

\*\*\* Form 990 Online Filers: Please fax completed and signed form to 866-699-3916

PUBLIC DISCLOSURE

Form **8453-EO**

**Exempt Organization Declaration and Signature for Electronic Filing**

OMB No. 1545-1879

For calendar year 2011, or tax year beginning 01/01, 2011, and ending 12/31, 2011

**2011**

Department of the Treasury  
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

▶ See instructions on back.

Name of exempt organization

Employer identification number

**BOY SCOUTS OF AMERICA**

**22-1576300**

**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here ▶	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . . .	1b	<u>218,296,402</u>
2a	Form 990-EZ check here ▶	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9) . . . . .	2b	
3a	Form 1120-POL check here ▶	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22) . . . . .	3b	
4a	Form 990-PF check here ▶	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5) . . . . .	4b	
5a	Form 8868 check here ▶	<input type="checkbox"/>	b	Balance due (Form 8868, Part I, line 3c or Part II, line 8c) . . . . .	5b	

**Part II Declaration of Officer**

6  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2011 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here ▶ Robert A Tuggle Signature of officer      11/13/12 Date      ▶ Robert A Tuggle, CFO Title

**Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)**

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

<b>ERO's Use Only</b>	ERO's signature ▶	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶				EIN Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

<b>Paid Preparer Use Only</b>	Print/Type preparer's name STEVE SCHOONMAKER	Preparer's signature <u>Steve Schoonmaker</u>	Date 11/13/2012	Check <input type="checkbox"/> if self-employed	PTIN P00850395
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.

PUBLIC DISCLOSURE

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2011 calendar year, or tax year beginning 01/01, 2011, and ending 12/31, 20 11

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization **BOY SCOUTS OF AMERICA**  
 Doing Business As  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**1325 West Walnut Hill Lane**  
 City or town, state or country, and ZIP + 4  
**Irving, TX 75038-3008**

**D** Employer identification number  
**22-1576300**

**E** Telephone number  
**972-580-2000**

**G** Gross receipts \$ **1,924,157,656**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list. (see instructions)

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **www.Scouting.org**

**H(c)** Group exemption number ▶ **1761**

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: **1910**

**M** State of legal domicile: **TX**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>The primary exempt purpose of the Boy Scouts of America is to promote through community organizations, and cooperation with other agencies, the ability of boys to do things for themselves and others, to train them in Scoutcraft, and to teach them patriotism, courage, self-reliance, and kindred virtues, using the methods which are now in common use by Boy Scouts.</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>70</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>63</b>
	<b>5</b>	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	<b>3,737</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>1,074,775</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>-2,274,036</b>
<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>-2,677,541</b>	
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	Prior Year <b>107,197,261</b>	Current Year <b>101,825,476</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>92,571,664</b>	<b>61,295,148</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>23,300,697</b>	<b>24,525,049</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>45,788,526</b>	<b>30,650,729</b>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>268,858,148</b>	<b>218,296,402</b>
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>6,673,272</b>	<b>32,106,877</b>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>0</b>	<b>0</b>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>58,909,139</b>	<b>72,029,338</b>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>279,871</b>	<b>1,082,267</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>3,335,894</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>171,923,082</b>	<b>134,285,726</b>
<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>237,785,364</b>	<b>239,504,208</b>	
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>31,072,784</b>	<b>-21,207,806</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	Beginning of Current Year <b>1,030,831,765</b>	End of Year <b>1,023,031,961</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>316,757,099</b>	<b>345,464,127</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>714,074,666</b>	<b>677,567,834</b>

**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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer: *Robert A Tuggle* Date: **11/13/12**

Robert A Tuggle, CFO  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: \_\_\_\_\_ Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: \_\_\_\_\_

Firm's name ▶: \_\_\_\_\_ Firm's EIN ▶: \_\_\_\_\_

Firm's address ▶: \_\_\_\_\_ Phone no.: \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

PUBLIC DISCLOSURE

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

The primary exempt purpose of the Boy Scouts of America is to promote through community organizations, and cooperation with other agencies, the ability of boys to do things for themselves and others, to train them in Scoutcraft, and to teach them patriotism, courage, self-reliance, and kindred virtues, using the methods which are now in common use by Boy Scouts.

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 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 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 and section 4947(a)(1) trusts 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 \$ 31,870,643 including grants of \$ 566,044 ) (Revenue \$ 2,884,907 )
Field Operations - Support for local councils, including but not limited to, administration of standards of performance, inspection of council campsites, assistance with long-range planning, conduct of regional training and conferences for professionals and volunteers, administration of an extensive program of local council financial support, and administration and funding of the defense of our private membership rights.

4b (Code: ) (Expenses \$ 80,789,413 including grants of \$ 31,464,704 ) (Revenue \$ 43,427,482 )
Program Development and Delivery - Development of the basic program; providing camping and outdoor literature, materials, and techniques, as well as engineering service, to local councils; managing the volunteer training programs of the Boy Scouts of America and handling all national program support in the areas of health and safety, activities, program evaluation, and low-income program; developing uniforms and insignia and other program elements; operating the National Scouting Museum; operating the high-adventure bases and the national jamboree. As of December 31, 2011, there were youth registered in 2,212,510 individual programs served by adult leaders registered in 1,044,191 individual programs for a grand total of 3,256,701.

4c (Code: ) (Expenses \$ 12,261,107 including grants of \$ 19,995 ) (Revenue \$ 1,024,929 )
Human Resources and Training - Administration of all aspects of human resources policies, including recruiting, placement, and training of professional employees; promoting diversity; managing compensation and benefits programs; and monitoring employee relations.

4d Other program services (Describe in Schedule O.) See Schedule O, Statement 1
(Expenses \$ 86,114,564 including grants of \$ 56,134 ) (Revenue \$ 13,873,502 )

4e Total program service expenses 211,035,727

**PUBLIC DISCLOSURE**

**Part IV Checklist of Required Schedules**

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

**PUBLIC DISCLOSURE**

**Part IV Checklist of Required Schedules** *(continued)*

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>22</b> Did the organization report more than \$5,000 of grants and 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>23</b> 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>24a</b> 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 25 . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>25b</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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>27</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>28</b> 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):		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>28c</b> 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>32</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>33</b> 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>35b</b> 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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>37</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**PUBLIC DISCLOSURE**

**Part V** **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	658		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	✓		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	3737		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . .	2b	✓		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a	✓		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b	✓		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a	✓		
b	If "Yes," enter the name of the foreign country: ► <u>Bahamas, Canada</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		✓	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b		✓	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .	6a		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b			
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7a		✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		✓	
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		✓	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f		✓	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g		✓	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	7h	✓		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8			
9	<b>Sponsoring organizations maintaining donor advised funds.</b>				
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b			
10	<b>Section 501(c)(7) organizations.</b> Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b			
11	<b>Section 501(c)(12) organizations.</b> Enter:				
a	Gross income from members or shareholders . . . . .	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	11b			
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b			
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	13b			
c	Enter the amount of reserves on hand . . . . .	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	14a		✓	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	14b			

**PUBLIC DISCLOSURE**

**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 to any question in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1a</b>	70		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .		
<b>1b</b>	63		
<b>2</b>	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? . . . . .		<input checked="" type="checkbox"/>
<b>3</b>	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? . . . . .		<input checked="" type="checkbox"/>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		<input checked="" type="checkbox"/>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		<input checked="" type="checkbox"/>
<b>6</b>	Did the organization have members or stockholders? . . . . .		<input checked="" type="checkbox"/>
<b>7a</b>	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? . . . . .		<input checked="" type="checkbox"/>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		<input checked="" type="checkbox"/>
<b>7b</b>			
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8a</b>			
<b>8b</b>			
<b>9</b>	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 . . . . .		<input checked="" type="checkbox"/>
<b>g</b>			

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Statement 2
- 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.  
 Own website     Another's website     Upon request
- 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: ► Stephanie Phillips, (972)580-2300

