al Reve	of the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the la	atest inform	ation.	Inspection	
AF	or th	e 2021 calend	ar year, or tax year beginning ${ m APR}$ 1 , 2021 and endin	g MAR	31, 2022		
	heck if	C Name o	forganization	D En	nployer identific	ation number	
a	oplicab						
	Addre chang Name	ge TROU	T UNLIMITED, INC.				
	chang Initial	ge Doing b	usiness as		38-161271		
	returr	Number	and street (or P.O. box if mail is not delivered to street address)		lephone number		
	Final returr termi	n–	NORTH KENT STREET 100		(703)522-		
	ated ∖Amer	City or t	own, state or province, country, and ZIP or foreign postal code NGTON, VA 22209		ss receipts \$	77,209,539.	
	_returr]Appli		NGTON, VA 22209 nd address of principal officer: CHRISTOPHER WOOD		s this a group re		
	_ltion pend		AS C ABOVE		or subordinates?	= =	
<u> </u>	- - 2V-0V	empt status:				list. See instructions	
		te: ► WWW .			Group exemption		
						State of legal domicile: MI	
	rt I	Summary					
	1	Briefly describ	be the organization's mission or most significant activities: ${ m {TO}}$ CONS	ERVE, E	PROTECT,	AND	
Governance			NORTH AMERICA'S COLDWATER FISHERIES				
rnai	2	Check this bo	x b if the organization discontinued its operations or disposed of	more than 2	5% of its net ass	ets.	
ovel	3	Number of vo	ting members of the governing body (Part VI, line 1a)			31	
Ğ	4	Number of inc	lependent voting members of the governing body (Part VI, line 1b)			30	
se	5		of individuals employed in calendar year 2021 (Part V, line 2a)			433	
<u>V</u> iti	6		of volunteers (estimate if necessary)			15868	
Activities &			d business revenue from Part VIII, column (C), line 12			262,545.	
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11			0.	
	-			60 5	or Year 783,791.	Current Year	
e	8		and grants (Part VIII, line 1h)	6	523,863.	<u>66,504,204.</u> 5,872,808.	
Revenue	9 10	•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		319,803.	621,656.	
Be	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		531,642.	591,189.	
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		259,099.	73,589,857.	
	13		milar amounts paid (Part IX, column (A), lines 1-3)		501,506.	1,459,254.	
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.	
s	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	000	284,172.	24,105,013.	
Expenses	16a		undraising fees (Part IX, column (A), line 11e)		0.	0.	
<u>e</u>			ing expenses (Part IX, column (D), line 25) 2,050,032.				
۵	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		022,703.	36,640,523.	
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		308,381.	62,204,790.	
	19	Revenue less	expenses. Subtract line 18 from line 12		450,718.	11,385,067.	
t Assets or Id Balances				11	of Current Year	End of Year	
sset 3ala	20	Total assets (248,127.	51,595,446.	
Net A	21		(Part X, line 26))29,157.	6,551,296.	
	22 rt II		fund balances. Subtract line 21 from line 20	34,4	218,970.	45,044,150.	
		<u> </u>	I declare that I have examined this return, including accompanying schedules and si	tatemente and	to the best of my	knowledge and belief it is	
			. Declaration of preparer (other than officer) is based on all information of which pre			KIIOWIEUYE AITU DEITEI, IL IS	
,	55110		mes Huchen	opuror nuo uriy		y 14, 2023	
Sigr	ı		e of officer		Date	,, _0_0	
Here		JIM	HUGHEY, CFO				
			print name and title				
		Print/Type pre		Date	Check	PTIN	
Paid		RICHARD	J. LOCASTRO, CPA Kuban J. Locastro	2/14/2	oon omployo		
Prep	arer	Firm's name	▶ GELMAN, ROSENBERG' & FREEDMAN		Firm's EIN 🕨	52-1392008	
Use	Only	Firm's address	► 4550 MONTGOMERY AVE SUITE 800N				
			BETHESDA, MD 20814-2930		Phone no. 301	L-951-9090	

May the IRS dis	scuss this return with the preparer shown above? See instructions	
132001 12-09-21	LHA For Paperwork Reduction Act Notice, see the separate instructions.	

	990 (2021) TROUT UNLIMITED, INC. 38-1612715 Page 2 t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	TO CONSERVE, PROTECT, AND RESTORE NORTH AMERICA'S COLDWATER FISHERIES
	AND THEIR WATERSHEDS.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	CONSERVATION OPERATIONS:
	IN NORTHERN NEW ENGLAND WE COMPLETED NUMEROUS LARGE WOOD ADDITION
	PROJECTS TO IMPROVE INSTREAM HABITAT FOR BROOK TROUT AS PART OF A
	MULTI-YEAR, \$1.8 MILLION PARTNERSHIP WITH THE NATURAL RESOURCE
	CONSERVATION SERVICE AND PRIVATE LANDOWNERS. LONG-TERM STUDIES FROM
	VERMONT HAVE SHOWN DRAMATIC INCREASES IN BROOK TROUT POPULATIONS WHERE
	INSTREAM HABITAT HAS BEEN ENHANCED THROUGH WOOD ADDITIONS. OVER THE
	COURSE OF THIS PROJECT TU WILL IMPROVE 60 MILES OF TROUT HABITAT IN
	MAINE, NEW HAMPSHIRE, AND VERMONT.
	TWO YEARS AGO, TU LAUNCHED ITS NEWEST HOME RIVERS INITIATIVE ON THE
	BATTENKILL RIVER. SINCE THEN, TU HAS RESTORED 1 MILE OF IN-STREAM
4b	(Code:) (Expenses \$ 3,075,267. including grants of \$ 227,175.) (Revenue \$ 364,747.
	VOLUNTEER OPERATIONS AND CHAPTER SUPPORT:
	PLANT A TREE WITH TU: INITIATIVE FOCUSES ON GROWING ENGAGEMENT AND
	COMBATTING CLIMATE CHANGE - DESIGNED TO HARNESS THE MARKETING POWER OF
	EARTH DAY (APRIL 22), ARBOR DAY (APRIL 29) AND NATIONAL VOLUNTEER WEEK
	(APRIL 17-23,) "PLANT A TREE WITH TU" WILL BE A NATIONWIDE, WEEK-LONG
	EVENT TO SUPPORT RIPARIAN TREE PLANTINGS LED BY TU CHAPTERS AND STAFF
	ACROSS THE COUNTRY. THE GOAL IS TO HAVE AT LEAST 100 LOCAL TREE
	PLANTING VOLUNTEER EVENTS REACHING NEW AUDIENCES THROUGH A COORDINATED
	NATIONAL MARKETING CAMPAIGN THAT WILL INCENT CHAPTERS AND COUNCILS TO
	USE TU'S NEW EVENTGROOVE TOOL A TOOL THAT OVER THE LAST 18 MONTHS HAS
	SUPPORTED MORE THAN 155 CHAPTER FUNDRAISING EVENTS. TU CAN INCORPORATE
	THESE PARTICIPANTS AND DONORS INTO OUR NATIONAL DATABASE, AND SERVE THE
4c	(Code:) (Expenses \$ 2,846,628. including grants of \$ 16,305.) (Revenue \$ 337,629.
	MEMBERSHIP DEVELOPMENT:
	REGARDING THE MEMBER RENEWAL AND APPEAL PROCESS, THE TEAM PLANS TO
	REDUCE THE NUMBER OF PAPER AND EMAIL SOLICITATIONS BY 40 PERCENT. THIS
	REDUCTION WILL BE COMPLEMENTED BY FUTURE IT IMPROVEMENTS THAT WILL
	ALLOW SELF-SERVICE ACCESS FOR MEMBERS TO OPT IN OR OUT OF CERTAIN
	COMMUNICATIONS. THE TEAM WILL ALSO BE SHARING THE DESIGN FOR A
	MEMBERSHIP RECRUITMENT APP THAT WILL ALLOW CURRENT MEMBERS TO QUICKLY
	AND EASILY SIGN NEW MEMBERS UP ONLINE THROUGH THE APP.
1d	Other program services (Describe on Schedule O.)
	(Expenses \$ 2,775,497. including grants of \$ 8,986.) (Revenue \$ 329,192.)
4e	Total program service expenses ► 54,330,134.
	Form 990 (2021
82002	SEE SCHEDULE O FOR CONTINUATION(S)
~ ~	
02	2021.05050 TROUT UNLIMITED, INC. 33959

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Form 990 (2021) TROUT UNLIMITED, INC.
Part IV Checklist of Required Schedules

 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If</i> "Yes," <i>complete Schedule A</i>			No
 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i>? See instructions 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effeduring the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part</i> 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> 8 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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i> 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> 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, 			
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 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	<i>+</i> 1 6		x
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 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, 			
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or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> 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,			
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,	10	х	
a 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 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
Part X, line 16? If "Yes," complete Schedule D, Part IX	<u>11d</u>		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		Х	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
Schedule D, Parts XI and XII	. 12a	X	<u> </u>
b Was the organization included in consolidated, independent audited financial statements for the tax year?			
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	<u>12b</u>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		77	
or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	<u> </u>
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		v	
foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	<u> </u>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		v
or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F</i> , <i>Parts III and IV</i>	16		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
 column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 	17		
	18		x
 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes." 	10		<u> </u>
	19		x
complete Schedule G, Part III			X
	0.00		
 b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 	200		
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	1
			(2021)

132003 12-09-21

3

Form	aan	(2021)
FUIII	990	(2021)

age 4		
Na	Yes	
No	res	
х		22
	x	23
Х		24a
		24b
	$ \rightarrow $	24c
	$ \rightarrow $	24d
Х	$ \rightarrow $	25a
_		
Х	$ \longrightarrow $	25b
Х	$ \rightarrow $	26
X	\rightarrow	27
Х	$ \rightarrow $	28a
Х	$ \rightarrow $	28b
X	$ \rightarrow $	28c
	X	29
Х	$ \rightarrow $	30
Х	$ \rightarrow $	31
Х		32
Х		33
Х		34
		35a
X		
<u> </u>		
X		35b
<u>X</u>		35b
		35b 36
	_	
x		
x		36
x	x	36
x	x	36 37
x	<u>x</u>	36 37
x	X Yes	36 37 38
x		36 37 38
x		36 37 38
x		36 37 38
X X X		36 37 38

	t V Statements Regarding Other IRS Filings and Tax Compliance (continue	u)			Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1 1			res
za	filed for the calendar year ending with or within the year covered by this return	2a	433		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax ref			2b	Х
U	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e -file. See instruction			20	
32				3a	х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedu			3b	X
	At any time during the calendar year, did the organization have an interest in, or a signature or othe				
ти	financial account in a foreign country (such as a bank account, securities account, or other financial			4a	
b	If "Yes," enter the name of the foreign country	accourt			
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Account	s (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did				
ou	any contributions that were not tax deductible as charitable contributions?	-		6a	
b	If "Yes," did the organization include with every solicitation an express statement that such contrib				
2	were not tax deductible?		3	6b	
7	Organizations that may receive deductible contributions under section 170(c).				
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	services n	rovided to the navor?	7a	х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was requ	iired		
	to file Form 8282?			7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor			7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file		99 as required?	7g	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ			7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain				
	sponsoring organization have excess business holdings at any time during the year?	-	N/A	8	
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		N/A	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A	9b	
0	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12N/A	. 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	. 10b			
1	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholdersN/A	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo			12a	
-	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A	. 12 b		-	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а			N/A	13a	
_	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the		l		
	organization is licensed to issue qualified health plans			-	
	Enter the amount of reserves on hand				
				14a	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Scher			14b	
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remul				
	excess parachute payment(s) during the year?			15	
~	If "Yes," see the instructions and file Form 4720, Schedule N.		<u> </u>		
6	Is the organization an educational institution subject to the section 4968 excise tax on net investme	ent incom	1e?	16	
-	If "Yes," complete Form 4720, Schedule O.	•			
7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage	•	NT / 7	4-	
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		N/A	17	
	If "Yes," complete Form 6069.				

