

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization BOY SCOUTS OF AMERICA
D Employer identification number 91-0569878
E Telephone number 206-725-5200
G Gross receipts \$ 29,483,784.
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
H(c) Group exemption number 1761
I Tax-exempt status: 501(c)(3)
J Website: WWW.SEATTLEBSA.ORG
K Form of organization: Corporation
L Year of formation: 1916
M State of legal domicile: WA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer: SHARON M MOULDS, SCOUT EXECUTIVE/CEO/CORP SECRETARY
Preparer: SARA ELIZABETH J. HYRE
Firm: CLARK NUBER, PS

May the IRS discuss this return with the preparer shown above? Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE COUNCIL'S PRIMARY PURPOSE IS TO ORGANIZE AND SUPERVISE THE SCOUTING PROGRAM. THE SCOUTING PROGRAM PROVIDES EDUCATION FOR YOUTH AND YOUNG ADULTS LED BY TRAINED VOLUNTEERS. THIS IS ACCOMPLISHED THROUGH COMMUNITY SERVICE, CHARACTER BUILDING, CITIZENSHIP TRAINING,

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No 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? [] Yes [X] No 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 \$ 3,132,944. including grants of \$ 141,749.) (Revenue \$ 1,701,486.) BOY SCOUTING IS A FAMILY- AND COMMUNITY-CENTERED PROGRAM FOR BOYS 11 TO 18 YEARS OF AGE. WITH THE SCOUT OATH AND SCOUT LAW AS GUIDES, AND THE SUPPORT OF PARENTS, COMMUNITY AND RELIGIOUS ORGANIZATIONS, THESE YOUTH DEVELOP AN AWARENESS AND APPRECIATION OF THEIR ROLE IN THE COMMUNITY AND BECOME GOOD CITIZENS. THE PROGRAM TEACHES LEADERSHIP AND CHARACTER DEVELOPMENT THROUGH DIFFERENT METHODS, SUCH AS ADVANCEMENT, CAMPING AND TRAINING. THIS PROGRAM SERVED 8,508 YOUTH IN 2013.

4b (Code:) (Expenses \$ 2,494,219. including grants of \$ 117,424.) (Revenue \$ 1,409,499.) CUB SCOUTING IS A FAMILY- AND COMMUNITY-CENTERED PROGRAM FOR BOYS 8 TO 10 YEARS OF AGE. CUB SCOUTS LEARN CITIZENSHIP, COMPASSION, AND COURAGE THROUGH SERVICE PROJECTS, CEREMONIES, GAMES, AND OTHER ACTIVITIES PROMOTING CHARACTER DEVELOPMENT AND PHYSICAL FITNESS. THIS PROGRAM SERVED 12,864 YOUTH IN 2013.

4c (Code:) (Expenses \$ 393,136. including grants of \$ 18,796.) (Revenue \$ 225,608.) VENTURING IS A PROGRAM FOR YOUNG MEN AND WOMEN 14 (OR 13 WITH COMPLETION OF THE EIGHTH GRADE) THROUGH 20 YEARS OF AGE. VENTURING PROVIDES EXPERIENCES TO DEVELOP YOUTH TO BECOME MATURE, RESPONSIBLE, CARING ADULTS. EACH PROGRAM IS SPECIFIC TO THE YOUTH PARTICIPATING. THERE ARE ROBOTIC GROUPS, HIGH ADVENTURE GROUPS, COMPUTER GROUPS, AND SHIPS. THE ONE THING THAT IS CONSISTENT WITH VENTURING IS THAT THE YOUTH RUN THE PROGRAM. THIS PROGRAM SERVED 2,398 YOUTH IN 2013.

4d Other program services (Describe in Schedule O.) (Expenses \$ 66,690. including grants of \$ 3,349.) (Revenue \$ 40,202.)