**PUBLIC DISCLOSURE**

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

Check if Schedule O contains a response to any question 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 (describe hours for related organizations in Schedule O)	(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			
Anderson W Chandler Natl Exec Board Member	1	✓					0	0	0	
Arthur F Oppenheimer Natl Exec Board Member	1	✓					0	0	0	
Aubrey B Harwell Jr Treasurer and Natl Exec Board Member	1	✓		✓			0	0	0	
Aubrey B Patterson Natl Exec Board Member	1	✓					0	0	0	
B Howard Bulloch Natl Exec Board Member	1	✓					0	0	0	
Bruce D Parker Vice President and Natl Exec Board Member	1	✓		✓			0	0	0	
C Travis Traylor Jr Natl Exec Board Member	1	✓					0	0	0	
Charles H Smith Natl Exec Board Member	1	✓					0	0	0	
Christian H Poindexter Natl Exec Board Member	1	✓					0	0	0	
D Kent Clayburn Natl Exec Board Member	1	✓					0	0	0	
David L Beck Natl Exec Board Member	1	✓					0	0	0	
David M Weekley Natl Exec Board Member	1	✓					0	0	0	
Dennis H Chookaszian Natl Exec Board Member	1	✓					0	0	0	
Donald D Belcher Natl Exec Board Member	1	✓					0	0	0	

**PUBLIC DISCLOSURE**

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
Douglas B Mitchell Natl Exec Board Member	1	✓						0	0	0
Douglas H Dittrick Natl Exec Board Member	1	✓						0	0	0
Drayton McLane Jr Vice President and Natl Exec Board Member	1	✓		✓				0	0	0
Earl G Graves Vice President and Natl Exec Board Member	1	✓		✓				0	0	0
Francis H Olmstead Jr Natl Exec Board Member	1	✓						0	0	0
Francis R McAllister Natl Exec Board Member	1	✓						0	0	0
Frank Ramirez Natl Exec Board Member	1	✓						0	0	0
Gary E Wendlandt Natl Exec Board Member	1	✓						0	0	0
George F Francis III Natl Exec Board Member	1	✓						0	0	0
Gerald J Voros Natl Exec Board Member	1	✓						0	0	0
Glen McLaughlin Natl Exec Board Member (Jan - May 2011)	1	✓						0	0	0
Henry A Rosenberg Jr Vice President and Natl Exec Board Member	1	✓		✓				0	0	0
J Brett Harvey Natl Exec Board Member	1	✓						0	0	0
Jack D Furst Vice President-Outdoor Adventures and Natl Exec	1	✓		✓				0	0	0

**PUBLIC DISCLOSURE**

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
James D Rogers Natl Exec Board Member	1	✓						0	0	0
James S Turley International Commissioner and Natl Exec Board M	1	✓		✓				0	0	0
James S Wilson Natl Exec Board Member	1	✓						0	0	0
Joe W Walkoviak Natl Exec Board Member (Jan - May 2011)	1	✓						0	0	0
John C Cushman III Natl Exec Board Member	1	✓						0	0	0
John F Smith Natl Exec Board Member (Jan - May 2011)	1	✓						0	0	0
John Gottschalk Natl Exec Board Member	1	✓						0	0	0
John R Donnell Jr Natl Exec Board Member	1	✓						0	0	0
Jon E Barfield Natl Exec Board Member	1	✓						0	0	0
Jose F Nino Natl Exec Board Member	1	✓						0	0	0
Joseph P Landy Natl Exec Board Member	1	✓						0	0	0
Keith A Clark Natl Exec Board Member	1	✓						0	0	0
L B Eckelkamp Jr Natl Exec Board Member	1	✓						0	0	0
Larry W Kellner Natl Exec Board Member	1	✓						0	0	0

**PUBLIC DISCLOSURE**

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
Lyle R Knight Vice President-Human Resources and Natl Exec Board Member	1	✓		✓				0	0	0
Mark P Mays Natl Exec Board Member	1	✓						0	0	0
Marshall M Sloane Natl Exec Board Member	1	✓						0	0	0
Matthew K Rose Vice President and Natl Exec Board Member	1	✓		✓				0	0	0
Michael D Harris Esq Natl Exec Board Member	1	✓						0	0	0
Nathan O Rosenberg Vice President-Marketing and Natl Exec Board Member	1	✓		✓				0	0	0
O Temple Sloan Jr Vice President-Supply and Natl Exec Board Member	1	✓		✓				0	0	0
Philip M Condit Natl Exec Board Member	1	✓						0	0	0
R Michael Daniel Natl Exec Board Member	1	✓						0	0	0
R Ray Wood Natl Exec Board Member	1	✓						0	0	0
R Thomas Buffenbarger Assistant Treasurer and Natl Exec Board Member	1	✓		✓				0	0	0
Ralph de la Vega Natl Exec Board Member	1	✓						0	0	0
Randall L Stephenson Vice President-Finance and Natl Exec Board Member	1	✓		✓				0	0	0
Rex W Tillerson President and Natl Exec Board Member	1	✓		✓				0	0	0

**PUBLIC DISCLOSURE**

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
Richard L Burdick Natl Exec Board Member	1	✓						0	0	0
Robert H Reynolds Natl Exec Board Member	1	✓						0	0	0
Robert J LaFortune Natl Exec Board Member	1	✓						0	0	0
Robert J Mazzuca Chief Scout Executive and Natl Exec Board Member	40	✓		✓				815,004	0	165,751
Robert J Smith Natl Exec Board Member	1	✓						0	0	0
Roger M Schrimp Natl Exec Board Member	1	✓						0	0	0
Roland Smith Natl Exec Board Member	1	✓						0	0	0
Ronald K Migita Natl Exec Board Member	1	✓						0	0	0
Ronald O Coleman Natl Exec Board Member	1	✓						0	0	0
Roy S Roberts Natl Exec Board Member	1	✓						0	0	0
Scott D Oki Natl Exec Board Member	1	✓						0	0	0
Stephen B King Natl Exec Board Member	1	✓						0	0	0
Stephen G Hanks Natl Exec Board Member	1	✓						0	0	0
Stephen Hemsley Natl Exec Board Member	1	✓						0	0	0

**PUBLIC DISCLOSURE**

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
Steven E Weekes Natl Exec Board Member	1	✓						0	0	0
Steven R Rogel Natl Exec Board Member	1	✓						0	0	0
T Michael Goodrich Natl Exec Board Member	1	✓						0	0	0
Terrence P Dunn Vice President-Council Operations and Natl Exec B	1	✓		✓				0	0	0
Thomas S Monson Natl Exec Board Member	1	✓						0	0	0
Tico A Perez National Commissioner and Natl Exec Board Mem	1	✓		✓				0	0	0
Togo D West Jr Natl Exec Board Member	1	✓						0	0	0
Wayne M Perry President-Elect and Natl Exec Board Member	1	✓		✓				0	0	0
William F Cronk Natl Exec Board Member	1	✓						0	0	0
C Wayne Brock ACSE and COO	40				✓			568,296	0	99,333
James J Terry Jr ACSE and CFO	40				✓			696,874	0	109,980
Bradley Farmer ACSE Development	40				✓			396,299	0	68,976
Mike Ashline Supply Group Director	40				✓			272,545	0	55,605
John Green Group Director - Outdoor Adventures	40				✓			261,582	0	40,122

**PUBLIC DISCLOSURE**

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
Perry Cochell Director, Office of Philanthropy	40				<input checked="" type="checkbox"/>		214,393	0	72,698	
Tom Fitzgibbon Regional Director	40					<input checked="" type="checkbox"/>	415,483	0	89,251	
Robert A Tuggle ACSE Resources & Strategy	40					<input checked="" type="checkbox"/>	419,605	0	77,840	
Don McChesney Regional Director	40					<input checked="" type="checkbox"/>	411,468	0	62,864	
Gary Butler ACSE Council Operations	40					<input checked="" type="checkbox"/>	313,794	0	126,755	
Ponce Duran Regional Director	40					<input checked="" type="checkbox"/>	312,224	0	96,600	
Roy L Williams Chief Scout Executive	0						0	230,833	9,384	
Kenneth L Connelley Assistant Chief Scout Executive/CFO	0						0	104,322	0	
<b>1b Sub-total</b>							5,097,567	335,155	1,075,159	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							5,097,567	335,155	1,075,159	

**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 **▶ 195**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**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
DELL MARKETING LP, 7489 COLLECTIONS CENTER DRIVE, Chicago, IL 60693	Computer Consulting	5,013,978
STIMERLYS LLC, DBA FUSION PERFORMANCE MKTG, 555 MARYVILLE UNIVERSITY	Event transportation	2,818,854
Skadden Arps Slate Meagher and Flom LLP, PO BOX 1764, White Plains, NY 1	Attorney	1,713,025
SCHWABE WILLIAMSON & WYATT PC, 1211 SW FIFTH AVENUE SUITE 1900, Portlan	Attorney	1,486,542
WELD LLC, 137 1/2 MAIN ST, Oak Hill, WV 25901	Marketing	1,107,977