9___1

Form 99	0 (2021)
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X

 Form 990 (2021)
 TROUT UNLIMITED, INC.
 38-1612715
 Page

 Part VI
 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

			_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	31			
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	30			
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					
		·		3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4	х	
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х
6	Did the organization have members or stockholders?			6	х	
	Did the organization have members, stockholders, or other persons who had the power to elect or ap		····· 🛏			
74			-	a	x	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, st		····· ⊢	a		
U			-	'n	x	
~	persons other than the governing body?		····· ⊢′	b	Λ	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea				x	
a	The governing body?			a	X	
	Each committee with authority to act on behalf of the governing body?		····· ²	b	_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					37
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code.)				
			_		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		1	Da	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		1	Db	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before filing the forr	n? 1	1a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		1:	2a	Х	
b				2b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	on Schedule O how this was done	,	1:	2c	X	
13	Did the organization have a written whistleblower policy?			3	Х	
14	Did the organization have a written document retention and destruction policy?		·····	4	Х	
15	Did the process for determining compensation of the following persons include a review and approva		····· –	-		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by macponacine				
-	The organization's CEO, Executive Director, or top management official		1	5a	х	
	Other officers or key employees of the organization		·····	5b	X	
U	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16-		agent with a				
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen			20		Х
	taxable entity during the year?			6a		Λ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?		10	6b		
200		0				
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE					he
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and		(c)(3)s or	ily) a	vailat	0
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply.		(c)(3)s or	ily) a	vailat	
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain	nd 990-T (section 501 on Schedule O)				
17 18	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (section 501 on Schedule O)				
Sec 17 18 19	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain	nd 990-T (section 501 on Schedule O)				
17 18 19	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's bood	nd 990-T (section 501 <i>on Schedule O</i>) nflict of interest polic				
17 18 19	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright <u>SEE</u> <u>SCHEDULE</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's boo ELENA PARKIN - (703) 522-0200	nd 990-T (section 501 on Schedule O) nflict of interest polic oks and records				
17 18	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright <u>SEE</u> <u>SCHEDULE</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's boo ELENA PARKIN - (703) 522-0200	nd 990-T (section 501 <i>on Schedule O</i>) nflict of interest polic				

Form 990 (2021) TROUT UNLIMITED, INC.	38-1612715	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C	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 endin	g with or within the organization?	s tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week	-	cer an	aad	Irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		/ee	mpen		1099-NEC)	1099-NEC)	and related
	below	Individual trustee or director	Institutional trustee	-	Key employee	st co	ar	,		organizations
	line)	Indivi	Institu	Officer	Key el	Highest compensated employee	Former			5
(1) CHRISTOPHER WOOD	40.00									
PRESIDENT AND CEO		Х		Х				386,632.	0.	55,215.
(2) JOANNE THEURICH	40.00									
COO				Х				234,605.	0.	45,434.
(3) MATTHEW RENAUD	40.00									
CFO (UNTIL 12/3/2021)				Х				213,506.	Ο.	45,159.
(4) STEVEN MOYER	40.00									
VP GOVERNMENT AFFAIRS						Х		168,923.	0.	32,610.
(5) JULISA EDWARDS	40.00									
GENERAL COUNSEL						X		182,360.	0.	7,060.
(6) KEITH CURLEY	40.00									
VP EASTERN CONSERVATION						X		134,747.	0.	36,831.
(7) ROBERT MASONIS	40.00									
VP WESTERN CONSERVATION						X		141,450.	0.	18,936.
(8) ELIZABETH SNYDER	40.00									
SR DIRECTOR, IT (UNTIL 9/24/2021)						X		142,403.	0.	17,392.
(9) ELIZABETH MACLIN	40.00									
FORMER EXECUTIVE VP (END 1/4/2021)							Х	110,764.	0.	4,621.
(10) HARRIS HYMAN	20.00									-
CHAIRMAN		Х		Х				0.	0.	0.
(11) JIM WALKER	20.00									•
NATIONAL CHAIR		Х		Х				0.	0.	0.
(12) RICH THOMAS	20.00							0	0	0
NATIONAL SECRETARY	15 00	Х		Х				0.	0.	0.
(13) PATSY ISHIYAMA	15.00	v		77				0.	0	0
SECRETARY (14) LAWRENCE GARLICK	15.00	Х		Х				0.	0.	0.
TREASURER	15.00	x		х				0.	0.	0.
(15) LINDA ROSENBERG ACH	5.00	^		~				0.	0.	0.
TRUSTEE	5.00	х						0.	0.	0.
(16) BERNARD C. BAILEY	5.00							U	0.	
TRUSTEE (UNTIL 9/1/2021)	5.00	х						0.	0.	0.
(17) R. SCOTT BLACKLEY	10.00									U
TRUSTEE		х						0.	0.	0.
132007 12-09-21	1		1		I	I			.	Form 990 (2021)
					-					(_0_1)

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Form	990	(2021)
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A) (B) (C) (D)						(E)	(E) (F)				
Name and title	Average	(do	F not ch		tion		ne	Reportable	Reportable		Estimated
	hours per	box	, unles	s per	son i	s both	n an	compensation	compensation	n	amount of
	week		cer and	adi	recio	r/trus	lee)	- from	from related		other
	(list any hours for	irecto						the	organizations (W-2/1099-MIS		compensation
	related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-WIS 1099-NEC)	U	from the organization
	organizations	ruste	l trus		ee,	mpen		1099-NEC)	1033-1120)		and related
	below	Individual trustee or director	Institutional trustee	5	ƙey employee	Highest compensated employee	er				organizations
	line)	Indiv	In stit	Officer	Key e	Highe	Former				-
(18) SHERRY BRAINERD	5.00										
TRUSTEE		Х						0.		0.	0.
(19) AMY CORDALIS	5.00										
TRUSTEE (FROM 9/1/2021)		х						0.		0.	0.
(20) JOSH CRUMPTON	5.00										
TRUSTEE		х						0.		0.	0.
(21) MAC CUNNINGHAM	10.00										
TRUSTEE		х						0.		0.	0.
(22) R. JOSEPH DE BRUYN	5.00										
TRUSTEE		х						0.		0.	0.
(23) PAUL DOSCHER	5.00										
TRUSTEE		х						0.		0.	0.
(24) NOEL (SKIP) DUNN	5.00										
TRUSTEE		х						0.		0.	0.
(25) LAWRENCE FINCH	5.00										
TRUSTEE		х						0.		0.	0.
(26) PETER GRUA	5.00										
TRUSTEE		х						0.		0.	0.
1b Subtotal	•							1,715,390.		0.	263,258.
c Total from continuation sheets to Part								0.		0.	0.
d Total (add lines 1b and 1c)								1,715,390.		0.	263,258.
2 Total number of individuals (including bu	t not limited to th	ose	listec	l ab	ove) wh	o re	eceived more than \$100,	000 of reportable		
compensation from the organization	•										24
											Yes No
3 Did the organization list any former offic	er, director, trust	ee, k	ey er	nplo	oyee	e, or	hig	hest compensated empl	oyee on		
line 1a? If "Yes," complete Schedule J fo	r such individual									[3 X
4 For any individual listed on line 1a, is the											
and related organizations greater than \$	150,000? If "Yes,	" со	mple	te S	Sche	dule	Jf	or such individual			4 X
5 Did any person listed on line 1a receive of	or accrue comper	sati	on fro	om a	any	unre	elate	ed organization or individ	lual for services		
rendered to the organization? If "Yes," c	omplete Schedule	e J fo	or su	ch p	bers	on .					5 X
Section B. Independent Contractors											
1 Complete this table for your five highest	compensated inc	lepe	nden	t co	ontra	actor	rs th	nat received more than \$	100,000 of comp	ensat	ion from
the organization. Report compensation f	or the calendar ye	ear e	nding	g wi	ith c	or wi	thin	the organization's tax y	ear.		
(A)								(B)			(C)
Name and busine								Description of s	ervices	C	ompensation
SELLAND CONSTRUCTION, II											
P.O. BOX 119, WENATCHEE	<u>, WA 9880</u>	7						CONSTRUCTION		1	<u>,477,648.</u>
CATES & ERB, INC.											
P.O. BOX 2027, OMAK, WA 98841 CONSTRUCTION							1	<u>,296,381.</u>			
GLACIER EXCAVATING											
P.O. BOX 351, EUREKA, MT 59917 CONSTRUCTION						1	<u>,014,640.</u>				
RR DONNELLEY											
35 W WACKER DRIVE, CHICAGO, IL 60601 PRINTING							899,636.				
DURDEN CONSTRUCTION					_						
PO BOX 966, SAN JUAN BA	JTISTA, C	A	950) 4 !	5			CONSTRUCTION			771,542.
2 Total number of independent contractors	s (including but no	ot lin	nited	to t	hos	e lis	ted	above) who received mo	ore than		

\$100,000 of compensation from the organization ► 68 SEE PART VII, SECTION A CONTINUATION SHEETS

SEE PART VII, SECTION A CONTINUATION SHEETS Form 990 (2021) 132008 12-09-21

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Part VII Section A. Officers, Directors	, Trustees, Key Er	nplo	yee	s, ar	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	Position						Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	apply)		compensation	compensation	amount of
	per week					9		from the	from related organizations	other compensatior
	(list any	ctor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r direc				ed en		(W-2/1099-MISC)		organization
	related	stee o	rustee			ensat				and related
	organizations	al trus	onal ti		oloyee	comp				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(27) CHRIS HILL	5.00	-	=	10	Ke	Ξ	Fc			
IRUSTEE	5.00	x						0.	0.	0
(28) THOMAS L. JONES	5.00								••	
IRUSTEE		х						0.	Ο.	0
(29) HENRY E. KOLTZ	5.00									
TRUSTEE (UNTIL 1/1/2021)		х						0.	0.	0
(30) ALEX MAHER	5.00									
TRUSTEE		х						0.	0.	0
(31) GREGORY A. MCCRICKARD	10.00									
IRUSTEE		х						0.	0.	0
(32) STEPHEN MOSS	5.00									
TRUSTEE (UNTIL 9/30/2021)		Х						0.	0.	0
(33) PHOEBE MUZZY	5.00									
IRUSTEE		Х						0.	0.	0
(34) TIM O'LEARY	5.00								0	
	F 00	X						0.	0.	0
(35) ROBERT ODEN, JR. TRUSTEE	5.00	v						0.	0	0
(36) AL PERKINSON	5.00	Х						0.	0.	0
IRUSTEE	5.00	x						0.	0.	0
(37) CANDICE PRICE	5.00								••	0
IRUSTEE	5.00	x						0.	0.	0
(38) DONALD (DWIGHT) SCOTT	5.00									0
TRUSTEE		х						0.	0.	0
(39) KATHY SCOTT	5.00									
TRUSTEE		х						0.	0.	0
(40) JUDI SITTLER	5.00									
TRUSTEE		Х						0.	0.	0
(41) TERRY TURNER	10.00									
TRUSTEE		Х						0.	0.	0
(42) JEFF WITTEN	10.00								_	_
TRUSTEE		Х						0.	0.	0
		\vdash								
		1								

132201 04-01-21

		Check if Schedule O	contr	ins a respo	nee -	or note to any line	in this Part VIII			
			00112		136	or note to any inte	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclud from tax unde sections 512 - 5
ş	1 a	Federated campaigns		1a		131,310.				
and Other Similar Amounts		Membership dues								
Ĕ	с	Fundraising events		1c						
ar /	d	Related organizations		1d						
E	е	Government grants (contr	ributi	ons) 1e		33,690,328.				
S	f	All other contributions, gifts,								
Ę		similar amounts not included	l abov			32,682,566.				
p	-	Noncash contributions included in				1,066,463.	66 504 004			
a	h	Total. Add lines 1a-1f	<u></u>				66,504,204.			
	~	MEMDEDCUTD DUDC				Business Code	5 610 060	E 610 060		
	2 a	MEMBERSHIP DUES				900099 900099	5,610,263.	5,610,263.	262 545	
an	b	PUBLICATIONS				300033	262,545.		262,545.	
Revenue	C d									
Be	d					+				
	e f	All other program service	rovo							
		Total. Add lines 2a-2f					5,872,808.			
╡	<u>y</u> 3	Investment income (includ								
	5	other similar amounts)					490,995.			490,99
	4	Income from investment of								,
	5	Royalties		-		Г	16,448.			16,44
		,		(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
		Less: rental expenses	6b							
		Rental income or (loss)	6c							
	d	Net rental income or (loss	i)							
	7 a	Gross amount from sales of		(i) Securit	es	(ii) Other				
		assets other than inventory	7a	2,132,0	87.					
	b	Less: cost or other basis								
2		and sales expenses	7b	2,001,4	26.					
	С	Gain or (loss)	7c	130,6	61.					
		Net gain or (loss)				▶	130,661.			130,6
	8 a	Gross income from fundraisi								
		including \$								
		contributions reported on		-						
	•	Part IV, line 18			8a 8b					
		Less: direct expenses Net income or (loss) from								
		Gross income from gamir			Ē					
	5 4	Part IV, line 19			9a					
	b	Less: direct expenses			9b					
		Net income or (loss) from			_					
		Gross sales of inventory,			<u> </u>	F				
		and allowances			10a	2,189,360.				
	b	Less: cost of goods sold			10b	1,618,256.				
		Net income or (loss) from			y	>	571,104.	571,104.		
T						Business Code				
Revenue	11 a	LIST RENTALS				900099	18,263.			18,26
enu	b	MISCELLANEOUS				900099	-14,626.			-14,62
Sev	С					ļļ				
Щ	d	All other revenue								
	е	Total. Add lines 11a-11d		<u></u>	<u></u>	►	3,637.			
	12	Total revenue. See instruction	ons				73,589,857.	6,181,367.	262,545.	641,7

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising
/b, a	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	1,319,254.	1,319,254.		
~	and domestic governments. See Part IV, line 21	1,515,254.	1,515,254.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
0	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	140,000.	140,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees	915,460.		694,826.	220,634
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	14,772,442.	12,342,675.	2,044,369.	385,398
8	Pension plan accruals and contributions (include				•
	section 401(k) and 403(b) employer contributions)	1,457,120.	1,199,335.	214,996.	42,789
9	Other employee benefits	5,593,133.	4,588,732.	790,495.	<u>42,789</u> 213,906
0	Payroll taxes	1,366,858.	1,103,791.	209,524.	53,543
1	Fees for services (nonemployees):				
а	Management				
b	Legal	90,646.	8,070.	82,576.	
с	Accounting	107,585.	1,690.	105,895.	
d		140,000.	140,000.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	55,378.		55,378.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	23,231,913.	22,850,264.	362,266.	19,383
2	Advertising and promotion	182,327.	180,937.	1,322.	68
3	Office expenses	3,284,517.	2,689,433.	100,179.	494,905
4	Information technology	871,902.	690,762.	149,248.	31,892
5	Royalties				
6	Occupancy	811,595.	721,245.	70,401.	19,949
7	Travel	928,299.	835,071.	48,800.	44,428
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials \dots				
9	Conferences, conventions, and meetings	209,087.	113,004.	43,191.	52,892
0	Interest	3,813.		3,813.	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	111,055.	88,032.	18,872.	4,151
3	Insurance	186,829.	64,437.	122,392.	
4	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 0.)				
а	MATERIALS	1,585,073.	1,585,073.		
b	MAGAZINE PRODUCTION	1,533,960.	1,277,216.	2,403.	254,341
с	WATER LEASES	1,090,054.	1,090,054.		
d	FULFILLMENT, CAGING	745,894.	543,179.	105.	202,610
е	All other expenses	1,470,596.	757,880.	703,573.	9,143
5	Total functional expenses. Add lines 1 through 24e	62,204,790.	54,330,134.	5,824,624.	2,050,032
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here 🕨 🚺 if following SOP 98-2 (ASC 958-720)	1,302,912.	397,740.	0.	905,172

132010 12-09-21

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2021.05050 TROUT UNLIMITED, INC.