4e Total program service expenses 6,086,989.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form area containing questions 1a through 14b with columns for Yes/No and numerical input fields.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed WA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SHARON M. MOULDS - 206-725-5200
3120 RAINIER AVENUE SOUTH, SEATTLE, WA 98144

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT MCKENNA EXECUTIVE VICE PRESIDENT	1.00 0.00	X		X				0.	0.	0.
(2) LANCE PETERS VP - FINANCE	1.00 0.00	X		X				0.	0.	0.
(3) TODD ZARFOS VP - PROGRAM	1.00 0.00	X		X				0.	0.	0.
(4) DONALD BLACK VP - DEVELOPMENT	1.50 0.00	X		X				0.	0.	0.
(5) RICHARD CORDRAY VP - VENTURING	1.00 0.00	X		X				0.	0.	0.
(6) KIM HILLYARD VP - DISTRICT OPERATIONS	3.00 0.00	X		X				0.	0.	0.
(7) WILLIAM KRIPPAEHNE, JR VP - ADMINISTRATION	1.00 0.00	X		X				0.	0.	0.
(8) PAUL PINEDA VP - SCOUTREACH	1.00 0.00	X		X				0.	0.	0.
(9) LISA WYLIE VP - MEMBERSHIP	10.00 0.00	X		X				0.	0.	0.
(10) GARY ZIMMERMAN, PHD VP - FACILITIES	1.00 0.00	X		X				0.	0.	0.
(11) BRADLEY TILDEN COUNCIL PRESIDENT	1.00 0.00	X		X				0.	0.	0.
(12) CATHY HYLTON COUNCIL TREASURER	2.00 0.00	X		X				0.	0.	0.
(13) RICHARD GREAVES ASST. COUNCIL TREASURER	1.00 0.00	X		X				0.	0.	0.
(14) BRUCE ANDERSON COUNCIL COMMISSIONER	1.00 0.00	X						0.	0.	0.
(15) KEVIN BAKER EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(16) DEL BISHOP EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(17) BRIAN BOGEN EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TOBY CAPPS EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(19) J SCOTT GARY EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(20) MICHAEL GIBBS EXECUTIVE COMMITTEE	0.50 0.00	X						0.	0.	0.
(21) PATRICK GREEN EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(22) FREDERICK GRIMM EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(23) JOHN HANSEN EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(24) WAYNE PERRY EXECUTIVE COMMITTEE	1.00 0.00	X						0.	0.	0.
(25) TOM PIGOTT EXECUTIVE COMMITTEE	0.50 0.00	X						0.	0.	0.
(26) R MILLER ADAMS EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								578,540.	0.	94,982.
d Total (add lines 1b and 1c)								578,540.	0.	94,982.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
LZL CONSTRUCTION INC, 10604 EAST RIVERSIDE DRIVE, BOTHELL, WA 98011	CONSTRUCTION	934,509.
HICKS CONSTRUCTION INC 15407 100TH AVE NE, BOTHELL, WA 98011	CONSTRUCTION	442,692.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MIKE ANDERSON EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(28) JAMES BACH EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(29) HUGH BANGASSER EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(30) GREG BATIE EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(31) S CHRISTOPHER BEAN EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(32) GUY BENNETT EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(33) PHIL BUSSEY EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(34) DAVE CARLSON EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(35) JOHN CARLSON EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(36) BOB DONEGAN EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(37) LARRY GARRETT EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(38) TIM GARRIGAN EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(39) MARCELO GUERRA HAHN EXECUTIVE BOARD	6.00 0.00	X						0.	0.	0.
(40) LYLE HALL EXECUTIVE BOARD	2.00 0.00	X						0.	0.	0.
(41) BRIAN HARRON EXECUTIVE BOARD	10.00 0.00	X						0.	0.	0.
(42) WILLIAM LARSON EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(43) KENNETH MARTIN EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(44) PETER MCLOUGHLIN EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(45) MIKE MCNELLIS EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(46) JOANNE MONTGOMERY EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) GORDON OLSON EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(48) BOB RATLIFF EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(49) HOWARD RUDELL EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(50) PHILIP SMART, JR EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(51) R GARY SMITH EXECUTIVE BOARD	10.00 0.00	X						0.	0.	0.
(52) GORDON TANNER EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(53) ROBERT WILEY, III EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(54) ROBERT ZOOK EXECUTIVE BOARD	1.00 0.00	X						0.	0.	0.
(55) DAN DICKEY DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(56) JOHN DIETZ DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(57) WALLY KEMPE DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(58) MARK LITTLE DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(59) DAVID MACKOVJAK DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(60) DARCY NIEDERMEYER DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(61) GARY TWITE DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(62) KURT WIEST DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(63) RICH WILKENS DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(64) DOUGLAS WITHERS DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(65) RYAN YEE DIST CHAIRMAN	1.00 0.00	X						0.	0.	0.
(66) SHARON M MOULDS SCOUT EXECUTIVE/CEO/CORP. SECRETARY	60.00 0.00			X				233,411.	0.	32,595.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 298,592.					
	b Membership dues	1b					
	c Fundraising events	1c 252,718.					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 6,354,997.					
	g Noncash contributions included in lines 1a-1f: \$	108,588.					
	h Total. Add lines 1a-1f		6,906,307.				
	Program Service Revenue	2 a CAMPING PROGRAM	Business Code 900099	1,928,526.	1,928,526.		
b NATIONAL JAMBOREE		900099	671,343.	671,343.			
c SCOUTING ACTIVITIES		900099	207,395.	207,395.			
d SCOUTREACH PROGRAMS		900099	2,500.	2,500.			
e							
f All other program service revenue							