**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 **▶ 44**

PUBLIC DISCLOSURE

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>	0						
	<b>b</b>	Membership dues . . . . .	<b>1b</b>	54,783,462						
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>	0						
	<b>d</b>	Related organizations . . . . .	<b>1d</b>	0						
	<b>e</b>	Government grants (contributions)	<b>1e</b>	0						
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	47,042,014						
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$		1,061,174						
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		101,825,476						
Program Service Revenue				<b>Business Code</b>						
	<b>2a</b>	Philmont Scout Ranch and High Adventure		900099	30,453,923	30,322,385	131,538	0		
	<b>b</b>	Order of the Arrow		900099	1,165,629	1,165,629	0	0		
	<b>c</b>	Scout Net		900099	2,022,725	2,022,725	0	0		
	<b>d</b>	Local Council assessments		900099	13,846,319	13,846,319	0	0		
	<b>e</b>	Regional and Professional Training		900099	2,884,907	2,884,907	0	0		
	<b>f</b>	All other program service revenue .			10,921,645	10,921,645	0	0		
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .			61,295,148					
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .			14,999,300	0	12,241	14,987,059		
	<b>4</b>	Income from investment of tax-exempt bond proceeds			151	0	0	151		
	<b>5</b>	Royalties . . . . .			1,577,716	0	0	1,577,716		
	<b>6a</b>	Gross rents . . . . .	(i) Real	(ii) Personal						
			36,400	0						
			<b>b</b> Less: rental expenses	0	0					
			<b>c</b> Rental income or (loss)	36,400	0					
	<b>d</b>	Net rental income or (loss) . . . . .			36,400	0	0	36,400		
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other						
			1,575,546,183	9,624,288						
			<b>b</b> Less: cost or other basis and sales expenses . . . . .	1,566,085,139	9,559,734					
			<b>c</b> Gain or (loss) . . . . .	9,461,044	64,554					
	<b>d</b>	Net gain or (loss) . . . . .			9,525,598	0	0	9,525,598		
	<b>8a</b>	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>							
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>							
	<b>c</b>	Net income or (loss) from fundraising events . . . . .								
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>							
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>							
<b>c</b>	Net income or (loss) from gaming activities . . . . .									
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>								
		158,745,409								
		<b>b</b> Less: cost of goods sold . . . . .	130,216,381							
<b>c</b>	Net income or (loss) from sales of inventory . . . . .			28,529,028	0	-2,417,815	30,946,843			
Miscellaneous Revenue			<b>Business Code</b>							
<b>11a</b>	High Adventure Base - Other Income		900099	326,603	0	0	326,603			
<b>b</b>	Other regional activities		900099	152,252	0	0	152,252			
<b>c</b>	NESA - Other Revenues		900099	28,730	0	0	28,730			
<b>d</b>	All other revenue . . . . .			0	0	0	0			
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .			507,585						
<b>12</b>	<b>Total revenue.</b> See instructions. . . . .			218,296,402	61,163,610	-2,274,036	57,581,352			

**PUBLIC DISCLOSURE**

**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) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question 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	30,688,729	30,688,729		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	912,041	912,041		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	506,107	506,107		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,837,458	1,734,842	1,370,769	731,847
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	52,871,670	39,774,790	12,391,265	705,615
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,159,114	3,128,857	974,750	55,507
9 Other employee benefits	5,366,184	4,054,281	971,453	340,450
10 Payroll taxes	5,794,912	4,359,450	1,358,124	77,338
11 Fees for services (non-employees):				
a Management				
b Legal	993,923	982,997		10,926
c Accounting	571,362	74,444	496,918	
d Lobbying	181,853		181,853	
e Professional fundraising services. See Part IV, line 17	1,082,267			1,082,267
f Investment management fees	1,276,762		1,276,762	
g Other	7,462,862	3,991,689	3,095,238	375,935
12 Advertising and promotion	5,303,230	4,947,071	169,429	186,730
13 Office expenses	9,493,825	6,202,302	3,108,019	183,504
14 Information technology	5,223,537	5,215,447	0	8,090
15 Royalties				
16 Occupancy	7,079,653	5,604,139	1,451,088	24,426
17 Travel	6,482,377	5,056,959	1,092,691	332,727
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	15,056,722	13,945,421	968,265	143,036
20 Interest	2,900,000		2,900,000	0
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,955,478	3,301,796	1,647,181	6,501
23 Insurance	43,577,338	42,682,993	894,345	0
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 Other Expenses, including fundraising ex	7,745,495	7,039,380	1,517,812	-811,697
b Taxes, Permit, and Licenses	129,044	91,336	33,568	4,140
c Insurance Claims	26,725,074	26,725,074	0	0
d Supply and Magazine Allocated	-10,872,809	15,582	-10,766,943	-121,448
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	239,504,208	211,035,727	25,132,587	3,335,894
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**PUBLIC DISCLOSURE**

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	102,352,979	<b>1</b>	52,662,549
	<b>2</b> Savings and temporary cash investments . . . . .	28,174,004	<b>2</b>	20,832,010
	<b>3</b> Pledges and grants receivable, net . . . . .	75,831,069	<b>3</b>	82,573,392
	<b>4</b> Accounts receivable, net . . . . .	29,852,342	<b>4</b>	81,890,025
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 instructions) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	46,583,033	<b>8</b>	56,291,672
	<b>9</b> Prepaid expenses and deferred charges . . . . .	15,347,068	<b>9</b>	19,089,648
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 188,990,946		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 101,430,906	<b>10c</b>	87,560,040
	<b>11</b> Investments—publicly traded securities . . . . .	655,362,288	<b>11</b>	282,692,764
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	331,485,501
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	0	<b>15</b>	7,954,360
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	1,030,831,765	<b>16</b>	1,023,031,961	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	101,928,171	<b>17</b>	118,378,255
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	36,032,270	<b>19</b>	32,196,862
	<b>20</b> Tax-exempt bond liabilities . . . . .	100,000,000	<b>20</b>	99,812,962
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	78,796,658	<b>25</b>	95,076,048
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	316,757,099	<b>26</b>	345,464,127
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	605,757,993	<b>27</b>	534,462,271
	<b>28</b> Temporarily restricted net assets . . . . .	88,095,382	<b>28</b>	97,077,860
	<b>29</b> Permanently restricted net assets . . . . .	20,221,291	<b>29</b>	46,027,703
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b> . . . . .	714,074,666	<b>33</b>	677,567,834	
<b>34</b> <b>Total liabilities and net assets/fund balances</b> . . . . .	1,030,831,765	<b>34</b>	1,023,031,961	

**PUBLIC DISCLOSURE**

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	218,296,402
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	239,504,208
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-21,207,806
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	714,074,666
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-15,299,026
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	677,567,834

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  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? . . . . .
- b** Were the organization's financial statements audited by an independent accountant? . . . . .
- c** 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.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 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? . . . . .
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		✓
<b>2b</b>	✓	
<b>2c</b>	✓	
<b>3a</b>		✓
<b>3b</b>		

**PUBLIC DISCLOSURE**

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
  - e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .	Yes	No
(ii) A family member of a person described in (i) above? . . . . .	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .	11g(iii)	
  - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

**PUBLIC DISCLOSURE**

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	46,615,360	45,271,816	42,383,665	59,088,848	66,531,505	259,891,194
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 <b>Total.</b> Add lines 1 through 3 . . . . .	46,615,360	45,271,816	42,383,665	59,088,848	66,531,505	259,891,194
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) . . . . .						
6 <b>Public support.</b> Subtract line 5 from line 4.						259,891,194

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4 . . . . .	46,615,360	45,271,816	42,383,665	59,088,848	66,531,505	259,891,194
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	28,801,486	23,675,564	14,059,255	16,044,777	16,850,496	99,431,578
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.) . . . . .	487,205	377,682	510,300	357,851	507,585	2,240,623
11 <b>Total support.</b> Add lines 7 through 10						361,563,395
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	1,124,595,418
13 <b>First five years.</b> 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 <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	71.88 %
15 Public support percentage from 2010 Schedule A, Part II, line 14 . . . . .	15	65.82 %
16a <b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input checked="" type="checkbox"/>
b <b>33 1/3% support test—2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
17a <b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> 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 <b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> 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 <b>Private foundation.</b> 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"/>

**PUBLIC DISCLOSURE**

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</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 . . . .						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6 . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . .						
<b>13 Total support.</b> (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**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15 . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17 . . . .	<b>18</b>	%

**19a 33 1/3% support tests—2011.** 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—2010.** 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 . . . .