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Form **990** (2021)

TROUT UNLIMITED, INC.

	<u>1 990 (</u> rt X	2021) TROUT UNLIMITED		38-	1612715 Page 11		
		Check if Schedule O contains a response or note	to an	v line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			11,127,689.	1	10,910,843.
	2	Savings and temporary cash investments			2,984,479.	2	2,745,646.
	3	Pledges and grants receivable, net			14,880,669.	3	15,937,852.
	4				4,431,705.	4	8,044,830.
	5	Loans and other receivables from any current or f			_//	-	
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifie					
		under section 4958(f)(1)), and persons described i				6	
6	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			549,165.	8	1,013,972.
As	9				659,025.	9	540,467.
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,256,635.			
	b	Less: accumulated depreciation	10b	5,065,879.	186,334.	10c	190,756.
	11	Investments - publicly traded securities			9,374,936.	11	11,071,015.
	12	Investments - other securities. See Part IV, line 11				12	1,085,940.
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			54,125.	15	54,125.
	16	Total assets. Add lines 1 through 15 (must equal			44,248,127.	16	51,595,446.
	17	Accounts payable and accrued expenses			6,008,253.	17	6,186,103.
	18	Grants payable				18	
	19	Deferred revenue			373,439.	19	317,843.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Pa	art IV	of Schedule D		21	
es	22	Loans and other payables to any current or forme					
Liabilities		trustee, key employee, creator or founder, substa					
iab		controlled entity or family member of any of these		F		22	
	23	Secured mortgages and notes payable to unrelate			2 227 200	23	
	24	Unsecured notes and loans payable to unrelated			3,337,300.	24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines			310,165.	0.5	47 250
	00	of Schedule D			10,029,157.	25 26	<u>47,350.</u> 6,551,296.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, chec		► ▼	10,029,137.	20	0,331,290.
S		and complete lines 27, 28, 32, and 33.	k ner				
Ű	27			3,937,973.	27	11,666,421.	
sala	28	Net assets with donor restrictions	30,280,997.	28	33,377,729.		
Б	20	Organizations that do not follow FASB ASC 95				20	
Ъ		and complete lines 29 through 33.	,				
P	29	· · · · · · · · · · · · · · · · · · ·				29	
iets	30	Paid-in or capital surplus, or land, building, or equ				30	
Ass	31	Retained earnings, endowment, accumulated inco				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			34,218,970.	32	45,044,150.
~	33	Total liabilities and net assets/fund balances			44,248,127.	33	51,595,446.
-					•		5 990 (2001)

Form 990 (2021)

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Form	1990 (2021) TROUT UNLIMITED, INC.	38-	-1612715	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	73,58	9,8	57.
2	Total expenses (must equal Part IX, column (A), line 25)	2	62,20	4,7	90.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,38	5,0	67.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	34,21		
5	Net unrealized gains (losses) on investments	5	-55	<u>9,8</u>	87.
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	45,04	4,1	50.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				\square
			_	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	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	_
~	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Au		37	
	Act and OMB Circular A-133?		<u>3a</u>	X	──
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			37	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(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. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organizatio

Name of the organization Employer identification num							identification number		
	TROU	T UNLIMITE	D, INC.					8-1612715	
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The orga	nization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only o	one box.)				
1	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	l)(A)(i).			
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)					
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
	city, and state:								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
	section 170(b)(1)(A)(iv).	Complete Part II.)							
6	A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7 X	An organization that norma	Ily receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	public described in	
	section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)					
9	An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant	college	
	or university or a non-land-g	grant college of agricu	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
	university:								
10	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from	
	activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support fi	rom gross investment	
	income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	fter June 30, 1975.	
	See section 509(a)(2). (Co	mplete Part III.)							
11	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).			
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	ne functior	ns of, or to ca	rry out the	purposes of one or	
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	5 09(a)(2) .	See section &	5 09(a)(3). (Check the box on	
	lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.		
a	Type I. A supporting orga	anization operated, su	upervised, or controlled	by its supp	ported orga	anization(s), ty	pically by	giving	
	the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	ipporting	
	organization. You must o	complete Part IV, Se	ctions A and B.						
b _	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ring	
	control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported	
_	organization(s). You mus	t complete Part IV,	Sections A and C.						
c 🗌	Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functional	ly integrate	d with,	
_	its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.			
d _	Type III non-functionally	<pre>/ integrated. A supp</pre>	orting organization oper	ated in cor	nnection w	ith its suppor	ted organiz	zation(s)	
	that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distri	ibution rec	uirement and	an attentiv	veness	
_	requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.			
e	Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type	II, Type III		
	functionally integrated, or	r Type III non-functior	nally integrated supportion	ng organiz	ation.			[
	er the number of supported of	•							
g Pro	vide the following information			(iv) Is the orga	inization listed	(v) Amount of	monoton	(vi) Amount of other	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see ir		(vi) Amount of other support (see instructions)	
			above (see instructions))	Yes	No				
Total									

Schedule	A (Form 990)) 2021
Part II	Suppor	t Sc

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	-					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	47745662.	23757769.	55081301.	<u>62783791.</u>	66504204.	255872727
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	47745662.	<u>23757769.</u>	<u>55081301.</u>	62783791.	66504204.	255872727
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)						
	Public support. Subtract line 5 from line 4.						255872727
Sec	ction B. Total Support	1	1	1	1	1	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	47745662.	23757769.	55081301.	62783791.	66504204.	255872727
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	228,477.	152,949.	186,225.	304,460.	507,443.	1379554.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	-4,952.		26,889.	29,386.		54,960.
11	Total support. Add lines 7 through 10						257307241
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 33	,707,146.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
-	organization, check this box and sto						
	ction C. Computation of Publ						00 44
	Public support percentage for 2021 (•			14	99.44 %
	Public support percentage from 2020					15	98.78 %
16a	33 1/3% support test - 2021. If the						
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
47.							
1/a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			-		e e	
	meets the facts-and-circumstances te	•	•	,	•	17. and line 15 is	
b	10% -facts-and-circumstances test						IU% Or
	more, and if the organization meets the						
40	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Image: Second Second						
18	rivate roundation. If the organization	IT UIU NOT CHECK A	box on line 13, 16	a, 100, 17a, 0r 17t	o, check this box a		
						Schedule A	(Form 990) 2021

132022 01-04-22

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			_				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5					+		
	Amounts included on lines 1, 2, and							
70	3 received from disgualified 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							
c	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Sec	ction B. Total Support			1				
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
	Amounts from line 6							
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	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.)							
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third.	fourth, or fifth tax	year as a section s	501(c)(3) organ	ization,	
_	check this box and stop here	•					·	
Sec	ction C. Computation of Publi	c Support Per	rcentage				,	
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%	
16	Public support percentage from 2020	Schedule A, Part	III, line 15			16	%	
Sec	ction D. Computation of Inves							
17	Investment income percentage for 20	021 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%	
18	Investment income percentage from					18	%	
19a	1 33 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and li	ne 17 is not	
	more than 33 1/3%, check this box a	-						
b	33 1/3% support tests - 2020. If the	-					3%, and	
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
20	Private foundation. If the organization	on did not check a	box on line 14, 19	<u>a, or 19b, chec</u> k t	his box and see in:	structions		
13202	23 01-04-22						ule A (Form 990) 2021	
			16					

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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supervised or controlled the supporting organization

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> 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.			

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Section C. Type II Supporting Organizations	

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).
 Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	that the organization used to	satisfy the Integral Part 1	Test during the year	(see instructions).
•	CHECK THE DOX HEAT TO THE HIELITOU		salisiy line initegral i art i	csi uunny inc ycar	1000 1100 0000

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** ____ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c 🗋	The organization supported a governmental entity	Describe in Part VI how you supported a governmental entity (see instruction <u>s).</u>
-----	--	--

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

3b | | Schedule A (Form 990) 2021

2a

2b

3a

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2021.05050 TROUT UNLIMITED, INC.

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Yes No

Sche	dule A (Form 990) 2021 TROUT UNLIMITED, INC.			38-1612715 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on	Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
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 integrat	ed Type III supporting o	rganization (see

instructions).

Schedule A (Form 990) 2021

132026 01-04-22

Schedule A (Form 990) 2021

Section D - Distributions

Schedule A (Form 990) 2021

Amounts paid to supported organizations to accomplish exer		1			
Amounts paid to perform activity that directly furthers exemp					
organizations, in excess of income from activity	2				
Administrative expenses paid to accomplish exempt purpose	3		_		
Amounts paid to acquire exempt-use assets		4			
Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
Other distributions (describe in Part VI). See instructions.			6		
Total annual distributions. Add lines 1 through 6.			7		
Distributions to attentive supported organizations to which the	ne organization is responsive				
(provide details in Part VI). See instructions.			8		
Distributable amount for 2021 from Section C, line 6			9		
Line 8 amount divided by line 9 amount	1		10		
ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021	
Distributable amount for 2021 from Section C, line 6					
Underdistributions, if any, for years prior to 2021 (reason-					
able cause required - explain in Part VI). See instructions.					
Excess distributions carryover, if any, to 2021					
From 2016					
From 2017					
From 2018					
From 2019					
From 2020					
Total of lines 3a through 3e					
Applied to underdistributions of prior years					
Applied to 2021 distributable amount					
Carryover from 2016 not applied (see instructions)					
Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
Distributions for 2021 from Section D,					
line 7: \$					
Applied to underdistributions of prior years					
Applied to 2021 distributable amount					
Remainder. Subtract lines 4a and 4b from line 4.					
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.					
Remaining underdistributions for 2021. Subtract lines 3h					
5					
and 4b from line 1. For result greater than zero, <i>explain in</i>					
and 4b from line 1. For result greater than zero, explain in					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI . See instructions.					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI . See instructions. Excess distributions carryover to 2022. Add lines 3j					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI . See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c.					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7:					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: Excess from 2017					
and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: Excess from 2017 Excess from 2018					
	Amounts paid to perform activity that directly furthers exemplor ganizations, in excess of income from activity Administrative expenses paid to accomplish exempt purpose Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - pro Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the (provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 Line 8 amount divided by line 9 amount ion E - Distribution Allocations (see instructions) Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reason- able cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018 From 2019 From 2020 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2021 from Section D, line 7: \$ Applied to underdistributions of prior years Applied to 2021 distributable amount Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2021 from Section D, line 7: \$ Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater	Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 Line 8 amount divided by line 9 amount (i) Excess Distributions Allocations (see instructions) Distributable amount for 2021 from Section C, line 6 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2018 From 2019 From 2019 From 2016 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2021 from Section D, Line 7: \$ Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distri	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 Line 8 amount divided by line 9 amount (i) Excess Distributions (ii) Underdistributions, if any, for years prior to 2021 (reason- able cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 From 2016 From 2017 From 2018 From 2019 From 2020 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to underdistributions of prior years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) Excess Distributions for years Applied to 2021 distributable amount Excess Distributions for years Applied to 2021 distributable amount Excess Distributable Excess Distributable Excess Distributable Excess Distributable Excess Exce	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exemptuse assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Total annual distributions, add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2021 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 Line 7 Cause required - explain in Part VI). See instructions. 1 From 2016 From 2017 From 2017 From 2018 From 2019 From 2019 From 2016 From 2017 From 2018 From 2018 From 2018 From 2018 From 2019 From 2016 From 2016 From 2016 From 2016 From 2016 From 2017 From 2018 From 2018 From 2018 From 2019 From 2014 From 2015 From 2015 From 2015 From 2015 From 2016 From 2016 From 2016 From 2017 From 2016 From 2018 From 2017 From 2018 From 2018 From 2018 From 2019 From 2019 From 2019 From 2014 From 2015 From 2015 From 2015 From 2016 From 2016 From 2016 From 2016 From 2017 From 2018 From 2018 From 2018 From 2018 From 2014 From 2014 From 2015 From 2015 From 2015 From 2015 From 2016 From 2016 From 2016 From 2017 From 2016 From 2017 From 2018 From 2018 From 2018 From 2014 From 2014 From 2015 From 2015 From 2015 From 2015 From 2016 From 2016 From 2016 From 2017 From 2017 From 2018 From 2018 From 2018 From 2019 From 2019 From 2019 From 2019 From 2014 From 2014 From 2014 From 2015 From 2015 From 2015 From 2016 From 20	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 administrative expenses paid to accomplish exempt purposes of supported organizations Administrative expenses paid to accomplish exempt purposes of supported organizations Administrative expenses paid to accomplish exempt purposes of supported organizations Administrative expenses paid to accomplish exempt purposes of supported organizations Administrative expenses paid to accomplish exempt purposes of supported organizations Administrative supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Consideration of the advective supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Consideration of the advective supported organization to which the organization is responsive (provide details in Part VI). See instructions. Consideration of the advective support of the advective

TROUT UNLIMITED, INC.