g Total. Add lines 2a-2f			2,809,764.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		395,983.			395,983.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	107,177.				
		(ii) Personal	0.				
		b Less: rental expenses	0.				
		c Rental income or (loss)	107,177.				
	d Net rental income or (loss)		107,177.			107,177.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	17,624,482.				
		(ii) Other	6,000.				
		b Less: cost or other basis and sales expenses	16,765,325.	99,055.			
		c Gain or (loss)	859,157.	-93,055.			
	d Net gain or (loss)		766,102.			766,102.	
	8 a Gross income from fundraising events (not including \$ 252,718. of contributions reported on line 1c). See Part IV, line 18	a	94,502.				
		b Less: direct expenses	248,813.				
c Net income or (loss) from fundraising events			-154,311.			-154,311.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	1,493,231.					
	b Less: cost of goods sold	926,200.					
	c Net income or (loss) from sales of inventory		567,031.	567,031.			
Miscellaneous Revenue		Business Code					
11 a TIMBER SALES	900099	44,000.			44,000.		
b REIMBURSEMENTS	900099	1,964.			1,964.		
c BAD DEBT RECOVERY	900099	374.			374.		
d All other revenue							
e Total. Add lines 11a-11d		46,338.					
12 Total revenue. See instructions.		11,444,391.	3,376,795.	0.	1,161,289.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	281,318.	281,318.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	376,847.	198,920.	150,343.	27,584.
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	2,301,921.	1,827,863.	277,927.	196,131.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	168,433.	124,397.	25,929.	18,107.
9 Other employee benefits	293,155.	229,754.	37,332.	26,069.
10 Payroll taxes	244,425.	199,460.	26,476.	18,489.
11 Fees for services (non-employees):				
a Management				
b Legal	6,562.		6,562.	
c Accounting	47,175.		47,175.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	79,404.			79,404.
f Investment management fees	86,382.		86,382.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	11,308.	4,368.	4,595.	2,345.
12 Advertising and promotion	6,321.	4,727.	939.	655.
13 Office expenses	952,269.	838,154.	78,588.	35,527.
14 Information technology	19,203.		18,431.	772.
15 Royalties				
16 Occupancy	370,858.	330,633.	23,362.	16,863.
17 Travel	722,834.	676,783.	25,995.	20,056.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	242,925.	231,667.	6,629.	4,629.
20 Interest	23,147.	23,147.		
21 Payments to affiliates	80,614.	80,614.		
22 Depreciation, depletion, and amortization	706,775.	669,426.	21,992.	15,357.
23 Insurance	157,242.	139,605.	10,385.	7,252.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RECOGNITION AWARDS	184,541.	120,577.	4,574.	59,390.
b MEMBERSHIP / ADVANCEMENT	78,839.	78,839.		
c				
d				
e All other expenses	30,387.	26,737.	2,174.	1,476.
25 Total functional expenses. Add lines 1 through 24e	7,472,885.	6,086,989.	855,790.	530,106.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	647,728.	1	1,533,684.	
	2 Savings and temporary cash investments	2,566,757.	2	6,085,905.	
	3 Pledges and grants receivable, net	497,358.	3	2,943,491.	
	4 Accounts receivable, net	79,073.	4	48,721.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	42,000.	5	28,000.	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use	101,876.	8	143,140.	
	9 Prepaid expenses and deferred charges	310,319.	9	105,292.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,161,989.			
	b Less: accumulated depreciation	10b 8,389,963.	9,776,347.	10c	10,772,026.
	11 Investments - publicly traded securities	19,502,426.	11	16,758,475.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	562,123.	15	581,276.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	34,086,007.	16	39,000,010.		
Liabilities	17 Accounts payable and accrued expenses	381,666.	17	241,930.	
	18 Grants payable		18		
	19 Deferred revenue	404,827.	19	206,891.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	385,224.	21	444,621.	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	1,171,717.	26	893,442.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	20,507,491.	27	22,755,942.	
	28 Temporarily restricted net assets	7,303,971.	28	9,865,422.	
	29 Permanently restricted net assets	5,102,828.	29	5,485,204.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	32,914,290.	33	38,106,568.	
34 Total liabilities and net assets/fund balances	34,086,007.	34	39,000,010.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,444,391.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,472,885.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,971,506.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32,914,290.
5	Net unrealized gains (losses) on investments	5	1,292,013.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-71,241.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	38,106,568.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,204,525.	3,431,214.	8,023,395.	3,655,565.	6,906,307.	27,221,006.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	5,204,525.	3,431,214.	8,023,395.	3,655,565.	6,906,307.	27,221,006.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,800,013.
6 Public support. Subtract line 5 from line 4.						24,420,993.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	5,204,525.	3,431,214.	8,023,395.	3,655,565.	6,906,307.	27,221,006.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	552,406.	580,218.	639,517.	846,972.	503,160.	3,122,273.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	5,510.	1,044.	13,753.	5,943.	46,338.	72,588.
11 Total support. Add lines 7 through 10						30,415,867.
12 Gross receipts from related activities, etc. (see instructions)					12	19,199,083.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	80.29 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	83.16 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2012. 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	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