**PUBLIC DISCLOSURE**

**Part IV** **Supplemental Information.** Complete this part to 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).

General Explanation - Other miscellaneous income.

General Explanation - Two unusual grants totaling \$31,164,321 were made in 2011.

**PUBLIC DISCLOSURE**

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>BOY SCOUTS OF AMERICA</b>	Employer identification number <b>22-1576300</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . ▶ \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**PUBLIC DISCLOSURE**

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).  
**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	386,847													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b)	386,847													
<b>d</b>	Other exempt purpose expenditures	364,980,090													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d)	365,366,937													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
<b>c</b> Total lobbying expenditures	205,364	222,947	269,003	386,847	1,084,161
<b>d</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures	0	0	0	0	0

**PUBLIC DISCLOSURE**

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

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PUBLIC DISCLOSURE

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2011

Open to Public Inspection

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. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

BOY SCOUTS OF AMERICA

22-1576300

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register, 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?, 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)?, 9 In Part XIV, 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.

Table with 2 columns: Amount. Rows include: 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 XIV, 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

**PUBLIC DISCLOSURE**

**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 XIV.

**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 XIV and complete the following table:

	Amount
<b>c</b> Beginning balance	<b>1c</b>
<b>d</b> Additions during the year	<b>1d</b>
<b>e</b> Distributions during the year	<b>1e</b>
<b>f</b> Ending balance	<b>1f</b>

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

**b** If "Yes," explain the arrangement in Part XIV.

**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
<b>1a</b> Beginning of year balance	285,870,684	264,362,398	221,017,998	327,778,803	
<b>b</b> Contributions	645,067	518,129	750,007	3,444,975	
<b>c</b> Net investment earnings, gains, and losses	-5,483,574	21,947,430	44,270,613	-95,963,281	
<b>d</b> Grants or scholarships	702,937	392,973	501,405	673,172	
<b>e</b> Other expenditures for facilities and programs	211,359	81,703	582,080	13,390,702	
<b>f</b> Administrative expenses	326,648	193,355	720,040	178,625	
<b>g</b> End of year balance	279,791,233	286,159,926	264,235,093	221,017,998	

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

- a** Board designated or quasi-endowment  81.61 %
- b** Permanent endowment  16.38 %
- c** Temporarily restricted endowment  2.01 %

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:

	Yes	No
<b>(i)</b> unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>(ii)</b> related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

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

**Part VI Land, Buildings, and Equipment.** 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
<b>1a</b> Land	0	11,360,096		11,360,096
<b>b</b> Buildings	0	86,457,865	38,905,494	47,552,371
<b>c</b> Leasehold improvements	0	305,582	118,766	186,816
<b>d</b> Equipment	0	65,450,926	51,809,888	13,641,038
<b>e</b> Other	0	25,416,477	10,596,758	14,819,719
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				87,560,040

**Part VII Investments—Other Securities.** 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 <u>BSA Commingled Endowment Fund LP</u>	331,485,501	End-of-Year Market Value
(A) . . . . .		
(B) . . . . .		
(C) . . . . .		
(D) . . . . .		
(E) . . . . .		
(F) . . . . .		
(G) . . . . .		
(H) . . . . .		
(I) . . . . .		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	331,485,501	

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Gift Annuity Liability	7,954,360
(3) Insurance Reserves	87,121,688
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	95,076,048

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

**PUBLIC DISCLOSURE**

<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b>			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	218,296,402
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	239,504,208
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-21,207,806
4	Net unrealized gains (losses) on investments	4	-15,299,026
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	34,346,832
9	Total adjustments (net). Add lines 4 through 8	9	19,047,806
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-2,160,000

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>			
1	Total revenue, gains, and other support per audited financial statements	1	201,530,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-15,299,026
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	-15,299,026
3	Subtract line 2e from line 1	3	216,829,026
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	0
b	Other (Describe in Part XIV.)	4b	1,467,376
c	Add lines 4a and 4b	4c	1,467,376
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	218,296,402

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>			
1	Total expenses and losses per audited financial statements	1	203,690,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	203,690,000
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	0
b	Other (Describe in Part XIV.)	4b	35,814,208
c	Add lines 4a and 4b	4c	35,814,208
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	239,504,208

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part III, Line 1 - The National Council has paintings and artifacts in various museums and National Council-owned buildings. The largest collection resides at the National Scouting Museum in Irving, Texas, which houses collectibles appraised at approximately \$60,000,000. The last appraisal was conducted in March 2012. Costs associated with acquisition and maintenance of these collections has been expensed. During 2011, no major additions or disposals of collection items occurred.

Schedule D, Part III, Line 4 - Extensive collection of Scouting memorabilia and Rockwell paintings reflecting Boy Scouts in daily life are on display for the enjoyment of members, volunteers, and visitors. Encourages boys to explore the many facets of Scouting.

Schedule D, Part V, Line 4 - Donor specified endowment funds serve to further Scouting.

**PUBLIC DISCLOSURE**

**Part XIV - Supplemental Information (Continued)**

Schedule D, Part X, Line 2 - The National Council recognizes interest and penalties related to underpayment of income taxes as income tax expense. As of December 31, 2011, the National Council had not recorded any amounts related to unrecognized income tax benefits or accrued interest and penalties. The National Council does not anticipate any significant changes to unrecognized income tax benefits over the next year.

Schedule D, Part XI, Line 8 - A consolidated audit of the Boy Scouts of America and related organizations financial statements was done for the year ending December 31, 2011. Per the audit revenues include Learning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional trust revenues and reclassification of expenses netted to income are eliminated for reporting purposes.

Schedule D, Part XII, Line 4b - A consolidated audit of the Boy Scouts of America and related organizations financial statements was done for the year ending December 31, 2011. Per the audit revenues include Learning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional trust revenues and reclassification of expenses netted to income are eliminated for reporting purposes.

Schedule D, Part XIII, Line 4b - A consolidated audit of the Boy Scouts of America and related organizations financial statements was done for the year ending December 31, 2011. Per the audit revenues include Learning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional trust revenues and reclassification of expenses netted to income are eliminated for reporting purposes.

PUBLIC DISCLOSURE

SCHEDULE F  
(Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2011

Open to Public Inspection

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Central America and the Ca	0	0	Grantmaking	Support International S	38,529
(2) Europe (including Iceland	0	0	Grantmaking	Support International S	176,000
(3) East Asia and the Pacific	0	0	Grantmaking	Support International S	74,891
(4) Middle East and North Afri	0	0	Grantmaking	Support International S	7,637
(5) South America	0	0	Grantmaking	Support International S	115,000
(6) Russia and the newly indep	0	0	Grantmaking	Support International S	34,000
(7) Central America and the Ca	0	0	Speaking at Seminars or	Site visits to review h	38,056
(8) East Asia and the Pacific	0	0	Program Services	Reviewing vendor facili	246,201
(9) Europe (including Iceland	0	0	Speaking at Seminars or	2011 World Scout Jambor	238,513
(10) Middle East and North Afri	0	0	Program Services	Messengers of Peace Pro	9,264
(11) North America (including C	0	0	Program Services	Meetings with Canadian	4,744
(12) Russia and the newly indep	0	0	Program Services	Eurasia Region Top Hand	13,195
(13) South America	0	0	Program Services	World Scout Conference.	56,932
(14) South Asia	0	0	Program Services	Reviewing vendor facili	50
(15) Central America and the Ca	0	0	Investments		365,000
(16) Europe (including Iceland	0	0	Investments		2,659,000
(17) North America (including C	2	31	Program Services	Support International S	278,394
3a Sub-total . . . . .					
b Total from continuation sheets to Part I . . . . .					
c Totals (add lines 3a and 3b)	2	31			4,355,406