38-1612715 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Current Year

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

PART II:

THE INFORMATION REPORTED IN THE 2018 COLUMN IS FOR THE SHORT PERIOD

10/1/2018 - 3/31/2019.

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Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

2021

Employer identification number

38-1612715

	TROUT	UNLIMITED,				
Organization type (check one):						
Filers of:	Section	on:				

Form 990 or 990-EZ	$\fbox{3}$ 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

INC.

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year $\dots \longrightarrow$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

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Name of organization

Employer identification number

TROUT UNLIMITED, INC.

38-1612715

	Contributors (see instructions). Use duplicate copies of Part I if a		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>6,331,115.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>5,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>3,448,322.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person X Payroll
		\$ <u>3,337,300</u>	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	\$ <u>3,337,300.</u> (c) Total contributions	(Complete Part II for
		(c)	(Complete Part II for noncash contributions.) (d)
No.		(c) Total contributions	(Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Noncash (Complete Part II for
No. 5 (a)	Name, address, and ZIP + 4	(c) Total contributions (c) (c) (c) (c)	(Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.) (d)

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Name of organization

Page **2** Employer identification number

TROUT UNLIMITED, INC.

38-1612715

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>1,785,805.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$ <u>1,600,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
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Schedule B	(Form	990)	(2021)
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Name of organization

Page **3**

Employer identification number

38-1612715

TROUT UNLIMITED, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		 \$	

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2021.05050 TROUT UNLIMITED, INC.

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lame of or	rganization		Employer identification number
ROUT	UNLIMITED, INC.		38-1612715
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	(a) through (e) and the following line entry charitable, etc., contributions of \$1,000 or less	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the yea For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
ŀ		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	Transferee's name, address, a	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee
			·
3454 11-11·	-21		Schedule B (Form 990) (20
		26	

2021.05050 TROUT UNLIMITED, INC. 33959_1

Department of the freasury	
Department of the Treasury If the organization answered "Ves," 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 IA and B. Do not complete Part IA. Section 507 (c)(3) organizations: Complete Parts IA and B. Do not complete Part IA. Section 507 (c)(3) organizations: Complete Parts IA and B. Do not complete Part IA. Section 507 (c)(3) organizations: Complete Part IA A only. If the organization: Complete Part IA 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 IB. Section 501 (c)(3), organizations that have filed Form 5768 (election under section 501(h)): Complete Part IB. Section 501 (c)(3), organizations that have filed Form 5768 (election under section 501(h)): Complete Part IB. Do not complete Part IB. Section 501 (c)(4), (5), or (6) organizations: Complete Part III. Name of organization TROUT UNLIMITED, INC. Integration answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions), then Section 501 (c)(4), (5), or (6) organizations is exempt under section 501 (c)(3). I Provide a description of the organization is exempt under section 501 (c)(3). I Provide a description of the organization is exempt under section 501 (c)(3). I Enter the amount of any excise tax incurred by the organization under section 501 (c)(3). I Enter the amount of any excise tax incurred by the organization for section 501 (c)(3). I Enter the amount of the file organization is exempt under section 501 (c)(3). I Enter the amount of the file organization is exempt under section 501 (c)(3). I Enter the amount of the file organization is exempt under section 501 (c)(3). I Enter the amount of the file organization is exempt under sectio	ection
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Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization is funds. Also enter the amount of polic contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fu political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount contributions political organization is political organization in Part IV. (e) Amount contributions	No No
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 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization is funds. Also enter the amount of policon contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fur political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount contributions promptly and delivered to a political organization's funds. If none, enter -0. 	
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 line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organ made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of polic contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fur political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 If additional organization org	
 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organ made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of policontributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fur political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 under the organization or political organization or political organization from the filing organization organization organization form the filing organization organization organization form filing organization organizatio organization organization organization organization organizati	
 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organ made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of polic contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fur political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount organization organization organization is promptly and delivered to political organization organization organization organization organization organization is funds. If none, enter -0 	No
made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of polic contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fur political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount contributions promptly and delivered to political organization organization organization in Part IV.	
political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount contributions promptly ard delivered to political organization	
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount contributions promptly ar delivered to political org	d or a
filing organization's contributions funds. If none, enter -0 delivered to political org	
	eceived and d directly a separate anization.
Ear Demonstrate Deduction: Act Nation, and the lastructions for Form 200 at 200 F7	

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

Schedule C (Form 990) 2021

132041 11-03-21

Schedule C (Form 990) 2021	TROUT UNLIM	ITED, INC.		38-1	612715 Page 2	
Part II-A Complete if the org	anization is exen	npt under section	1 501(c)(3) and file	ed Form 5768 (ele	ction under	
section 501(h)).						
A Check 🕨 📃 if the filing organiza	tion belongs to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,	
expenses, and shar	re of excess lobbying e	expenditures).				
B Check 🕨 🔄 if the filing organiza	tion checked box A ar	d "limited control" pro	visions apply.			
Limi	ts on Lobbying Exper	nditures		(a) Filing	(b) Affiliated group	
	ditures" means amou			organization's totals	totals	
1a Total lobbying expenditures to influ				0. 273,938.		
	 b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) 					
	273,938. 61,930,852.					
d Other exempt purpose expenditure	62,204,790.					
	 e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 					
If the amount on line 1e, column (a) of	1,000,000.					
Not over \$500,000						
Over \$500,000 but not over \$1,000						
Over \$1,000,000 but not over \$1,5						
Over \$1,500,000 but not over \$17,						
Over \$17,000,000						
	Over \$17,000,000 \$1,000,000.					
g Grassroots nontaxable amount (en	ter 25% of line 1f)			250,000.		
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.		
i Subtract line 1f from line 1c. If zero	o or less, enter -0-			0.		
j If there is an amount other than ze	ro on either line 1h or l	ine 1i, did the organiza	ation file Form 4720	_		
reporting section 4911 tax for this	year?				Yes No	
		raging Period Under				
(Some organizations the second s)1(h) election do not h ate instructions for lin		of the five columns be	low.	
	•	ditures During 4-Yea	,			
		laita es Daring 4-1 ea				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total	
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.	
b Lobbying ceiling amount						
(150% of line 2a, column(e))					6,000,000.	
c Total lobbying expenditures	717,676.	278,751.	264,649.	273,938.	1,535,014.	
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.	
e Grassroots ceiling amount					1 500 000	
(150% of line 2d, column (e))					1,500,000.	
	222 612	2 200	6 500		011 110	
f Grassroots lobbying expenditures	232,612.	2,300.	6,500.	<u> </u>	241,412.	
				Schedu	le C (Form 990) 2021	

132042 11-03-21

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description			(b)	
	e lobbying activity.	Yes	No	Amo	ount
1 a	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)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
_3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year?	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '				3. is
	answered "Yes."				-,
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
b	Carryover from last year		. 2b		
с	Total		. 2c		
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?				
	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	de 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 a	nd 2 (See	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2021

132043 11-03-21

00		Sunnlement	al Financial Statements		OMB No. 1545-0047
			anization answered "Yes" on Form 990,		2021
(Forn	n 990)		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		Ζυζ Ι
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest informatior		Open to Public Inspection
	e of the organizati				ployer identification number
	-	TROUT UNLIMITED, I			38-1612715
Par		-	d Funds or Other Similar Funds or A	ccour	nts. Complete if the
	organizatio	n answered "Yes" on Form 990, Part IV, lin			
			(a) Donor advised funds	(b) Fur	nds and other accounts
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fu		
~			exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used		
	impermissible priv		r donor advisor, or for any other purpose confe	U U	Yes No
Par			ganization answered "Yes" on Form 990, Part I		
1		servation easements held by the organization		v, iii io 7	·
•		of land for public use (for example, recrea		torically	important land area
	X Protection o		Preservation of a ce	-	•
		of open space			
2		• •	ied conservation contribution in the form of a c	onserva	tion easement on the last
	day of the tax year				Held at the End of the Tax Year
а	Total number of co	onservation easements		2a	3
b	Total acreage rest			2b	120.00
с	•		ucture included in (a)	2c	
d			after 7/25/06, and not on a historic structure		
	listed in the Natior	nal Register		2d	
3			eased, extinguished, or terminated by the orga	nization	during the tax
	year 🕨	0			
4	Number of states	where property subject to conservation eas	sement is located		
5	Does the organiza	tion have a written policy regarding the per	iodic monitoring, inspection, handling of		
	,	orcement of the conservation easements it			
6		1.0	handling of violations, and enforcing conservat	ion ease	ements during the year
-	-	<u>40</u>			te du la cutto cutto cu
7		1,000.	lling of violations, and enforcing conservation e	asemen	ts during the year
0			e satisfy the requirements of section 170(h)(4)(l	5)/i)	
8					Yes No
9			on easements in its revenue and expense state		
5		-	note to the organization's financial statements t		
		ounting for conservation easements.			
Par			Art, Historical Treasures, or Other	Simila	r Assets.
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and ba	lance s	heet works
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education, or research in further	ance of	public
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items.		
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balan	ce sheet	works of
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furtherand	ce of pu	blic service,
	-	ng amounts relating to these items:			
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1		🕨	\$
	. ,				·
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gain	, provide	e
	•	unts required to be reported under FASB A			
					\$
				🕨	
	-	eduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2021
132051	10-28-21				

30					
2021.05050	TROUT	UNLIMITED,	INC.	33959	_1

Sche		NLIMITED, I				38-16			age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Ot	her Siı	milar Asset	s (contil	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that mak	e signifi	cant use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	e	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ellections and explain	how they further th	e organization's e	exempt p	ourpose in Parl	XIII.		
5	During the year, did the organization solicit of	r receive donations o	f art, historical treas	sures, or other sim	ilar asse	ets	_		_
	to be sold to raise funds rather than to be ma						Yes		No
Par			te if the organizatio	n answered "Yes"	on Forr	n 990, Part IV,	line 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia						_		-
	on Form 990, Part X?					L	_ Yes		_ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:		Г		A		
					F		Amoun	t	
	Beginning balance					<u>1c</u>			
	Additions during the year					1d			
e	Distributions during the year				·····	<u>1e</u>			
T	Ending balance				L				
	Did the organization include an amount on Fo If "Yes," explain the arrangement in Part XIII.				•	L	Yes		No
Par									
		(a) Current year	(b) Prior year	(c) Two years bac		hree years back	(e) Fou	r vears	back
19	Beginning of year balance	9,417,420.	5,295,898.	5,976,94		6,243,231.		,099,	
h	Contributions	-,	2,500,000.			-,,	-	,,	
c c	Net investment earnings, gains, and losses	34,737.	1,946,850.	-373,09	2.	4,037.		486	817.
b b	Grants or scholarships	,	, , ,	,	-	,		/	
	Other expenditures for facilities								
Ū	and programs	317,031.	325,328.	307,95	2.	270,326.		343,	197.
f	Administrative expenses	,		,					
g	End of year balance	9,135,126.	9,417,420.	5,295,89	8.	5,976,942.	6	,243,	231.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)) held as:			•		
а	Board designated or quasi-endowment	.0000	%	,					
	Permanent endowment > 82.1600	%	_						
с	Term endowment ▶17.8400	%							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held ar	d administered fo	r the org	ganization			
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				. 3b		
4	Describe in Part XIII the intended uses of the	2	vment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered			í	,				
	Description of property	(a) Cost or ot			c) Accur		(d) Boo	k valu	е
		basis (investm	,	(other)	deprec	ation			01
	Land			7,801.				7,8	01.
	Buildings				E (201		6 0	75
	Leasehold improvements			5,566.),291.		$\frac{6}{6}, \frac{2}{6}$	
	Equipment		5,18	<u>3,268.</u> 5	,000	5,588.	/	6,6	00.
-	Other						1 0	0,7	56
<u>i ota</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	(<u>, column (B), line 1</u>	<u>()c.)</u>					
						Schedul	e D (Forr	u aan)	2021

Part VII	Investments -	Other Secu	rities	
Schedule D	(Form 990) 2021	TROUT	UNLIMITED,	TNC

Complete if the organization answered "Yes" o		-	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			<u> </u>
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	an Farma 000 Dart IV line	11d Cas Form 000 Bart V line 15	
Complete if the organization answered "Yes" of		TTd. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.		>	
Complete if the organization answered "Yes" of	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) REFUNDABLE ADVANCES - FEDE	RAL		
(3) GRANTS			47,350.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(9)			47,350.