BOY'S LIFE AWARD

2009 AMOUNT: \$ 5,510.

INSURANCE SETTLEMENT

2010 AMOUNT: \$ 1,044.

TIMBER SALES

2011 AMOUNT: \$ 13,753.

2012 AMOUNT: \$ 4,055.

2013 AMOUNT: \$ 44,000.

REIMBURSEMENTS

2013 AMOUNT: \$ 1,964.

BAD DEBT RECOVERY

2012 AMOUNT: \$ 1,888.

2013 AMOUNT: \$ 374.

Draft 10.8.14

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

91-0569878

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNITED WAY OF KING COUNTY, ROBERT L & MARY ANN T WILEY FUND 720 2ND AVE SEATTLE, WA 98104	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JOANNE MONTGOMERY 3455 EVERGREEN POINT RD MEDINA, WA 98039	\$ 210,688.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	BRADLEY TILDEN 1168 HARVARD AVE E UNIT 8 SEATTLE, WA 98102	\$ 210,763.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	THE BOEING COMPANY PO BOX 3707 SEATTLE, WA 98124	\$ 329,721.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	MICROSOFT CORPORATION PO BOX 7405 PRINCETON, NJ 08543-7405	\$ 330,203.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	WATERMARK ESTATE MANAGEMENT SERVICES 10230 NE POINTS DR STE 200 KIRKLAND, WA 98033	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MICHAEL GARVEY <hr/> 1111 FAIRVIEW AVE N <hr/> SEATTLE, WA 98109 <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	HOWARD AND BESSIE MCGEE SURVIVORS TRUST <hr/> 15220 6TH AVE SW <hr/> BURIEN, WA 98166 <hr/>	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
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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
3	STOCK _____ _____ _____	\$ 210,763.	12/31/13
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Draft 10.8.14

Name of organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
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Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(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, 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, 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, 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, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990**

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

91-0569878

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	17,234,821.	16,193,937.	17,329,499.	16,408,375.	14,785,344.
b Contributions	443,065.	109,565.	33,839.	177,218.	94,044.
c Net investment earnings, gains, and losses	2,357,571.	1,558,800.	-501,968.	1,431,381.	1,662,140.
d Grants or scholarships	663,530.				
e Other expenditures for facilities and programs	54.	627,481.	667,433.	687,475.	133,153.
f Administrative expenses	322,503.				
g End of year balance	19,049,370.	17,234,821.	16,193,937.	17,329,499.	16,408,375.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 59.95 %
- b Permanent endowment 28.81 %
- c Temporarily restricted endowment 11.24 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