**PUBLIC DISCLOSURE**

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Central America a	Support Internatio	10,000	Wire transfer	0		
(2)			Central America a	Support Internatio	16,900	Wire transfer	0		
(3)			Central America a	Support Internatio	10,500	Wire transfer	0		
(4)			East Asia and the	Support Internatio	37,000	Wire transfer	0		
(5)			East Asia and the	Support Internatio	18,034	Wire transfer	0		
(6)			Europe (including	Support Internatio	145,520	Wire transfers	0		
(7)			Europe (including	Support Internatio	24,870	Wire transfers	0		
(8)			Middle East and N	Support Internatio	7,637	Check	0		
(9)			Russia and the ne	Support Internatio	17,500	Wire transfer	0		
(10)			Russia and the ne	Support Internatio	16,500	Wire transfer.	0		
(11)			South America	Support Internatio	85,000	Wire transfer	0		
(12)			South America	Support Internatio	30,000	Wire transfer	0		
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . 19

3 Enter total number of other organizations or entities . . . . . 19

PUBLIC DISCLOSURE

**Part III** Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Transportation support for	Europe (including Ice	35	24,600	Travel expense p	0		
(2) Transportation support for	Central America and t	10	4,850	Travel expense p	0		
(3) Transportation support for	East Asia and the Pac	19	14,250	Travel expense p	0		
(4) Transportation support for	Middle East and North	12	8,800	Travel expense p	0		
(5) Transportation support for	South America	8	4,000	Travel expense p	0		
(6) Transportation support for	Russia and the newly	2	1,300	Travel expense p	0		
(7) Transportation support for	Sub-Saharan Africa	3	2,250	Travel expense p	0		
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

PUBLIC DISCLOSURE

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* . . . . .  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .  Yes  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . . . . .  Yes  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* . . . . .  Yes  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* . . . . .  Yes  No

**PUBLIC DISCLOSURE**

**Part V** **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F, Part I, Line 2 - Progress reports are received from organizations and occasional site visits.

Area with horizontal dashed lines for supplemental information.

**PUBLIC DISCLOSURE**

**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization

**BOY SCOUTS OF AMERICA**

Employer identification number

**22-1576300**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 See Schedule G, Part IV, Statement 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>				0	1,080,120	-1,080,120

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK, AL, AR, AZ, CA, CO, CT, FL, GA, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, PR, RI, SC, TN, TX, UT, VA, WA, WI, WV

**PUBLIC DISCLOSURE**

**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
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .				
	<b>2</b> Less: Charitable contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2) . . . . .				
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				
<b>11</b> Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶					( )

**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))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> 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	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( )
	<b>8</b> Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				( )

**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: \_\_\_\_\_

\_\_\_\_\_



**PUBLIC DISCLOSURE**

Schedule G, Part IV, Statement 1

BOY SCOUTS OF AMERICA

Form: Schedule G

22-1576300

Page: 1

Line Number: Part I Line 2b

**Fundraiser Activity Information**

Name and Address	Activity	C1	Gross Receipts	C2	C3
Paula B Cain 5356 Willis Avenue Dallas, TX 75206	Study of Direct Response Marketing Strategies	No	0	6,500	-6,500
Hartsook Companies Inc 1100 Walnut Street Suite 2935 Kansas City, MO 64106	Train local councils with fundraising programs.	No	0	213,297	-213,297
Garrigan Lyman Group 1524 Fifth Avenue 4th Floor Seattle, WA 98101	Digital fundraising campaign for Arrow WV, Inc. affiliate. Outcharged to Arrow WV, Inc.	No	0	532,157	-532,157
v-forward 18608 Durbin Road Noblesville, IN 46060	Fundraising expenses for Arrow WV, Inc. Outcharged to Arrow WV, Inc.	No	0	328,166	-328,166
<b>Total:</b>			<b>0</b>	<b>1,080,120</b>	<b>-1,080,120</b>

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**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.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Employer identification number

22-1576300

**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. Check this box if no one recipient 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
(1) Sch. I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	252
<b>3</b> Enter total number of other organizations listed in the line 1 table	0

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

Cat. No. 50055P

Schedule I (Form 990) (2011)

**PUBLIC DISCLOSURE**

**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
1 Brinton Endowment Scholarship	2	14,660	0		
2 Cooke Eagle Scholarship	61	183,000	0		
3 CSE Scholarship	31	46,500	0		
4 Curtis Scholarship	4	6,568	0		
5 George Meany Awards	4	1,180	0		
6 Golding Summer Camp Scholarships	44	12,725	0		
7 (Continued on Schedule I, Part IV, Statement Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Schedule I, Part I, Line 2 - Periodic progress reports from organizations. Site visits are made as necessary.)					

**PUBLIC DISCLOSURE**

Schedule I, Part IV, Statement 1

BOY SCOUTS OF AMERICA

Form: Schedule I

22-1576300

Page: 1

Line Number: Part II

**Description of Grants and Other Assistance to Governments and Organizations in the United States**

		Amount of cash grant	Amount of non-cash assistance
<b>Name and address</b>	Buffalo Trace Council 3501 E Lloyd Expressway Evansville, IN 47715	5,250	0
<b>EIN</b>	35-0867971		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Blue Water Council 277 924 7th Street Port Huron, MI 48060	5,302	0
<b>EIN</b>	38-1363561		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Chief Seattle Council 3120 Rainier Avenue South Seattle, WA 98144	5,320	0
<b>EIN</b>	91-0569878		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Rocky Mountain Council 411 South Pueblo Boulevard Pueblo, CO 81005	5,410	0
<b>EIN</b>	84-0405244		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Georgia-Carolina Council 93 1450 Greene St Suite 150 Augusta, GA 30901	5,450	0
<b>EIN</b>	58-0566185		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Bucktail Council 209 First Street DuBois, PA 15801	5,670	0
<b>EIN</b>	25-0965256		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			

**PUBLIC DISCLOSURE**

Schedule I, Part IV, Statement 1

BOY SCOUTS OF AMERICA

Description of non-cash assistance

Purpose of grant

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<b>Name and address</b>	Knox Trail Council 244 490 Union Ave Framingham, MA 01702	5,670	0
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EIN 04-3308728

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

---

<b>Name and address</b>	Northern New Jersey Council 25 Ramapo Valley Road Oakland, NJ 07436	5,750	0
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EIN 22-3626147

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

---

<b>Name and address</b>	Quivira Council 1555 E 2nd St Wichita, KS 67214	5,950	0
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EIN 23-7147508

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

---

<b>Name and address</b>	Theodore Roosevelt Council 544 Broadway Massapequa, NY 11758	6,000	0
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EIN 11-1631798

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

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<b>Name and address</b>	Greater Yosemite Council 4031 Technology Drive Modesto, CA 95356	6,100	0
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EIN 94-1186155

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

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<b>Name and address</b>	Cherokee Area Council 6031 Lee Highway Chattanooga, TN 37421	6,130	0
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EIN 62-0475671

IRC code section 501(c)(3)

Method of valuation

Description of non-cash assistance

Purpose of grant

**PUBLIC DISCLOSURE**

**Schedule I, Part IV, Statement 1**

**BOY SCOUTS OF AMERICA**

<b>Name and address</b>	North Florida Council 87 521 S Edgewood Ave Jacksonville, FL 32205	6,820	0
<b>EIN</b>	59-0637816		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Chattahoochee Council 1237 1st Avenue Columbus, GA 31901	6,990	0
<b>EIN</b>	58-0601576		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Long Beach Area Council 401 E 37th Street Long Beach, CA 90807	7,000	0
<b>EIN</b>	95-1643981		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Northeast Illinois Council 2745 Skokie Valley Rd Highland Park, IL 60035	7,500	0
<b>EIN</b>	36-2663224		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Yankee Clipper Council 36 Amesbury Road Haverhill, MA 01830	7,548	0
<b>EIN</b>	04-2104393		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Indian Nations Council 488 4295 S Garnett Road Tulsa, OK 74146	7,750	0
<b>EIN</b>	73-0579230		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Calumet Council 8751 Calumet Ave Munster, IN 46321	8,000	0

**PUBLIC DISCLOSURE**

**BOY SCOUTS OF AMERICA**

**Schedule I, Part IV, Statement 1**

**EIN** 35-0867968  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	San Gabriel Valley Council 3450 E Sierra Madre Blvd Pasadena, CA 91107	8,000	0
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**EIN** 95-1643984  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	Patriots' Path Council 358 222 Columbia Turnpike Florham Park, NJ 07932	8,010	0
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**EIN** 22-3661431  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	Indian Waters Council 553 715 Betsy Dr Columbia, SC 29210	9,240	0
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**EIN** 57-0314440  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	Las Vegas Area Council 328 7220 S Paradise Road Las Vegas, NV 89119	9,400	0
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**EIN** 88-0059265  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	Daniel Webster Council 330 571 Holt Ave Manchester, NH 03109	9,590	0
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**EIN** 02-0222115  
**IRC code section** 501(c)(3)