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 ... X

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 TROUT UNLIMITED, INC.			38-	1612715 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts Wit	h Revenue per Re	turn.	
	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	74,634,173.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-559,887.		
b	Donated services and use of facilities	2b	41,325.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	1,618,256.		
е	Add lines 2a through 2d			2e	1,099,694. 73,534,479.
3	Subtract line 2e from line 1			3	73,534,479.
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	55,378.		
b	Other (Describe in Part XIII.)	4b			
с	c Add lines 4a and 4b				55,378.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	73,589,857.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		th Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			-	
1	Total expenses and losses per audited financial statements			1	63,808,993.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	41,325.	-	
b	Prior year adjustments	2b		-	
С	Other losses	2c		_	
d	Other (Describe in Part XIII.)	2d	1,618,256.		
е	Add lines 2a through 2d			2e	1,659,581.
3	Subtract line 2e from line 1			3	62,149,412.
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	55,378.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	55,378.
5				5	62,204,790.
Pa	t XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART II, LINE 5:

ANNUALLY, A TU REPRESENTATIVE VISITS THE PROPERTY AND SPEAKS WITH THE
LANDOWNER TO REVIEW THE PROPERTY AND IDENTIFY ANY NEW ACTIVITIES OR
DAMAGES SINCE THE LAST INSPECTION THAT COULD AFFECT THE PROPERTY. THE
REPRESENTATIVE DISCUSSES WITH THE LANDOWNER ANY POTENTIAL OR PLANNED
ACTIVITIES CONCERNING THE LAND INCLUDING, BUT NOT LIMITED TO, THE
TRANSFER OF THE LAND, AGRICULTURAL ACTIVITIES, TIMBER HARVESTING, WATER
DEVELOPMENT, ROAD CONSTRUCTION, AND COMMERCIAL ACTIVITIES.

PART II, LINE 9:

CONSERVATION EASEMENTS ARE NOT REPORTED IN THE REVENUE, EXPENSE OR BALANCE

33

SHEET OF TU.

PART V, LINE 4:

CCF ENDOWMENT: THE FUND WAS DEVELOPED TO SUPPORT THE SCIENTIFIC RESOURCE WORK OF TU AND WAS FUNDED THROUGH THE RUSSELL MEMORIAL FUND (\$569,375) AND OTHER INDIVIDUAL CONTRIBUTIONS. UP TO 15% OF THE ORIGINAL CONTRIBUTION REVENUE WAS ALLOCATED TO BE SPENT ON OVERHEAD AND ADMINISTRATIVE COSTS ASSOCIATED WITH THE COLDWATER CONSERVATION FUND PROGRAM. THE REMAINING PORTION OF THE OVERHEAD AND ADMINISTRATIVE ALLOCATION WAS SPENT IN FISCAL YEAR 2016. A PORTION OF THE CURRENT INVESTMENT INCOME FROM THE ENDOWMENT'S FUNDS ARE TO BE SPENT ANNUALLY, IN ACCORDANCE WITH TU'S SPENDING POLICY. SPENDING RATE OF 4.5% WAS SET FOR THE YEARS ENDED MARCH 31, 2022 AND 2021.

E.T. TELLER ENDOWMENT: THIS FUND WAS ESTABLISHED IN 1995 BY THE TELLER FAMILY. PER REQUEST BY THE DONOR, UP TO 50% OF THE ANNUAL EARNINGS ARE AVAILABLE FOR GENERAL OPERATIONS OF TU. THE OTHER 50% SHOULD BE REINVESTED IN THE FUND.

IDAHO WATER FUND: THIS ENDOWMENT WAS ESTABLISHED IN 2008 WITH GRANT FUNDS FROM THE ISHIYAMA FAMILY FOUNDATION. THE PURPOSE OF THE ENDOWMENT IS TO FUND THE IDAHO WATER PROJECT. A PORTION OF THE FUNDS CAN BE SPENT ANNUALLY, IN ACCORDANCE WITH TU'S SPENDING POLICY. FUNDS IN THE AMOUNT OF \$34,344 AND \$38,859 WERE SPENT DURING THE YEARS ENDING MARCH 31, 2022 AND 2021, RESPECTIVELY.

TALCOTT ENDOWMENT: THE TALCOTT ENDOWMENT WAS ESTABLISHED IN 2021 WITH A BEQUEST IN THE AMOUNT OF \$2,500,000 FROM THAYER TALCOTT, JR. THE FUNDS WERE RESTRICTED TO TU'S PERPETUAL ENDOWMENT WITH THE INCOME TO BE USED TO SUPPORT THE GENERAL PURPOSES OF TU. THE FUNDS HAD NOT BEEN RECEIVED AS OF Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 TROUT UNLIMITED, INC.	38-1612715 Page 5
Part XIII Supplemental Information (continued)	
MARCH 31, 2021 AND THE BEQUEST WAS RECORDED AS A RECEIVABLE V	NITHIN THE
ACCOMPANYING STATEMENT OF FINANCIAL POSITION AS OF MARCH 31,	2021. THE
FUNDS WERE SUBSEQUENTLY RECEIVED IN JUNE 2021 AND WERE INVEST	FED IN
ACCORDANCE WITH TU'S INVESTMENT POLICY FOR ENDOWMENTS AND WIT	LL BE SPENT IN
ACCORDANCE WITH TU'S SPENDING POLICY.	
PART X, LINE 2:	
FOR THE YEARS ENDED MARCH 31, 2022 AND 2021, TU DOCUMENTED IS	rs
CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES	S GUIDANCE FOR
REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT	I NO MATERIAL
UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DI	SCLOSURE IN
THE FINANCIAL STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE	
FINANCIAL STATEMENTS AND NETTED AGAINST SALES	
REVENUE ON FORM 990, PART VIII, LINE 10C.	1,618,256.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE	
FINANCIAL STATEMENTS AND NETTED AGAINST SALES	
REVENUE ON FORM 990, PART VIII, LINE 10C.	1,618,256.

Schedule D (Form 990) 2021

SCHEDULE F	Stateme	nt of Act	ivities Outside the Un	ited Sta	tes 🗕	OMB No. 1545-0047
(Form 990)			n answered "Yes" on Form 990, Part I			2021
		J	Attach to Form 990.		·	Dpen to Public
Department of the Treasury Internal Revenue Service	► Go to	www.irs.gov/Fo	rm990 for instructions and the latest	information.	ì	nspection
Name of the organization	1				Employer id	entification number
TROUT UNLIMIT	TED, INC.				38-1612	2715
		ctivities Out	side the United States. Comple	te if the organ	ization answer	ed "Yes" on
	Part IV, line 14b.					
			ds to substantiate the amount of its gran the selection criteria used to award the			X Yes No
2 For grantmakers. United States.	Describe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance	outside the
3 Activities per Regio	on. (The following Parl	t I, line 3 table ca	an be duplicated if additional space is no	eeded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to		e specific type	investments
		in the region	recipients located in the region)	of service	(s) in the regior	in the region
NORTH AMERICA	0	0	GRANTMAKING			140,000.
2 e Subtotol	0	0				140,000.
3 a Subtotal		0				140,000.
b Total from continuation		0				0.
sheets to Part I						0.
c Totals (add lines 3	۵ ۱	0				140 000

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

Schedule F (Form 990) 2021

132071 12-20-21

TROUT UNLIMITED, INC.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CONSERVATION	70,000.	СНЕСК	0.		
		NORTH AMERICA	CONSERVATION	70,000.	CHECK	0.		
exempt 501(c)(3) orga	nization by the IRS, o	or for which the grantee	ecognized as charities by the f or counsel has provided a sect	ion 501(c)(3) equ	uivalency letter			2
3 Enter total number of	other organizations of	or entities				🕨		0

Schedule F (Form 990) 2021

Page 2

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021 TROUT UNLIMITED, INC.

Part III	Grants and Other Assistance to Individuals Outside the United States.	Complete if the organization answered "Yes" on Form 990.	Part IV. line 16.
			· · · · , · · · - · - ·

Part III can be duplicated if additional space is needed.

Part III can be duplicated if ac	unitional space is needed			I		I	[
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	1	1	1	1	1	1	1

38-1612715

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2021 TROUT UNLIMITED, INC. 38-1612715 Page 5

Part V Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 2:
THE MAJORITY OF THE GRANTS ARE GIVEN OUT TO TU CHAPTERS AND COUNCILS AND
ARE MONITORED BY THE EMBRACE-A-STREAM COMMITTEE FOR COMPLIANCE WITH THEIR
GRANT AGREEMENT. FOR THOSE GRANTS ISSUED TO OUTSIDE ORGANIZATIONS, THOSE
ARE TYPICALLY PART OF A LARGER GRANT AGREEMENT THAT DICTATES THE TERM OF
THE ARRANGEMENTS WITH THE APPROPRIATE TU EMPLOYEE MONITORING COMPLIANCE.
THE TU WOMEN'S FLY FISHING/FILM GRANT SPECIFICALLY FUNDS WOMEN
FILMMAKERS, HELPING THEM TO PRODUCE VIDEO PROJECTS ABOUT WOMEN TAKING
PART IN THE SPORT OF FLY-FISHING FOR TROUT WOMEN ARE NOW AN
UNDER-REPRESENTED DEMOGRAPHIC IN THE SPORT (THE MAJORITY OF TROUT
ANGLERS, AND TU MEMBERS, ARE MALE), AND AS PART OF TU'S DIVERSITY
INITIATIVE, WE ARE FOCUSED ON EXPANDING REACH TO THE FEMALE DEMOGRAPHIC,
AND RECRUITING WOMEN MEMBERS WE MONITORED THE PRODUCTION, ASSISTED IN THE
DISTRIBUTION, AND USE OUR MEDIA PROPERTIES AND CONTACTS TO LEVERAGE
VIEWERSHIP OF THE FINISHED FILMS.

132075 12-20-21

SCHEDULE I (Form 990)	Go	arants and Oth vernments, ar	nd Individual	s in the Ŭni [.]	ted States		OMB No. 1545-0047
	Comple	ete if the organizatio			rt IV, line 21 or 22.		
Department of the Treasury Internal Revenue Service		Go to www.ii	Attach to Fori s.gov/Form990 fo		nation		Open to Public Inspection
Name of the organization			13.gov/1 0111000 10				Employer identification number
TROUT UNL	IMITED, II	NC.					38-1612715
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records		•			•		
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to recipient that received more than S	•			1 0	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
SONOMA RESOURCE CONSERVATION DISTRICT - 1221 FARMERS LN, SUITE F - SANTA ROSA, CA 95405	95-2863255	GOVERNMENT	308,338.	0.			CONSERVATION
REGENTS UC, SAN DIEGO 9500 GILMAN DRIVE #0954 LA JOLLA, CA 92093-0009	95-6006144	501(C)(3)	137,226.	0.			CONSERVATION
NOAA FISHERIES SERVICE 2725 MONTLAKE BLVD EAST SEATTLE, WA 98112		GOVERNMENT	100,000.	0.			CONSERVATION
UTAH STATE UNIVERSITY 5200 OLD MAIN HILL LOGAN, UT 84322-5200	07-2983455	501(C)(3)	99,502.	0.			CONSERVATION
MIANUS 258 PO BOX 475 WILTON, CT 06897	51-0225098	501(C)(3)	97,531.	0.			DONATION
REGENTS UC, DAVIS 1 SHIELDS AVE DAVIS, CA 95616	94-6036494	501(C)(3)	91,331.	0.			CONSERVATION
2 Enter total number of section 501(c)(3) a	nd government ord	anizations listed in th	e line 1 table				▶ 33.
3 Enter total number of other organization	0	,					3.

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Schedule I (Form 990) TROUT UNLIMITED, INC.