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

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	33,673.	1,922,955.		1,956,628.
b Buildings		13,617,467.	7,389,348.	6,228,119.
c Leasehold improvements		507,721.	429,043.	78,678.
d Equipment		813,546.	482,843.	330,703.
e Other		2,266,627.	88,729.	2,177,898.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				10,772,026.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(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" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-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.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) 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 15.) ▶	

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	12,578,781.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	1,292,013.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-157,623.
e	Add lines 2a through 2d	2e	1,134,390.
3	Subtract line 2e from line 1	3	11,444,391.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	11,444,391.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	7,386,503.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	7,386,503.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	86,382.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	86,382.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	7,472,885.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b 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 IV, LINE 2B:

THE COUNCIL HOLDS FUNDS DEPOSITED BY SCOUT UNITS AND
DISBURSES THEM AS DIRECTED BY UNITS.

PART V, LINE 4:

THE COUNCIL HAS A SPENDING POLICY THAT DISTRIBUTES 4.5%
ANNUALLY OF THE AVERAGE ENDOWMENT BALANCE OVER THE THREE PRIOR YEARS TO
FUND EXPENDITURES FOR FACILITIES AND PROGRAMS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

UNCOLLECTED PLEDGES -91,753.
CHANGE IN VALUE OF BENEFICIAL INTEREST 20,512.

Part XIII Supplemental Information *(continued)*

INVESTMENT EXPENSES -86,382.

TOTAL TO SCHEDULE D, PART XI, LINE 2D -157,623.

Draft 10.8.14

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		AUCTION (event type)	CONDIT CAMPOUT (event type)	7 (total number)	
Revenue	1 Gross receipts	136,085.	61,000.	150,135.	347,220.
	2 Less: Contributions	68,583.	41,500.	142,635.	252,718.
	3 Gross income (line 1 minus line 2)	67,502.	19,500.	7,500.	94,502.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	6,689.	8,021.	5,868.	20,578.
	7 Food and beverages	12,465.	3,735.	75,784.	91,984.
	8 Entertainment	5,488.	5,977.	21,746.	33,211.
	9 Other direct expenses	87,759.	7,781.	7,500.	103,040.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				248,813.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-154,311.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization operates gaming activities: _____
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

13a		%
13b		%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

▶ **Information about Schedule I (Form 990) and its instructions is at** www.irs.gov/form990

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

91-0569878

Part I **General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 3** Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) (2013)

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance
CAMPERSHIPS	173	0.	53,660.	FMV	REDUCED CAMP FEES
COLLEGE SCHOLARSHIP	7	0.	17,250.	FMV	SCHOLARSHIPS FOR HIGHER EDUCATION
SCOUTREACH MEMBERSHIPS	5870	0.	210,408.	FMV	FREE SCOUTREACH MEMBERSHIP FEES

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:

A SELECTION COMMITTEE OF VOLUNTEERS REVIEWS SCHOLARSHIP

APPLICATIONS AND AWARDS SCHOLARSHIPS.

NEED BASED CAMPERSHIPS ARE GRANTED BY THE CAMPING DIRECTOR. SCOUTS COMPLETE

AN APPLICATION STATING THEIR NEED AND AWARDS ARE IN THE FORM OF REDUCED

CAMP FEES. A TYPICAL CAMPERSHIP IS 50% OFF THE COST OF CAMP.

SCOUTREACH MEMBERSHIP REGISTRATION IS PAID FOR ALL MEMBERS OF SCOUTREACH

Part IV Supplemental Information

UNITS AND JAMBOREE REGISTRAION FEES PAID FOR THE 2013 NATIONAL JAMBOREE.

SCOUTREACH UNITS ARE LED BY PAID COUNCIL STAFF MEMBERS SPONSORED THROUGH

VARIOUS ORGANIZATIONS. THE COUNCIL PAYS THE MEMBER'S REGISTRATION FEE WITH

NATIONAL COUNCIL UPON SIGNING UP FOR SCOUTING. JAMBOREE REGISTRATIONS ARE

AWARDED BY THE DIRECTOR OF SUPPORT SERVICES. SCOUTS COMPLETE AN APPLICATION

STATING THEIR NEED.