**Method of valuation**  
**Description of non-cash assistance**  
**Purpose of grant**

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<b>Name and address</b>	Northern Star Council 250 393 Marshall Ave St Paul, MN 55102	9,940	0
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**EIN** 20-3000282  
**IRC code section** 501(c)(3)

**Method of valuation**

**PUBLIC DISCLOSURE**

Schedule I, Part IV, Statement 1

BOY SCOUTS OF AMERICA

Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	Great Lakes Council 1776 W Warren Detroit, MI 48208	9,991	0
<b>EIN</b>	38-1359086		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	Katahdin Area Council P O Box 1869 Bangor, ME 04402	10,000	0
<b>EIN</b>	01-0211489		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	Five Rivers Council 375 3300 Chambers Road S Ste 5190 Horseheads, NY 14845	11,070	0
<b>EIN</b>	23-7421969		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	Mid-America Council 12401 West Maple Rd Omaha, NE 68164	12,280	0
<b>EIN</b>	47-0376545		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	La Salle Council 165 1340 South Bend Avenue South Bend, IN 46617	12,980	0
<b>EIN</b>	35-0867966		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance  
Purpose of grant

<b>Name and address</b>	Atlanta Area Council 1800 Circle 75 Pkwy SE Atlanta, GA 30339	13,820	0
<b>EIN</b>	58-0566122		
<b>IRC code section</b>	501(c)(3)		

**Method of valuation**  
Description of non-cash assistance

**PUBLIC DISCLOSURE**

**BOY SCOUTS OF AMERICA**

Schedule I, Part IV, Statement 1

Purpose of grant			
<b>Name and address</b>	American Humanics P O Box 875083 Kansas City, MO 64187	15,000	0
<b>EIN</b>	44-0546869		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Sagamore Council 162 518 N Main St Kokomo, IN 46901	21,120	0
<b>EIN</b>	35-0867972		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Boston Minuteman Council 411 Unquity Road Milton, MA 02186	41,150	0
<b>EIN</b>	04-3184713		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Central New Jersey Council 2245 US Hwy 130 Ste 106 Dayton, NJ 08810	75,000	0
<b>EIN</b>	22-1867008		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	National BSA Foundation 1325 West Walnut Hill Lane Irving, TX 75038	166,667	0
<b>EIN</b>	75-2675978		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			
<b>Name and address</b>	Arrow WV Inc 1325 West Walnut Hill Lane Irving, TX 75038	29,787,413	0
<b>EIN</b>	27-0441319		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Description of non-cash assistance</b>			
<b>Purpose of grant</b>			

**PUBLIC DISCLOSURE**

Schedule I, Part IV, Statement 2

BOY SCOUTS OF AMERICA

Form: Schedule I

22-1576300

Page: 2

Line Number: Part III

**Description of Grants and Other Assistance to Individuals in the United States**

		Number of recipients	Amount of cash grant	Amount of non-cash assistance
Type of grant	Indian Scholarships	179	19,047	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Jones Foundation Scholarships	3	1,995	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Keifer Scholarships	28	22,750	0
Method of valuation				
Description of non-cash assistance				
Type of grant	National Ventruing President 1 Scholarship		1,050	0
Method of valuation				
Description of non-cash assistance				
Type of grant	NESA Scholarships	66	136,625	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Order of the Arrow Special Project Grants	6	8,500	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Maguire Scholarship	166	50,688	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Samuel Pratt Scholarship	16	5,825	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Florida Seabase Scholarships	31	11,000	0
Method of valuation				
Description of non-cash assistance				
Type of grant	World Jamboree Scholarships	50	100,000	0
Method of valuation				
Description of non-cash assistance				
Type of grant	Waite Phillips Grants	816	289,428	0
Method of valuation				
Description of non-cash assistance				

# PUBLIC DISCLOSURE

Schedule I, Part IV, Statement 2

BOY SCOUTS OF AMERICA

Type of grant                      High Adventure Scholarship 1

500

0

Method of valuation

Description of non-cash  
assistance

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**PUBLIC DISCLOSURE**

**SCHEDULE J  
(Form 990)**

**Compensation Information**  
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

BOY SCOUTS OF AMERICA

22-1576300

**Part I Questions Regarding Compensation**

**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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use            |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account                       | <input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

**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. Explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" 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 |

**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:

- |  |           |                                     |                                     |
|--|-----------|-------------------------------------|-------------------------------------|
| <b>a</b> Receive a severance payment or change-of-control payment? . . . . .                             | <b>4a</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . . | <b>4b</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .    | <b>4c</b> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**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:

- |  |           |                          |                                     |
|--|-----------|--------------------------|-------------------------------------|
| <b>a</b> The organization? . . . . .         | <b>5a</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>b</b> Any related organization? . . . . . | <b>5b</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- If "Yes" to line 5a or 5b, describe in Part III.

**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:

- |  |           |                          |                                     |
|--|-----------|--------------------------|-------------------------------------|
| <b>a</b> The organization? . . . . .         | <b>6a</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>b</b> Any related organization? . . . . . | <b>6b</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- If "Yes" to line 6a or 6b, describe in Part III.

**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 . . . . .

**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 . . . . .

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

	Yes	No
1a		
1b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3		
4a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4c	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5b	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6b	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	<input type="checkbox"/>	<input type="checkbox"/>

## PUBLIC DISCLOSURE

**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	(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	(i) Base compensation	(ii) Bonus & incentive compensation				
1 Robert J Mazzuca	(i) 543,341 (ii) 0	0	271,663	137,751	34,657	987,412	0	0	
2 James J Terry Jr	(i) 356,393 (ii) 0	0	340,481	85,912	31,710	814,496	0	0	
3 C Wayne Brock	(i) 381,619 (ii) 0	0	186,677	82,251	22,323	672,870	0	0	
4 Tom Fitzgibbon	(i) 289,937 (ii) 0	90,701	34,845	60,297	32,561	508,341	0	0	
5 Robert A Tuggle	(i) 310,009 (ii) 0	0	109,596	61,205	20,379	501,189	0	0	
6 Don McChesney	(i) 290,593 (ii) 0	0	120,875	50,486	15,945	477,899	0	0	
7 Bradley Farmer	(i) 295,642 (ii) 0	50,000	50,657	49,213	22,622	468,134	0	0	
8 Gary Butler	(i) 268,993 (ii) 0	0	44,801	102,611	26,934	443,339	0	0	
9 Ponce Duran	(i) 256,350 (ii) 0	0	55,874	68,163	31,155	411,542	0	0	
10 Mike Ashline	(i) 263,537 (ii) 0	0	9,009	32,807	25,566	330,919	0	0	
11 John Green	(i) 229,593 (ii) 0	0	31,989	22,214	21,925	305,721	0	0	
Perry Cochell	(i) 205,230 (ii) 0	0	9,164	48,149	27,678	290,221	0	0	
12 Roy L Williams	(i) 0 (ii) 230,833	0	0	0	0	230,833	0	0	
13	(i) 0 (ii) 0	0	0	0	0	0	0	0	
14	(i) 0 (ii) 0	0	0	0	0	0	0	0	
15	(i) 0 (ii) 0	0	0	0	0	0	0	0	
16	(i) 0 (ii) 0	0	0	0	0	0	0	0	

## PUBLIC DISCLOSURE

**Part III Supplemental Information**

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

Schedule J, Part I, Line 1a - Employees who travel extensively are allowed to join the American Airlines Admirals Club for a total of \$2540. The payment of Admirals Club fees were not included in employee compensation. Spouses of key employees are required to attend meetings and their expenses are reimbursed by the company. The Boy Scouts of America is a family oriented organization requiring spousal participation. Their expenses are considered necessary to fulfill the business purpose of the organization. All expenses are substantiated. The reimbursement of these expenses are not included in employee taxable compensation. The total expense for spousal travel during 2011 was \$100,627. Employees traveling with volunteers or overseas are allowed to upgrade to first class to allow the employee to discuss business during the flight. The total first class travel for 2011 was \$81,026 and was not included in employee compensation. The Chief Scout Executive, Deputy Chief Scout Executive/Chief Financial Officer are reimbursed for club dues at the LaCima club which is used for meeting with potential donors, volunteers, and offsite meetings. These expense reimbursements are not included in taxable employee compensation. The total of the LaCima expense in 2011 was \$7,396. Other expenses of \$150 were paid by the organization for cleaning services related to a department directors meeting held at the employee's home. Participants in the non qualified retirement restoration plan have the taxable portion grossed-up to cover the taxes.