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OGDEN CITY CORPORATION							
2549 WASHINGTON BLVD, SUITE 240							
OGDEN, UT 84401	87-6000257	GOVERNMENT	68,481.	0.			CONSERVATION
GOLD RIDGE RESOURCE CONSERVATION							
DISTRICT - 2776 SULLIVAN RD -							
SEBASTOPOL, CA 95472	94-2466509	GOVERNMENT	66,603.	0.			CONSERVATION
CITY OF MISSOULA							
1345 W BROADWAY							
MISSOULA, MT 59802		GOVERNMENT	30,000.	0.			CONSERVATION
CONFEDERATED TRIBES OF THE							
COLVILLE RESERVATION - 21							
COLEVILLE STREET - NESPELEM, WA							
99155	83-3208022	GOVERNMENT	22,645.	0.			CONSERVATION
DINSDALE WATER COMPANY, INC.							
531 E 17TH STREET							
OGDEN, UT 84404	30-1058833	501(C)(12)	22,000.	0.			CONSERVATION
······							
COLORADO DIV. PARKS & WILDLIFE							
6060 BROADWAY							
DENVER, CO 80216	84-0644739	GOVERNMENT	20,000.	Ο.			CONSERVATION
			,				
TANDEM STILLS MOTION, INC.							
8584 FRANKLIN AVE							
LOS ANGELES, CA 90069	45-2453829	N/A	20,000.	0.			COMMUNICATIONS
TOWN OF FLORENCE							
PO BOX 247							
FLORENCE, WI 54121	39-6005891	GOVERNMENT	20,000.	0.			CONSERVATION
GILA TROUT CHAPTER 530							
805 N MATTERHORN ROAD							
PAYSON, AZ 85541	90-0445253	F01/(d)/(2)	12,265.	0.			DONATION

Schedule I (Form 990) TROUT UNLIMITED, INC.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAGELAND COLLABORATIVE							
824 S 400 W SUITE B119							
SALT LAKE CITY, UT 84101	83-0468561	501(C)(3)	10,598.	0.			CONSERVATION
OKLAHOMA 420							
PO BOX 54108							
TULSA, OK 74155	52-1315954	501(C)(3)	10,000.	0.			DONATION
THREE RIVERS 109							
PO BOX 2652							
ISSAQUAH, WA 98027	74-2047393	501(C)(3)	9,900.	0.			EMBRACE-A-STREAM
MASSANUTTEN 171							
PO BOX 801							
HARRISONBURG, VA 22803	51-0208681	501(C)(3)	9,125.	0.			EMBRACE-A-STREAM
MARTSONDORG, VA 22003	51 0200001	501(0/(5/	5,125.	0.			EMDRACE A STREAM
DEERFIELD RIVER WATERSHED 349							
PO BOX 133							
SHELBURNE FALLS, MA 01370	47-4191473	501(C)(3)	9,000.	0.			EMBRACE-A-STREAM
	1, 11, 11, 11, 11, 11, 11, 11, 11, 11,	501(0)(0)	5,000.	••			
VALLEY FORGE 349							
1536 HORSESHOE TRAIL							
CHESTER SPRINGS, PA 19425	23-2827918	501(C)(3)	8,800.	0.			EMBRACE-A-STREAM
,			, ,				
BRODHEADS 289							
267 3RD STREET							
POCONO PINES, PA 18350	23-2440446	501(C)(3)	8,575.	0.			EMBRACE-A-STREAM
BIG BLACKFOOT 544							
PO BOX 100							
DVANDO, MT 59854	52-1765527	501(C)(3)	8,300.	0.			EMBRACE-A-STREAM
JACKSON HOLE 051							
PO BOX 4069							
JACKSON, WY 83001	52-1491981	501(C)(3)	6,750.	0.			EMBRACE-A-STREAM

TROUT UNLIMITED, INC.

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urun.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDY BOAT							
718 RIVERVIEW DRIVE							
IVA, MD 21140		N/A	6,000.	0.			OTHER
OUNTAIN BRIDGE 046							
13 OREGON STREET							
REENVILLE, SC 29605	52-1491937	501(C)(3)	6,000.	0.			EMBRACE-A-STREAM
ASS LAKES AREA ENVIRONMENTAL							
ARTNERSHIP - 6144 N ISLAND VIEW							
ANE - IRONS, MI 49644	85-3580964	501(C)(3)	6,000.	0.			DONATION
· · · · ·							
MMONOOSUC 554							
PO BOX 745							
ITTLETON, NH 03561	52-1765516	501(C)(3)	5,600.	0.			EMBRACE-A-STREAM
EST VIRGINIA COUNCIL							
04 HILLCREST DRIVE							
LKVIEW, WV 25071	91-1928275	501(C)(3)	5,500.	0.			EMBRACE-A-STREAM
DENVER TU CHAPTER 128							
526 WYNKOOP ST, SUITE 320							
DENVER, CO 80202	51-0225099	501(C)(3)	5,500.	0.			EMBRACE-A-STREAM
AINSPRING CONSERVATION TRUST,							
NC 557 EAST MAIN STREET -							
RANKLIN, NC 28734	56-2142199	501(C)(3)	5,499.	0.			CONSERVATION
OME WATERS 586							
44 OLD ROAD							
ROPSEYVILLE, NY 12052	52-1765991	501(C)(3)	5,450.	0.			EMBRACE-A-STREAM

Schedule I (Form 990) 2021

TROUT UNLIMITED, INC.

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.										
PART I, LINE 2:										
THE MAJORITY OF THE GRANTS ARE GIVE	א מוש שר	י איז מעזסיים	יספ אאה כסוו	NCTLS AND						

ARE MONITORED BY THE EMBRACE-A-STREAM COMMITTEE FOR COMPLIANCE WITH THEIR

GRANT AGREEMENT. FOR THOSE GRANTS ISSUED TO OUTSIDE ORGANIZATIONS, THOSE

ARE TYPICALLY PART OF A LARGER GRANT AGREEMENT THAT DICTATES THE TERM OF

THE ARRANGEMENTS WITH THE APPROPRIATE TU EMPLOYEE MONITORING COMPLIANCE.

THE TU WOMEN'S FLY FISHING/FILM GRANT SPECIFICALLY FUNDS WOMEN FILMMAKERS,

HELPING THEM TO PRODUCE VIDEO PROJECTS ABOUT WOMEN TAKING PART IN THE SPORT

OF FLY-FISHING FOR TROUT WOMEN ARE NOW AN UNDER-REPRESENTED DEMOGRAPHIC IN

Schedule I (Form 990) TROUT UNLIMITED, INC. 38-1612715 Pag	je 2
THE SPORT (THE MAJORITY OF TROUT ANGLERS, AND TU MEMBERS, ARE MALE), AND A	S
PART OF TU'S DIVERSITY INITIATIVE, WE ARE FOCUSED ON EXPANDING REACH TO THE	<u>E</u>
FEMALE DEMOGRAPHIC, AND RECRUITING WOMEN MEMBERS WE MONITORED THE	
PRODUCTION, ASSISTED IN THE DISTRIBUTION, AND USE OUR MEDIA PROPERTIES AND	
CONTACTS TO LEVERAGE VIEWERSHIP OF THE FINISHED FILMS.	

Schedule I (Form 990)

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SCHEDULE J Compensation Information			OMB No. 1	545-004	47		
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest		20	n 1		
Compensated Employees			20				
Dene	transit of the Transium	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic	
	tment of the Treasury al Revenue Service		Inspe	ction			
Nan	ne of the organizatio	Employer	identificatio	on nui	mber		
	TROUT UNLIMITED, INC. 38-16						
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a	Check the appropri	ate 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 residen		sidence				
		ation and gross-up payments	S				
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)				
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or					
_	•			<u>1b</u>			
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		<u> </u>	
~	la dia statu dai statu di se						
3		ny, of the following the organization used to establish the compensation of the organization's					
		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Executive Director, but explain in Part III.	SHLO				
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.					
		a committee Written employment contract compensation consultant X Compensation survey or study					
	X Form 990 of o		ommittoo				
			ommittee				
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
-	organization or a re						
а	-	e payment or change-of-control payment?		4a	х		
b		eive payment from a supplemental nonqualified retirement plan?				x	
c	-	eive payment from an equity-based compensation arrangement?				X	
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	,						
	Only section 501()(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n				
	contingent on the r						
а	The organization?			5a		X	
b		ation?				X	
		or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n				
	contingent on the r	et earnings of:					
а	a The organization?					X	
b	Any related organiz	ation?				X	
		or 6b, describe in Part III.					
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
		nes 5 and 6? If "Yes," describe in Part III		7	X	<u> </u>	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ıe				
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			8		X	
9		id the organization also follow the rebuttable presumption procedure described in					
		1 53.4958-6(c)?				<u> </u>	
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schee	dule J (Forn	n 990)	2021	

132111 11-02-21

38-1612715

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 and/or 1099-MISC and/or 1099-NEC compensation			other deferred benefits		(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CHRISTOPHER WOOD	(i)	361,632.	25,000.	0.	27,455.	27,760.	441,847.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOANNE THEURICH	(i)	234,605.	0.	0.	15,885.	29,549.	280,039.	0.
coo	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MATTHEW RENAUD	(i)	199,579.	0.	13,927.	15,514.	29,645.	258,665.	0.
CFO (UNTIL 12/3/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) STEVEN MOYER	(i)	168,923.	0.	0.	12,105.	20,505.	201,533.	0.
VP GOVERNMENT AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JULISA EDWARDS	(i)	182,360.	0.	0.	6,693.	367.	189,420.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KEITH CURLEY	(i)	134,747.	0.	0.	9,576.	27,255.	171,578.	0.
VP EASTERN CONSERVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ROBERT MASONIS	(i)	140,900.	0.	550.	9,828.	9,108.	160,386.	0.
VP WESTERN CONSERVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ELIZABETH SNYDER	(i)	127,211.	0.	15,192.	8,700.	8,692.	159,795.	0.
SR DIRECTOR, IT (UNTIL 9/24/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ELIZABETH MACLIN	(i)	7,040.	0.	103,724.	2,092.	2,529.	115,385.	0.
FORMER EXECUTIVE VP (END 1/4/2021)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4A:

ELIZABETH MACLIN RECEIVED SEVERANCE OF \$81,353.

PART I, LINE 7:

CHRISTOPHER WOOD RECEIVED BONUS COMPENSATION OF \$25,000.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

Name of the organization	Employer identification number			
TROUT UNLIMI	TED, II	NC.		38-1612715
Part I Types of Property				
	(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of determining

		applicable	contributions or items contributed	amounts repo		noncash contribu	ution ar	nount	S
4	Art Works of art		Items contributed	10111330,1 211 V	iii, iiile rg				
1 2	Art - Works of art								
_	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property		20	1 0 0 0	462				
9	Securities - Publicly traded	X	36	1,066	,463.	F.WA			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► ()								
26	Other ► ()								
27	Other ► ()								
28	Other ()								
29	Number of Forms 8283 received by the organi	zation during	g the tax year for co	ontributions					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement	29			0	
								Yes	No
30a	During the year, did the organization receive b	y contributio	n any property rep	orted in Part I, line	es 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't requir	ed to be us	ed for			
	exempt purposes for the entire holding period	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	policy that re	quires the review o	of any nonstandar	d contribut	ions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sel	l noncash				
	contributions?						32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which columr	n (a) is cheo	ked,			
	describe in Part II.				-				
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990).		Schedule N	/ (Forn	n 990)	2021

132141 11-17-21

	1 (Form 990)			UNLIMI		INC.
Part II	Suppler	nental	Informat	ion. Provide	the info	rmation r

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THIS COLUMN REPORTS THE NUMBER OF STOCK DONATIONS.

Schedule M (Form 990) 2021

38-1612715

Page **2**

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SCHEDULE O (Form 990)



38-1612715

TROUT UNLIMITED, INC.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

HABITAT, RECONNECTED 1.8 MILES OF COLDWATER HABITAT, PLANTED 1,150

TREES, AND ENGAGED OVER 200 VOLUNTEERS. IN THE NEXT TWO YEARS, WE WILL

RESTORE ANOTHER 2 MILES OF STREAM, RECONNECTING 5.5 MILES, AND PLANTING

AT LEAST 1,000 MORE TREES IN RIPARIAN AREAS IN THE BATTENKILL

WATERSHED.

IN THE MID-ATLANTIC REGION, TU IS WORKING TO PROTECT TROUT HABITAT THROUGH UPGRADED STREAM DESIGNATIONS THAT BRING MORE RIGOROUS PERMITTING STANDARDS. IN PENNSYLVANIA, TU HAS BEEN WORKING FOR A DECADE TO SURVEY STREAMS, IDENTIFY WILD TROUT POPULATIONS, AND SUPPORT THEIR FORMAL LISTING, RESULTING IN MORE THAN 7,000 MILES OF NEWLY-IDENTIFIED AND LISTED TROUT WATERS. A SUBSET OF THOSE WATERS RECEIVE THE HIGHEST LEVELS OF PROTECTIONS AS "CLASS A, HIGH QUALITY" WATERS. PENNSYLVANIA RECENTLY ISSUED A RULEMAKING FOR 75 MILES OF THESE NEW, HIGH-LEVEL PROTECTIONS. IN NEW JERSEY, 600 MILES OF STREAMS WERE NEWLY UPGRADED TO A HIGHER "C-1" STATUS, AND IN THE COMING YEAR WE WILL BE PURSUING STREAM UPGRADES TO INCREASE PROTECTIONS FOR TROUT WATERS IN NEW YORK.