Draft 10.8.14

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2013

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

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

91-0569878

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	X								
	4b	X								
	4c	X								
<p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p> <p>5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	5a	X								
	5b	X								
<p>6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	6a	X								
	6b	X								
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	X								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	X								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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

Schedule J (Form 990) 2013

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 in 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 are not 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 compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SHARON M MOULDS SCOUT EXECUTIVE/CEO/CORP. SECRETARY	(i)	214,411.	0.	19,000.	14,705.	17,890.	266,006.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRIAN REDMOND DIRECTOR OF DEVELOPMENT	(i)	139,817.	0.	4,900.	9,740.	16,496.	170,953.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

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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.**
- ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Name of the organization **BOY SCOUTS OF AMERICA** Employer identification number **91-0569878**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	7	15,981.	FAIR MARKET VALUE
7 Boats and planes	X	1	4,100.	FAIR MARKET VALUE
8 Intellectual property				
9 Securities - Publicly traded				
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 ▶ (AUCTION ITEMS)	X	133	88,507.	FAIR MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **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):

NUMBER OF CONTRIBUTIONS RECEIVED.

SCHEDULE M, LINE 32B:

AUTOS AND BOATS ARE SOLD BY DEALERS.

Draft 10.8.14

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

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Name of the organization **BOY SCOUTS OF AMERICA** Employer identification number **91-0569878**

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

THE VALUES OF THE SCOUT OATH AND LAW.

FORM 990, PART I, LINE 6

7,200 IS THE NUMBER OF ADULT VOLUNTEERS REGISTERED WITH

THE COUNCIL AS OF DECEMBER 31, 2013. VOLUNTEERS ARE LEADERS FOR SCOUT

UNITS, MERIT BADGE COUNSELORS, FUNDRAISERS, BOARD MEMBERS, TRAINERS,

AND ASSIST IN ALL ASPECTS OF DELIVERING THE SCOUTING PROGRAM TO YOUTH.

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

CAREER EXPLORATION AND HIGH ADVENTURE PROGRAMS.

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

OTHER SCOUTING PROGRAMS INCLUDE:

-EXPLORING, A PROGRAM FOR 14 TO 21 YEAR OLD BOYS & GIRLS WHICH FOCUSES

ON CAREER & HOBBY INTERESTS.

-LEARNING FOR LIFE IS A PROGRAM FOR BOTH BOYS & GIRLS AGE 5 YEARS

THROUGH HIGH SCHOOL. IT FOCUSES ON "AT RISK" ELEMENTARY CHILDREN & ON

CAREER EXPLORATION FOR OLDER YOUTH. THESE TWO PROGRAMS SERVED 634

YOUTH IN 2013.

-CHILDREN OF INCARCERATED PARENTS IS ANOTHER PROGRAM BOY SCOUTS FOCUSES

ON.

Name of the organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
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EXPENSES \$ 66,690. INCLUDING GRANTS OF \$ 3,349. REVENUE \$ 40,202.

FORM 990, PART VI, SECTION A, LINE 2:

BOB DONEGAN AND PHIL BUSSEY HAVE A BUSINESS RELATIONSHIP.

CATHY HYLTON AND RICHARD GREAVES HAVE A BUSINESS RELATIONSHIP.

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

CORPORATE MEMBERSHIP IS COMPRISED OF NO FEWER THAN 100 ACTIVE

MEMBERS, WHO CONSIST OF CHARTERED ORGANIZATION REPRESENTATIVES AND MEMBERS

AT LARGE, AND MAY ALSO INCLUDE ASSOCIATE AND HONORARY MEMBERS. ACTIVE

MEMBERS ARE VOTING MEMBERS WHEREAS ASSOCIATE AND HONORARY MEMBERS ARE

NON-VOTING MEMBERS.