Schedule J, Part I, Line 3 - Towers Watson conducted a competitive comparative review of the total compensation of the top executives at the request of the Executive Management Compensation Committee during 2010 and 2011. Towers Watson presented the results which were discussed, approved and documented in the minutes of the 2011 Executive Management Compensation Committee of the Boy Scouts of America, composed of volunteers.

Schedule J, Part I, Line 4 - The BSA's National Executive Board approved a non-qualified, Retirement Benefits Restoration Plan for the benefit of all employees whose benefits would otherwise be limited by the Omnibus Budget Reconciliation Act of 1993. Benefits attributed under the Restoration Plan supplement those accrued under the qualified Retirement Plan and payments do not commence until an employee's retirement. Participants include employees with compensation over \$ 245,000. Robert J Mazzuca \$143,972 restoration plan; James J. Terry Jr. \$62,340 restoration plan, \$63,447 plan 457(f); C. Wayne Brock \$101,682 restoration plan; Mike Ashline \$2,004 restoration plan; Tom Fitzgibbon \$14,833 restoration plan; Robert A Tuggle \$52,710 restoration plan; John Green \$5,343 restoration plan; Bradley Farmer \$24,003 restoration plan; Don McChesney \$51,846 restoration plan; Gary Butler \$21,464 restoration plan and Ponce Duran \$26,648 restoration plan.

**SCHEDULE K  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

**BOY SCOUTS OF AMERICA**

Employer identification number

22-1576300

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
The County Commission of Fayette County <b>A (WV)</b>	55-6000314		11/05/2010	50,000,000	Construction and equipping of the Summit Bechtel Family National Scout Reserve		✓		✓		✓
The County Commission of Fayette County <b>B (WV)</b>	55-6000314		11/05/2010	50,000,000	Construction and equipping of the Summit Bechtel Family National Scout Reserve		✓		✓		✓
<b>C</b>											
<b>D</b>											

**Part II Proceeds**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired . . . . .		0		0				
2 Amount of bonds legally defeased . . . . .		0		0				
3 Total proceeds of issue . . . . .		50,000,000		50,000,000				
4 Gross proceeds in reserve funds . . . . .		0		0				
5 Capitalized interest from proceeds . . . . .		1,189,802		1,606,766				
6 Proceeds in refunding escrows . . . . .		0		0				
7 Issuance costs from proceeds . . . . .		0		0				
8 Credit enhancement from proceeds . . . . .		0		0				
9 Working capital expenditures from proceeds . . . . .		0		0				
10 Capital expenditures from proceeds . . . . .		50,000,000		20,121,463				
11 Other spent proceeds . . . . .		0		0				
12 Other unspent proceeds . . . . .		0		29,878,537				
13 Year of substantial completion . . . . .	2013		2013		2013		2013	

14 Were the bonds issued as part of a current refunding issue? . . . . .		✓		✓				
15 Were the bonds issued as part of an advance refunding issue? . . . . .		✓		✓				
16 Has the final allocation of proceeds been made? . . . . .	✓		✓					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . .	✓		✓					

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . . . . .		✓		✓				
2 Are there any lease arrangements that may result in private business use of bond-financed property? . . . . .		✓		✓				

**PUBLIC DISCLOSURE**

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? . . . . .		✓		✓				
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? . . . . .		✓		✓				
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . . . . .		0 %		0 %				%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . . .		0 %		0 %				%
<b>6</b> Total of lines 4 and 5 . . . . .		0 %		0 %				%
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? . . . . .	✓		✓					

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? . . . . .		✓		✓				
<b>2</b> Is the bond issue a variable rate issue? . . . . .		✓		✓				
<b>3a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? . . . . .		✓		✓				
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of hedge . . . . .								
<b>d</b> Was the hedge superintegrated? . . . . .								
<b>e</b> Was the hedge terminated? . . . . .								
<b>4a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? . . . . .		✓		✓				
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of GIC . . . . .								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . . . . .								
<b>5</b> Were any gross proceeds invested beyond an available temporary period? . . . . .		✓		✓				
<b>6</b> Did the bond issue qualify for an exception to rebate? . . . . .		✓		✓				

**Part V Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . .

**Part VI Supplemental Information.** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

**PUBLIC DISCLOSURE**

**SCHEDULE L  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open To Public  
Inspection**

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
<b>Total</b>				▶ \$ _____						

**Part III Grants or Assistance Benefiting Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

**PUBLIC DISCLOSURE**

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) AT&T Mobility	President and CEO on BSA Bd	594,274	Telephone Service		✓
(2) AT&T	Chairman and CEO on BSA Bd	1,244,081	Telephone Services and Sponsorsh		✓
(3) Hewlett Packard	Board Member on BSA Bd	146,853	Purchased computers		✓
(4) Marriott Corporation	Board Member on BSA Bd	1,805,698	Hotel rooms during travel and meet		✓
(5) American Airlines	Board Member on BSA Bd	3,456,759	Air travel		✓
(6) Microsoft	Board Member on BSA Bd	100,243	Purchased computer software		✓
(7) Pepsi Cola Company	Board Member on BSA Bd	132,873	Purchased supplies		✓
(8) Heritage Institute	Key employee co-founder	11,780	Training materials		✓
(9)					
(10)					

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

Schedule L, Part III - Flowers, books, and small gifts of appreciation were given during 2011 to some board members which did not exceed \$6,000 in total.

Schedule L, Part IV - Some members of the BSA Board of Directors are also on the boards of other organizations with which the BSA does business. Transactions are in the normal course of business and subject to the normal purchasing policies and procedures of the National council, which include but are not limited to, solicitation of competitive bids for expenditures which exceed a dollar threshold. Some members of the BSA Board of Directors have pledged or donated money to the organization. As appropriate, Schedule B reports the details of these transactions.

**PUBLIC DISCLOSURE**

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2011**

**Open To Public  
Inspection**

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**BOY SCOUTS OF AMERICA**

Employer identification number  
**22-1576300**

**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 . . . . .				
7 Boats and planes . . . . .				
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 ▶ (Caterpillar Equipmen)	✓	1	1,061,174	Estimated FMV
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** **2**

	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? . . . . .		✓
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? . . . . .	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	✓	
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.		

**PUBLIC DISCLOSURE**

**Part II** **Supplemental Information.** Complete this part to 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, Line 32b - Agreement IAA to accept used automobiles and sell or provide to local councils for their use.

Area with horizontal dashed lines for supplemental information.

PUBLIC DISCLOSURE

SCHEDULE O  
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

Form 990, Part VI, Section B, Line 11b - Form 990 was reviewed and approved by the Controller and National Legal Counsel. An executive summary was prepared and that, along with Form 990 in its entirety, was distributed to the Officers and the Audit Committee for their review. PricewaterhouseCoopers reviewed and signed Form 990 as paid preparer. Finally, Form 990 was distributed to all Executive Board members before it was filed.

Form 990, Part VI, Section B, Line 12c - Annually a conflict of interest policy confirmation is required of the organizations Executive Board Members and employees responsible for every department. The organization uses an outside company for anonymous reporting of potential ethics violations.

Form 990, Part VI, Section B, Line 15 - Towers Watson conducted a competitive comparative review of the total compensation of the top executives at the request of the Executive Management Compensation Committee during 2010 and 2011. Towers Watson presented the results which were discussed, approved and documented in the minutes of the 2011 Executive Management Compensation Committee of the Boy Scouts of America, composed of volunteers.

Form 990, Part VI, Section C, Line 19 - Available upon request.

Form 990, Part VII, Section A, Line 1a - Payments to Former Officers, Directors, Trustees, and Key Employees are made by separate related organizations (retirement plan) and are not included in Form 990, Part IX, Line 5 or Part I Line 15.

Form 990, Part XI, Line 5 - Net unrealized losses on investments.