IN MARYLAND, WEST VIRGINIA, AND VIRGINIA MUCH OF OUR FOCUS HAS BEEN ON SECURING AND ENHANCING BROOK TROUT STRONGHOLDS IN THE POTOMAC AND JAMES RIVER BASINS. ONE OF OUR LONGEST-RUNNING BROOK TROUT RESTORATION INITIATIVES IN THE POTOMAC HEADWATERS CONTINUED TO BUILD ON 10 YEARS OF WORK ON BOTH NATIONAL FORESTS AND 400 PRIVATE FARMS. OUR MONITORING IS SHOWING INCREASES IN BROOK TROUT POPULATIONS, INCLUDING THE PRESENCE OF BROOKIES OVER 15". IN VIRGINIA WE ARE DRAMATICALLY INCREASING THE SCALE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021 192211 11-11-21

Schedule O (Form 990) 2021	Page 2						
Name of the organization TROUT UNLIMITED, INC.	Employer identification number 38-1612715						
OF OUR RESTORATION WORK THROUGH A NEW \$2.9 MILLION AGREEMENT WITH THE							
NATURAL RESOURCES CONSERVATION SERVICE, COMPLEMENTED BY \$750,000 FROM							
THE VIRGINIA ENVIRONMENTAL ENDOWMENT AND \$1 MILLION FROM THE NATIONAL							
FISH AND WILDLIFE FOUNDATION. THESE GRANTS WILL ENABLE US TO RESTORE 5							
MILES OF STREAM, ESTABLISH 40 ACRES OF RIPARIAN BUFFERS, INSTALL 20							
MILES OF EXCLUSION FENCING, AND STABILIZE 10 MILES OF ERODING							
STREAMBANKS.							

THE DRIFTLESS AREA PROGRAM CONTINUED ITS MARCH THROUGH THE REGION'S 6,000 MILES OF SPRING CREEKS WITH ANOTHER 20 MILES OF RESTORATION IN 2021. FINALLY, IN THE GREAT LAKES BASIN, TU CONTINUED PROJECTS IN THE WHITE, MUSKEGON, MANISTEE, ROGUE, PERE MARQUETTE, AND ONTONAGON RIVERS OF MICHIGAN AND THE PESHTIGO AND OCONTO RIVERS OF WISCONSIN. TU HAS RECONNECTED HUNDREDS OF MILES OF HABITAT IN THESE WATERSHEDS IN RECENT YEARS AND ENHANCED INSTREAM HABITAT THROUGH WOOD ADDITIONS.

IN OREGON, A HISTORIC AGREEMENT WAS REACHED TO REFORM STATE FOREST
PRACTICES RULES FOR THE MORE THAN 10 MILLION ACRES OF PRIVATE TIMBER
LANDS IN THE STATE. TU WAS A LEAD NEGOTIATOR IN THIS PROCESS, HELPING
REPRESENT A COALITION OF 13 CONSERVATION GROUPS IN COLLABORATION WITH
SEVERAL TIMBER COMPANIES AND REPRESENTATIVES FOR SMALL WOODLAND OWNERS.
THE AGREEMENT WILL IMPROVE THE HEALTH AND CLIMATE RESILIENCE OF AQUATIC
ECOSYSTEMS BY ESTABLISHING NO-CUT RIPARIAN BUFFERS ON BOTH FISH-BEARING
AND PORTIONS OF NON-FISH-BEARING PERENNIAL STREAMS, STRENGTHEN ROAD
CONSTRUCTION AND STREAM CROSSING RULES TO PROTECT WATER QUALITY AND
FISH PASSAGE, INCREASE PROTECTION OF STEEP SLOPES TO REDUCE THE
LANDSLIDES, AND HELP RESTORE BEAVER ON THE LANDSCAPE.

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Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
TROUT UNLIMITED, INC.	38-1612715
TU PLAYED A MAJOR ROLE IN GETTING A FIVEFOLD INCREASE IN H	IABITAT
RESTORATION FUNDING IN NEW MEXICO. AFTER A MULTI-YEAR CAMP	AIGN, THE
STATE LEGISLATURE APPROPRIATED \$10 MILLION TO THE STATE'S	PROGRAM
DEDICATED TO RESTORING RIVER HABITAT, A BIG JUMP FROM THE	\$1.5 MILLION
IN ANNUAL FUNDING THE PROGRAM HAD RECEIVED. ALSO, GOVERNOR	
LUJAN-GRISHAM JUST ANNOUNCED SUPPORT FOR PUTTING CONSERVAT	ION FUNDING
ON A STATEWIDE BALLOT FOR THE FIRST TIME IN NEW MEXICO'S H	IISTORY. THIS
INCLUDES A \$50 MILLION BOND THAT WOULD GO TO EXISTING CONS	ERVATION,
RESTORATION, AND OUTDOOR RECREATION PROGRAMS. TU ADVOCATED	FOR THE
GOVERNOR TO PURSUE THE BOND.	
TU LED DOZENS OF FISH AND WILDLIFE GROUPS AND MAJOR OUTDOO	R RECREATION
COMPANIES IN CALLING ON THE BIDEN ADMINISTRATION TO DEVELO	PA
COMPREHENSIVE SOLUTION TO RECOVER SNAKE RIVER SALMON AND S	TEELHEAD,
THAT INCLUDES REMOVAL OF FOUR DAMS ON THE LOWER SNAKE RIVE	R. A MONTH
LATER THE BIDEN ADMINISTRATION AGREED TO STAY A LAWSUIT BE	TWEEN THE NEZ

PERCE TRIBE, THE STATE OF OREGON, AND A GROUP OF FISHING AND CONSERVATION GROUPS CHALLENGING FEDERAL DAM OPERATIONS ON THE SNAKE. IN THE STAY AGREEMENT THE ADMINISTRATION PLEDGED TO DEVELOP A LONG-TERM COMPREHENSIVE SOLUTION.

FOR THE PAST DECADE TU HAS WORKED IN WYOMING WITH RANCHERS, IRRIGATION DISTRICTS, AND STATE AND FEDERAL AGENCIES TO IMPROVE CONNECTIVITY AND STREAMFLOW THROUGHOUT THE GREYBULL RIVER WATERSHED (BIGHORN BASIN). TU STAFF PUT IN THE TIME AND EFFORT TO BUILD A STRONG RELATIONSHIP WITH THE GREYBULL VALLEY IRRIGATION DISTRICT (GVID) OVER MANY YEARS, WHICH LED TO AN AGREEMENT TO PUT IN A FISH LADDER AT A GVID DIVERSION DAM AND RESTORE PASSAGE TO 100 MILES OF HABITAT THAT HAD BEEN BLOCKED FOR OVER Schedule O (Form 990) 2021 132212 11-11-21 54

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Schedule O (Form 990) 2021	Page 2					
Name of the organization TROUT UNLIMITED, INC.	Employer identification number 38-1612715					
50 YEARS! TU STAFF AND CONTRACTORS WERE ON-SITE AND PROJEC	Т					
CONSTRUCTION WAS COMPLETED SO NOW THE GREYBULL RIVER AND ITS MAJOR						
TRIBUTARIES LIKE THE WOOD ARE BARRIER FREE. WE COMPLETED T	WO CRITICAL					
FISH PASSAGE PROJECTS IN THE CARMEL RIVER WATERSHED TO HEL	P NATIVE					
STEELHEAD. OUR PROJECT ON CACHAGUA CREEK, A STRONG PARTNER	SHIP WITH THE					
ESSELEN TRIBE OF MONTEREY COUNTY, PROVIDED PASSAGE AT ALL	FLOWS FOR					
STEELHEAD, AND DRAMATICALLY IMPROVED ACCESS AND SAFETY FOR	RESIDENTS OF					
A LOW-INCOME COMMUNITY. OUR NORTH COAST SALMON AND STEELHE	AD					
RESTORATION PROGRAM COMPLETED NINE PROJECTS IMPROVING 17 M	ILES OF					
STREAMS BY ENHANCING FISH PASSAGE, HABITAT, AND WATER QUALITY FOR COHO						
AND STEELHEAD. OUR LAWRENCE CREEK PROJECT IN THE EEL RIVER WATERSHED						
WAS NAMED ONE OF THE WATERS TO WATCH FOR 2021 BY THE NATIONAL FISH						
HABITAT PARTNERSHIP.						

IN A MUCH DRIER PART OF CALIFORNIA, TU HAS LAUNCHED "REORIENTING TOWARDS RECOVERY, " AN UNPRECEDENTED THREE-YEAR COLLABORATION BETWEEN NGOS AND STATE WATER CONTRACTORS THAT BRINGS TOGETHER WATER MANAGERS, AGENCIES, TRIBES, FISHING INTERESTS, AND OTHER STAKEHOLDERS IN THE CENTRAL VALLEY. THE OBJECTIVE IS TO FIND CONSENSUS ON A SUITE OF ACTIONS TO ADVANCE CENTRAL VALLEY SALMON AND STEELHEAD RECOVERY IN A MANNER THAT EQUITABLY BALANCES DIVERSE VALUES. SEVERAL WORKSHOPS WERE HELD IN 2021, AND IN JANUARY THE OUTREACH, ENGAGEMENT AND STRUCTURED DECISION-MAKING WORK COMMENCED WITH FUNDING FROM THE DELTA SCIENCE PROGRAM. THIS IS AN EXAMPLE OF TU PUTTING INTO ACTION ITS COMMITMENT TO DIVERSITY, EQUITY AND INCLUSION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

INTERESTS OF THESE LOCALLY ENGAGED MEMBER AND NON-MEMBER SUPPORTERS. Schedule O (Form 990) 2021 132212 11-11-21 55 2021.05050 TROUT UNLIMITED, INC. 33959__1

BEYOND THE OBVIOUS IMPACTS ON COMMUNITY ENGAGEMENT AND STREAM HEALTH, WE'VE ALSO BEEN WORKING WITH THE TU SCIENCE STAFF AND PARTNERS AT THE U.S. FOREST SERVICE ON A PROGRAM TO TRACK OUR TREE PLANTING ACTIVITY AND MEASURE THE CARBON SEQUESTRATION POWER OF THE TENS-OF THOUSANDS OF TREES WE PLANT EACH YEAR. THROUGH THIS CAMPAIGN WE WILL CALCULATE JUST HOW MUCH CO2 THAT TU IS TAKING OUT OF THE ATMOSPHERE WITH THESE TREE PLANTINGS AND DEMONSTRATE FOR THE FIRST TIME THAT OUR EFFORTS NOT ONLY BUILD CLIMATE CHANGE RESILIENCY BUT ARE A POWERFUL WAY TO REDUCE THE PACE OF GLOBAL WARMING.

THE KERRI RUSSELL EQUITY FUND HONORS FORMER TU TRUSTEE, KERRI RUSSELL'S LEGACY, INCLUDING HER DECADE-LONG COMMITMENT TO BOLSTER DIVERSITY, EQUITY AND INCLUSION (DEI) WORK AT TU. WE ARE MOVING FORWARD WITH NEW INVESTMENTS. TU IS ALSO ACTIVELY WORKING TO SUPPORT THE TRANSLATION OF MULTIPLE TU MATERIALS INTO SPANISH. UP FIRST A TRANSLATION OF TU'S STREAM GIRLS AND STREAM KEEPERS CURRICULUM.

FINALLY, TU HAS INITIATED A MINI-GRANTS PROGRAM TO PROVIDE FUNDING DIRECTLY TO CHAPTERS/ COUNCILS TO SUPPORT A RANGE OF ACTIVITIES DESIGNED TO MAKE TU CHAPTERS AND COUNCILS MORE INCLUSIVE AND EQUITABLE. A BROAD ARRAY OF ACTIVITIES WILL BE CONSIDERED ELIGIBLE FOR SUPPORT; HOWEVER, CHAPTERS AND COUNCILS WILL ONLY BE ELIGIBLE FOR FUNDING IF THEY DEMONSTRATE PAST ENGAGEMENT IN DEI TRAINING FOR THE BOARD, OR THEY COMPLETE TU'S DIVERSITY AND INCLUSION BASIC TRAINING. THE GRANTS REVIEW COMMITTEE MADE THEIR FIRST GRANT TO THE CAPE COD CHAPTER THAT WILL USE THE FUNDS TO DELIVER A ROBUST WOMEN'S ENGAGEMENT PROGRAM. ADDITIONALLY, DURING BLACK HISTORY MONTH, SIMMS WILL FEATURE THE RUSSELL FUND IN Schedule O (Form 990) 2021 132212 11-11-21 56

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Schedule O (Form 990) 2021 Page 2								
Name of the organization	Employer identification number							
TROUT UNLIMITED, INC.	38-1612715							
THEIR SOCIAL FEEDS BOTH A CELEBRATION OF THE OPPORTUNITY	AHEAD AND A							

CALL TO CONTRIBUTE TO THE FUND.

TU'S HEADWATERS YOUTH EDUCATION BOARD PROVIDES ADVICE, INSIGHT AND

FUNDING FOR TU'S YOUTH EDUCATION PROGRAMMING. OVER THE PAST DECADE, THE

BOARD HAS CONTRIBUTED NEARLY ONE MILLION DOLLARS TOWARDS TU YOUTH

EDUCATION PROGRAMMING.

FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:

IN THE GREAT LAKES BASIN OF NORTHEAST WISCONSIN, TU IS RECONNECTING

HABITAT TO SUPPORT MIGRATORY BROOK TROUT IN THE PESHTIGO RIVER

WATERSHED. WE HAVE NOW RECONNECTED MORE THAN 70 MILES OF HABITAT SO

THAT FISH CAN MOVE BETWEEN THE MAINSTEM PESHTIGO AND ITS TRIBUTARIES.