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

MEMBERS AT LARGE, ASSOCIATE MEMBERS AND HONORARY MEMBERS ARE

ALL ELECTED BY CURRENT ACTIVE MEMBERS EACH YEAR AT THE COUNCIL'S ANNUAL

BUSINESS MEETING. ALL OFFICERS, CHAIRS OF COMMITTEES OF THE BOARD, DISTRICT

CHAIRS AND EXECUTIVE BOARD MEMBERS ARE ELECTED BY CURRENT ACTIVE MEMBERS. A

NOMINATING COMMITTEE OF THE BOARD PRESENTS A SLATE OF CANDIDATES FOR

ELECTION. INTERMITTENT VACANCIES ARE FILLED BY THE EXECUTIVE BOARD.

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

ACTIVE MEMBERS MAY VOTE AT THE ANNUAL MEETING TO RECEIVE AND

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

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

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

COPIES OF THE FORM 990 WERE PROVIDED ELECTRONICALLY TO ALL

Name of the organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
---	--

MEMBERS OF THE BOARD OF DIRECTORS WITH VOTING AUTHORITY PRIOR TO FILING.

THE FORM WAS REVIEWED IN DETAIL BY THE COUNCIL'S AUDIT COMMITTEE AND

PRESENTED TO THE EXECUTIVE COMMITTEE OF THE BOARD.

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

THE CONFLICT OF INTEREST POLICY APPLIES TO EXECUTIVE BOARD

MEMBERS, COMMITTEE MEMBERS, OFFICERS, AND EMPLOYEES OF THE CORPORATION.

THERE IS AN ANNUAL REVIEW OF THE CONFLICT OF INTEREST STATEMENTS COMPLETED

BY ALL BOARD MEMBERS AND OFFICERS THAT ARE KEPT ON FILE. OFFICERS AND BOARD

MEMBERS ARE ALSO EXPECTED TO DISCLOSE CONFLICTS TO THE BOARD CHAIR AS THEY

ARISE ON THE HONOR SYSTEM WITH THE OVERSIGHT OF THE GOVERNANCE COMMITTEE.

IF A CONFLICT EXISTS OR ARISES DURING THE COURSE OF BUSINESS, THE

GOVERNANCE COMMITTEE INVESTIGATES AND DETERMINES ANY ACTION TO TAKE IN

ACCORDANCE WITH THE POLICY. ANY PERSON COVERED BY THE POLICY THAT HAS A

CONFLICT OF INTEREST MAY NOT PARTICIPATE BY DISCUSSION, VOTING, OR ANY

OTHER ACTION ON A MOTION WHICH RELATES TO A TRANSACTION WITH RESPECT TO

WHICH HE OR SHE HAS A CONFLICT OF INTEREST. AT THE DISCRETION OF THE

DISINTERESTED MEMBERS OF THE BOARD, HE OR SHE MAY BE REQUIRED TO LEAVE THE

MEETING DURING THE DISCUSSION AND VOTING.

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

USING A COMPENSATION SURVEY AND A WRITTEN EMPLOYMENT CONTRACT

WHERE APPLICABLE, THE COMPENSATION COMMITTEE REVIEWS AND APPROVES EVERY

EMPLOYEE'S COMPENSATION IN JANUARY EACH YEAR. THE LAST REVIEW WAS JANUARY

2013. COMPENSATION IS BASED ON JOB PERFORMANCE.

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

UPON WRITTEN REQUEST, THE GOVERNING DOCUMENTS, CONFLICT OF

Name of the organization BOY SCOUTS OF AMERICA	Employer identification number 91-0569878
---	--

INTEREST POLICY, AND FINANCIAL STATEMENTS ARE PROVIDED BY MAIL.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF BENEFICIAL INTEREST	20,512.
UNCOLLECTIBLE PLEDGES	-91,753.
TOTAL TO FORM 990, PART XI, LINE 9	-71,241.

Draft 10.8.14

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ **Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

91-0569878

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
CHIEF SEATTLE COUNCIL SCOUTREACH FOUNDATION - 47-0944493, 3120 RAINIER AVENUE SOUTH, SEATTLE, WA 98144	SUPPORTING ORGANIZATION	WASHINGTON	501(C)(3)	LINE 11, TYPE 1	BOY SCOUTS OF AMERICA	X	

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

Schedule R (Form 990) 2013

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		X
1b		X
1c		X
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l		X
1m		X
1n	X	
1o	X	
1p		X
1q		X
1r		X
1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