# PUBLIC DISCLOSURE

Schedule O, Statement 1

Form: 990

Page: 2

Line Number: Part III Line 4d

BOY SCOUTS OF AMERICA

22-1576300

## Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Marketing - Administration of public relations, including providing news releases, features for print and broadcast media, and internal news in the form of newsletters, fact sheets, and the annual report for the nationwide Scouting family.	15,287,474	32,124	27,183
	Scouting Programs: Insurance Costs Born for National and Local Councils - The National Council subsidized the group medical, dental, and life insurance programs for its employees and retirees. In addition, the National Council subsidized a general liability insurance program primarily for the benefit of local councils.	69,432,077	24,010	13,846,319
	Scouting Programs: World Bureau Fees - The registration fee that Boy Scouts of America annually pays the World Organization of the Scouting Movement (WOSM) is based on an established fee of registered uniformed adult and youth members. This registration fee supports international enrichment programs for the youth and adult membership. These programs include World Jamborees, National Association encampments, international training programs and conferences, program related magazines, brochures and pamphlets.	1,395,013	0	0
<b>Total:</b>		<b>86,114,564</b>	<b>56,134</b>	<b>13,873,502</b>

**PUBLIC DISCLOSURE**

Schedule O, Statement 2

BOY SCOUTS OF AMERICA

Form: 990

22-1576300

Page: 6

Line Number: Part VI Section C Line 17

**States Where Copy Of Return Is Filed**

**States**

AK

AL

AR

AZ

CA

CO

CT

FL

GA

IL

IN

KY

LA

MA

MD

MN

MS

NC

ND

NH

NJ

NM

NY

OH

OK

OR

PA

PR

RI

SC

TN

UT

VA

WA

WV

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

BOY SCOUTS OF AMERICA

**Related Organizations and Unrelated Partnerships**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Employer identification number  
22-1576300

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

(a) Name, address, and EIN 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
(1) BSA Asset Management LLC (26-2473220) 1325 West Walnut Hill Lane, Irving, TX 75038-3008	General Partner/Investments	DE	0	0	N/A
(2) Atikokan Youth Ventures Inc. PO Box 509, Ely, MN 55731	Non-Profit Youth Organization	Canada	0	0	N/A
(3) Atikaki Youth Ventures Inc. PO Box 509, Ely, MN 55731	Non-Profit Youth Organization	Canada	0	0	N/A
(4)					
(5)					
(6)					

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to 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
(1) Learning for Life (75-2396057) 1329 West Walnut Hill Lane, Irving, TX 75038	Youth development.	DC	501(c)(3)	7	N/A		✓
(2) National Boy Scouts of America Foundation (75-2675978) 1325 West Walnut Hill Lane, Irving, TX 75038-3008	Support Scouting	DC	501(c)(3)	7	N/A		✓
(3) Learning for Life Foundation (26-2270708) 1329 West Walnut Hill Lane, Irving, TX 75038	Support Learning for Life programs.	TX	501(c)(3)	7	Learning for Life		✓
(4) Scout Executives Alliance (22-6069455) PO Box 152079, Irving, TX 75015-2079	Support Scouts' employees	TX	501(c)(9)		N/A	✓	
(5) Boy Scouts of America Employee Welfare Benefits Plan (75-23478) P O Box 152079, Irving, TX 75015-2079	Welfare Benefits Plan	TX	501(c)(9)		N/A	✓	
(6) Arrow WV Inc. (27-0441319) 1325 West Walnut Hill Lane, Irving, TX 75038-3008	Develop program & facility for Boy Scouts	WV	501(c)(3)	7	N/A		✓
(7) BSA Endowment Master Trust (27-6850785) 1325 West Walnut Hill Lane, Irving, TX 75038-3008	Support Scouting	DE	501(c)(3)	7	N/A		✓

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

Cat. No. 50135Y

Schedule R (Form 990) 2011

PUBLIC DISCLOSURE

**Part III** Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) BSA Commingled 1325 West Walnut Hill	Endowment investment	DE	N/A	Excluded	16,130,368	375,772,178		✓			✓	83.797%
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

**Part IV** Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) _____							
(2) _____							
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
<b>1</b>	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?		
<b>a</b>	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	✓	
<b>b</b>	Gift, grant, or capital contribution to related organization(s)	✓	
<b>c</b>	Gift, grant, or capital contribution from related organization(s)	✓	
<b>d</b>	Loans or loan guarantees to or for related organization(s)	✓	
<b>e</b>	Loans or loan guarantees by related organization(s)		✓
<b>f</b>	Sale of assets to related organization(s)		✓
<b>g</b>	Purchase of assets from related organization(s)		✓
<b>h</b>	Exchange of assets with related organization(s)		✓
<b>i</b>	Lease of facilities, equipment, or other assets to related organization(s)		✓
<b>j</b>	Lease of facilities, equipment, or other assets from related organization(s)	✓	
<b>k</b>	Performance of services or membership or fundraising solicitations for related organization(s)	✓	
<b>l</b>	Performance of services or membership or fundraising solicitations by related organization(s)		✓
<b>m</b>	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	✓	
<b>n</b>	Sharing of paid employees with related organization(s)	✓	
<b>o</b>	Reimbursement paid to related organization(s) for expenses		✓
<b>p</b>	Reimbursement paid by related organization(s) for expenses	✓	
<b>q</b>	Other transfer of cash or property to related organization(s)	✓	
<b>r</b>	Other transfer of cash or property from related organization(s)		✓

<b>2</b>	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	See Schedule R, Part VII, Statement 1			
(2)				
(3)				
(4)				
(5)				
(6)				

**PUBLIC DISCLOSURE**

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													



**PUBLIC DISCLOSURE**

Schedule R, Part VII, Statement 1

BOY SCOUTS OF AMERICA

Form: Schedule R

22-1576300

Page: 3

Line Number: Part V Line 2

**Description of Covered Relationships and Transaction Thresholds**

		Amount involved
<b>Name</b>	Scout Executives Alliance	12,000
<b>Transaction type</b>	m	
<b>Method of determining amount involved</b>	Estimated FMV.	
<b>Name</b>	Scout Executives Alliance	549,149
<b>Transaction type</b>	r	
<b>Method of determining amount involved</b>	Per tax return of Scout Executives Alliance.	
<b>Name</b>	Boy Scouts of America Employee Welfare Benefits Plan	62,121,232
<b>Transaction type</b>	r	
<b>Method of determining amount involved</b>	Cash transactions per tax return of related organization.	
<b>Name</b>	BSA Commingled Endowment Fund LP	3,411,664
<b>Transaction type</b>	q	
<b>Method of determining amount involved</b>	Per tax return of related organization.	
<b>Name</b>	BSA Commingled Endowment Fund LP	14,692,745
<b>Transaction type</b>	r	
<b>Method of determining amount involved</b>	Per tax return of related organization.	
<b>Name</b>	BSA Commingled Endowment Fund LP	4,542,621
<b>Transaction type</b>	a-i	
<b>Method of determining amount involved</b>	Per tax return of related organization.	
<b>Name</b>	Arrow WV Inc	12,699,427
<b>Transaction type</b>	d	
<b>Method of determining amount involved</b>	Per tax return of related organization.	
<b>Name</b>	Arrow WV Inc	29,787,413
<b>Transaction type</b>	q	
<b>Method of determining amount involved</b>	Per tax return of related organization.	

**PUBLIC DISCLOSURE**

Form **8868**

(Rev. January 2012)

Department of the Treasury  
Internal Revenue Service

**Application for Extension of Time To File an Exempt Organization Return**

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. <b>Boy Scouts of America</b>	Employer identification number (EIN) or <input checked="" type="checkbox"/> <b>22-1576300</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>PO Box 152079</b>	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Irving, Texas 75015-2079</b>	
	File by the due date for filing your return. See instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return)  0  1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ Stephanie Phillips, Controller

Telephone No. ▶ 972-580-2300 FAX No. ▶ 972-580-2129

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year 20 11 or  
▶  tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**PUBLIC DISCLOSURE**

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. <b>Boy Scouts of America</b>	Employer identification number (EIN) or <input checked="" type="checkbox"/> <b>22-1576300</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1325 West Walnut Hill Lane</b>	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Irving, Texas 75038-3008</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **Stephanie Phillips, Controller**  
Telephone No. **972-580-2300** FAX No. **972-580-2129**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until November 15, 20 12.
- For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.
- If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period
- State in detail why you need the extension Additional time is needed to gather the information necessary to prepare a complete and accurate return.

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b> \$ <b>0</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b> \$ <b>0</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b> \$ <b>0</b>

**Signature and Verification must be completed for Part II only.**

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

Signature Stephanie Phillips Title **Controller** Date 7/9/12  
Form **8868** (Rev. 1-2012)