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

COMMUNICATIONS:

MUCH OF TU'S COMMUNICATIONS WORK INVOLVES ESTABLISHING A STRONGER

ORGANIZATIONAL FOUNDATION FOR FUTURE TU ENGAGEMENT EFFORTS TO GROW

FROM. THIS INCLUDES:

- BUILDING A TRUE SENSE OF "TEAM" AMONG MARKETING AND COMMUNICATIONS

STAFFERS, SO THEY CAN BETTER SUPPORT EACH OTHER AND THE ORGANIZATION;

- IMPROVING OUR EXISTING MEMBER RENEWAL AND APPEAL PROCESS, TO PROVIDE

GREATER MEMBER SATISFACTION;

- IDENTIFYING THE NEEDS FOR A STRONGER TU DATABASE, SO WE CAN PROVIDE

BETTER MEMBER SERVICE AND BETTER PROSPECTIVE MEMBER/SUPPORTER OUTREACH;

- REASSESSING TU'S EXTERNAL MARKETING PARTNER RELATIONSHIPS, TO ENSURE

WE'RE GETTING THE BEST SERVICE AND VALUE FOR OUR INVESTMENTS; AND
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Schedule O (Form 990) 2021
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Name of the organization Employer identification number 38-1612715 - CREATING A PLAN FOR REPOSITIONING THE TU BRAND SO WE CAN BETTER INVITE NEW AUDIENCES INTO OUR ORGANIZATION. TIMING FOR IMPLEMENTATION OF THIS PLAN WILL ALLOW US TO INTRODUCE A NEW TU BRAND.	Schedule O (Form 990) 2021	Page 2
INVITE NEW AUDIENCES INTO OUR ORGANIZATION. TIMING FOR IMPLEMENTATION	5	
	- CREATING A PLAN FOR REPOSITIONING THE TU BRAND SO WE CAN	BETTER
OF THIS PLAN WILL ALLOW US TO INTRODUCE A NEW TU BRAND.	INVITE NEW AUDIENCES INTO OUR ORGANIZATION. TIMING FOR IMPI	LEMENTATION
	OF THIS PLAN WILL ALLOW US TO INTRODUCE A NEW TU BRAND.	
EXPENSES \$ 2,108,987. INCLUDING GRANTS OF \$ 0. REVENUE \$ 250,140.	EXPENSES \$ 2,108,987. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 250,140.

GOVERNMENT AFFAIRS:

TU'S TREMENDOUS STAFF EXPERTISE ON PRIORITY CONSERVATION ISSUES HAS NEVER BEEN PUT ON DISPLAY AS MUCH AS 2021, AND THE PAYOFF HAS BEEN SUBSTANTIAL. CHRIS WOOD AND OTHER TU STAFF WERE CALLED TO TESTIFY BEFORE CONGRESS A TOTAL OF SIX TIMES IN 2021. TU ACHIEVED SUBSTANTIAL VICTORIES ON ENACTMENT OF THE INFRASTRUCTURE INVESTMENT AND JOBS ACT (IIJA), ON RESTORING CLEAN WATER ACT PROTECTIONS OF HEADWATER STREAMS, BRISTOL BAY PROTECTION, AND PROTECTION OF ROADLESS AREAS ON THE TONGASS NATIONAL FOREST.

FOLLOWING YEARS OF DEDICATED EFFORT BY TU STAFF AND VOLUNTEERS AND OUR CONSERVATION PARTNERS, CONGRESS PASSED AND THE PRESIDENT SIGNED INTO LAW THE INFRASTRUCTURE INVESTMENT AND JOBS ACT (IIJA), REPRESENTING A ONCE-IN-A-GENERATION, \$1.2 TRILLION INVESTMENT TO ADDRESS AMERICA'S VAST INFRASTRUCTURE NEEDS, PROTECT AND RESTORE WATERSHED RESILIENCE IN THE FACE OF CLIMATE CHANGE, AND SUPPORT THE NATION'S GREEN ENERGY FUTURE.

TU WORKED DILIGENTLY ON A BIPARTISAN BASIS TO SECURE SIGNIFICANT PROVISIONS IN THE BILL THAT SUPPORT OUR MISSION INCLUDING ABANDONED MINE RESTORATION, REMOVAL OF OBSOLETE DAMS, FOREST AND WATERSHED RESTORATION ON OUR PUBLIC LANDS, REPLACEMENT OF OLD CULVERTS AND FISH PASSAGE BARRIERS, AND INCREASED EFFICIENCY OF WATER MANAGEMENT AND Schedule O (Form 990) 2021 132212 11-11-21 58 2021.05050 TROUT UNLIMITED, INC.

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	Encoder and interaction and the set
Name of the organization	Employer identification number
TROUT UNLIMITED, INC.	38-1612715
TRANSPORT SYSTEMS. THE NEW LAW PROVIDES THE OPPORTUNITY T	O MAKE
INVESTMENTS IN TROUT AND SALMON PROTECTION, RECONNECTION,	AND
RESTORATION PROJECTS IN VIRTUALLY EVERY CORNER OF THE NAT	ION'S SALMONID
HABITATS.	

TU AND OUR CONSERVATION ALLIES INVESTED A GREAT AMOUNT OF EFFORT INTO THE BUILD BACK BETTER LEGISLATION, AND WE WERE DISAPPOINTED BY ITS FAILURE TO MOVE FORWARD IN THE SENATE. THE LEGISLATION THAT HAS BEEN REVEALED SO FAR WOULD PROVIDE MAJOR INVESTMENT IN PUBLIC LANDS WATERSHED RESTORATION, WILDFIRE AND DROUGHT RESPONSE, TRANSFORMATIONAL FUNDING IN FARM BILL CONSERVATION, AND A TRANSITION TO A CLEANER ENERGY ECONOMY.

SUPPORTED BY TU SCIENCE TEAM RESEARCH WHICH DEMONSTRATED THE RISK OF
SUBSTANTIAL LOSS OF HEADWATER STREAMS TO DEVELOPMENT ACTIVITIES, A
FEDERAL DISTRICT COURT IN ARIZONA VACATED THE ILL-CONCEIVED CLEAN WATER
RULE ESTABLISHED IN 2020, AND REINSTATED MUCH BETTER LONGSTANDING RULE
ESTABLISHED BY THE EPA IN 1986. EPA HAS NOW OPENED A PUBLIC COMMENT
PERIOD TO PROMULGATE THE RULE, AND TU IS WEIGHING IN HEAVILY IN SUPPORT
OF IT. THE NEW EPA RULE WILL HELP PROTECT SMALL EPHEMERAL STREAMS,
WHICH CONSTITUTE MORE THAN HALF OF THE NATION'S STREAM MILES.
EXPENSES \$ 666,510. INCLUDING GRANTS OF \$ 8,986. REVENUE \$ 79,052.

FORM 990, PART VI, SECTION A, LINE 4: IN NOVEMBER 2021, THE ARTICLES OF INCORPORATION WERE UPDATED TO REFLECT A CHANGE IN THE ORGANIZATION'S NAME FROM "TROUT, UNLIMITED" TO "TROUT UNLIMITED, INC."

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TROUT UNLIMITED, INC.

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

TU HAS 8 CLASSES OF MEMBERSHIP: REGULAR, FAMILY, TEEN, YOUTH, LIFE, GIFT,

GRIFFITH CIRCLE, AND BUSINESS.

SOMEONE BECOMES A MEMBER OF TU BY PAYING AT LEAST THE REGULAR ANNUAL

MEMBERSHIP PRICE, WHICH GIVES THEM ONE VOTE AT THE ANNUAL MEETING.

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

THE NOMINATING COMMITTEE OF THE BOARD PRESENTS THE SLATE OF BOARD MEMBERS AT THE ANNUAL MEETING OF TU FOR APPROVAL BY THE MEMBERSHIP. ANY MEMBER IN GOOD STANDING THAT IS PRESENT OR WHO HAS SUBMITTED A PROXY IN ADVANCE OF THE MEETING IS ALLOWED TO VOTE ON THE SLATE.

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

THE MEMBERSHIP ONLY APPROVES THE SLATE OF BOARD MEMBERS AND CHANGES TO THE BYLAWS AS PRESENTED AT THE ANNUAL MEETING.

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE

CFO AND THE CONTROLLER. A COPY OF THE FORM 990 WAS MADE ELECTRONICALLY

AVAILABLE TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS.

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

A COPY OF THE CONFLICT OF INTEREST POLICY AND A QUESTIONNAIRE CONCERNING

BUSINESS RELATIONSHIPS IS SENT TO ALL BOARD MEMBERS EACH FISCAL YEAR. THE

BOARD MEMBERS RETURN THE COMPLETED QUESTIONNAIRE TO THE NOMINATING AND

GOVERNANCE COMMITTEE OF THE BOARD OF TRUSTEES, WHO MONITORS COMPLIANCE WITH

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THE POLICY.

EACH EMPLOYEE HAS A DUTY TO DISCLOSE TO THE CHIEF OPERATING OFFICER THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF TU IN WHICH SUCH PERSON HAS ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST. AN EMPLOYEE HAVING AN ACTUAL OR PROPOSED CONFLICT OF INTEREST SHALL NOT PARTICIPATE IN THE DELIBERATIONS OR DECISION-MAKING PROCESS OF TU REGARDING THE MATTER UNDER CONSIDERATION. HOWEVER, HE OR SHE SHALL PROVIDE TU WITH ANY AND ALL RELEVANT INFORMATION REGARDING THE MATTER. THE CHIEF OPERATING OFFICER SHALL TAKE SUCH ADDITIONAL ACTION AS MAY BE REQUIRED TO ENSURE THAT THE CONFLICT OF INTEREST IS RESOLVED, AND SHALL MAINTAIN A RECORD OF THE EXISTENCE AND RESOLUTION OF THE CONFLICT.

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

THE CHAIRMAN OF THE BOARD APPOINTS A COMPENSATION COMMITTEE THAT CONSISTS OF NON-COMPENSATED BOARD MEMBERS, INCLUDING THE CHAIRMAN. THIS COMMITTEE MEETS AT LEAST ANNUALLY TO REVIEW THE COMPENSATION PACKAGES FOR THE CEO AND OTHER KEY EMPLOYEES, AND COMPARE THE PACKAGES TO THE GENERAL MARKET AND SIMILAR NON-PROFIT ORGANIZATIONS, ALONG WITH THE RESULTS OF AN INDEPENDENT SALARY SURVEY CONDUCTED BY AN EXTERNAL CONSULTANT. THEY ALSO REVIEW THE WORK PLANS AND ACCOMPLISHMENTS AND TAKE INTO CONSIDERATION THE EVALUATIONS OF KEY EMPLOYEES WHEN DETERMINING THE FINAL COMPENSATION. COMPENSATION REVIEWS FOR THE CEO AND OTHER KEY EMPLOYEES ARE DONE ON AN ANNUAL OR FISCAL YEAR BASIS, MOST RECENTLY IN SEPTEMBER 2021.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT VA,WV,WI

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

TU POSTS ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, TAX RETURNS

AND FINANCIAL STATEMENTS ON ITS WEBSITE AND WILL MAKE COPIES OF THE

DOCUMENTS AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET

FORTH IN SECTION 6104(D).

FORM 990, PART VIII, LINE 1E:

ON APRIL 21, 2020, TU RECEIVED LOAN PROCEEDS IN THE AMOUNT OF \$3,337,300 UNDER THE PAYCHECK PROTECTION PROGRAM. THE PROMISSORY NOTE CALLS FOR MONTHLY PRINCIPAL AND INTEREST PAYMENTS AMORTIZED OVER THE TERM OF THE PROMISSORY NOTE WITH A DEFERRAL OF PAYMENTS FOR THE FIRST SIX MONTHS. UNDER THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT (CARES ACT), THE PROMISSORY NOTE MAY BE FORGIVEN BY THE SMALL BUSINESS ADMINISTRATION IN WHOLE OR IN PART. TU USED THE PROCEEDS FOR PURPOSES CONSISTENT WITH THE PAYCHECK PROTECTION PROGRAM. DURING THE YEAR ENDED MARCH 31, 2022 TU APPLIED FOR AND RECEIVED FORGIVENESS OF THE ENTIRE AMOUNT OF THE LOAN PAYABLE AND ACCORDINGLY, TU RECORDED REVENUE FROM DEBT EXTINGUISHMENT DURING THE YEAR ENDED MARCH 31, 2022.

FORM 990, PART IX, LINE 11G, OTHER FEES:PROFESSIONAL CONSULTANTS:PROGRAM SERVICE EXPENSES8,116,713.MANAGEMENT AND GENERAL EXPENSES90,362,185.FUNDRAISING EXPENSES19,365.TOTAL EXPENSES8,498,263.

CONSTRUCTION CONTRACTORS:

Schedule O (Form 990) 2021 Name of the organization TROUT UNLIMITED, INC.	Page Employer identification number 38-1612715
PROGRAM SERVICE EXPENSES	14,733,551.
MANAGEMENT AND GENERAL EXPENSES	81.
FUNDRAISING EXPENSES	18.
TOTAL EXPENSES	14,733,650.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 1	1G, COL A 23,231,913.
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