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

		3-E0	Exempt Or	rganizatio	on Declarati lectronic Fil	on and		e for	OMB No. 1545-1879
			For calendar year 2012, o	or tax year begin	ining 01/01 . 2	2012, and end	ng 12/31	, 20 12	2012
	nent of th Revenue	e Treasury	For use v	with Forms 9	90, 990-EZ, 990-F	PF, 1120-P	OL, and 8868		
		organizatio	1					Employer ide	ntification number
BOYS	COUT	OF AME	RICA						22-1576300
Part	0	Type of	Return and Return	Information	n (Whole Dollars	Only)			
check leave I	the bo	x on line 2b, 3b,	1a, 2a, 3a, 4a, or 5a	below and the sapplicable, I	e amount on that blank (do not ente	line of the	return being fi	led with this	from the return. If you form was blank, then , then enter -0- on the
2a F	orm 9		eck here ► 🔲 b	Total revenu	if any (Form 990, Fue, if any (Form 99	0-EZ, line 9)	9	1b 191,960,296 2b
					(Form 1120-POL, on investment inc				3b
		868 chec			orm 8868, Part I, li				5b
Part	II I	Declarat	ion of Officer					S	
6	withourga I must date	drawal (di nization's st contact . I also au	e U.S. Treasury and its rect debit) entry to the federal taxes owed on the U.S. Treasury Fina thorize the financial ins cessary to answer inqui	e financial ins this return, an ancial Agent at stitutions invol	stitution account in d the financial insti : 1-888-353-4537 n ved in the process	ndicated in tution to del to later than sing of the e	the tax prepai bit the entry to 2 business da lectronic paym	ration softwa this account ys prior to th	are for payment of the a. To revoke a payment, be payment (settlement)
	exec	uted the e	s return is being filed w lectronic disclosure co ally identified in Part I a	nsent containe	ed within this return	allowing di	s part of the IR sclosure by the	S Fed/State e IRS of this	program, I certify that I Form 990/990-EZ/990-
organiza correct, return. I to the II	ation's , and c I conse RS and	2012 electromplete. omplete. nt to allow to receive	ury, I declare that I a tronic return and accon further declare that the my intermediate service from the IRS (a) an a eturn or refund, and (c)	mpanying sche he amount In ice provider, to acknowledgem	edules and stateme Part I above is the ransmitter, or elect- nent of receipt or re	nts, and to to amount sh ronic return	he best of my own on the co originator (ER	knowledge a opy of the oi O) to send th ransmission,	nd belief, they are true, ganization's electronic ne organization's return
	, 3	griature o	Ollicer O		Date		Title		
Part II	D	eclarati	on of Electronic Re	eturn Origin	ator (ERO) and	Paid Pre	parer (see in	structions)	
my know on the r informat IRS e-fill organiza	wledge, return. tion to t le Provi ation's i	If I am or The organ be filed wi ders for E return and	ewed the above organily a collector, I am not alization officer will have the the IRS, and have for usiness Returns. If I are accompanying schedularer declaration is base	responsible for re signed this illowed all other m also the Pai ules and state	or reviewing the return form before I submorer requirements in Find Preparer, under prents, and to the	urn and only mit the retu Pub. 4163, N penalties of best of my	declare that the rn. I will give the fodernized e-F perjury I decla knowledge and	nis form accu the officer a ile (MeF) Info tre that I hav	rately reflects the data copy of all forms and rmation for Authorized e examined the above
	ERO's) 2	Ì	Date	Check if	Check if	ERO's SSN o	or PTIN
ERO's	signatu	re				also paid preparer	self- employed		
Use	yours if	ame (or self-employ	od),					EIN	
Only Under pe	address nalties (, and ZIP co of perjury, i	declare that I have exam	nined the above	return and accompa	inying schedi	les and stateme	Phone no. ents, and to th	ne best of my knowledge
	г, глеу а Т		rect, and complete. Decla			ormation of		rer nas any kn	
Paid			oreparer's name SCHOONMAKER		r's signature		Date 11/13/1	.3 Check	IDOOUEOJOE
Prepai	rer	Firm's nam						Firm's El	12 4000324
Use O	IIIV T	Firm's addr			UITE 2350 FC	RT WORT	н тх 7610		
Delete	6 -4	and Dec-	necessis Dankenston A . s. s.c.	- 4f 4 · · ·		_			- 04E2 EO

Form **990**

Return of Organization Exempt From Income Tax

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

2012

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service benefit trust or private foundation)

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

For the 2012 calendar year, or tax year beginning 01/01 2012, and ending 20 12 Check if applicable: C Name of organization BOY SCOUTS OF AMERICA D Employer identification number Address change Doing Business As 22-1576300 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change Initial return 1325 West Walnut Hill Lane 972-580-2000 City, town or post office, state, and ZIP code Terminated Amended return G Gross receipts \$ 2,231,678,706 F Name and address of principal officer: Application pending Robert A Tuggle H(a) Is this a group return for affiliates? ☐ Yes ✓ No H(b) Are all affiliates included? Yes No 1325 West Walnut Hill Lane, Irving, TX 75038-3008 If "No," attach a list. (see instructions) ✓ 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ www.Scouting.org H(c) Group exemption number ▶ Form of organization: V Corporation Trust Association ☐ Other ▶ L Year of formation: 1910 M State of legal domicile: TX Part I Summary Briefly describe the organization's mission or most significant activities: 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 Activities & Governance 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. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 74 Number of independent voting members of the governing body (Part VI, line 1b) 4 68 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 3,868 Total number of volunteers (estimate if necessary) 6 1,067,513 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -2,868,653 Net unrelated business taxable income from Form 990-T, line 34 7b -3,125,794 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 101,825,476 64,098,438 Revenue Program service revenue (Part VIII, line 2a) 9 61,295,148 58,123,283 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 10 24,525,049 33,882,332 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 30,650,729 35,856,243 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 191,960,296 12 218,296,402 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 32,106,877 22,208,019 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 72,029,338 71,632,158 16a Professional fundraising fees (Part IX, column (A), line 11e) 1,082,267 759,124 Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,633,580 b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 134,285,726 146,300,580 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 239,504,208 240,899,881 19 Revenue less expenses. Subtract line 18 from line 12 -21,207,806 -48,939,585 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,023,031,961 1,286,604,090 21 Total liabilities (Part X, line 26) . . . 345,464,127 618,128,595 Net assets or fund balances. Subtract line 21 from line 20 22 677,567,834 668,475,495 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 Signature of officer Date Here Robert A Tuggle, CFO Type or print name and title Print/Type preparer's name Preparer's signature Date **Paid** Check [if self-employed Preparer Firm's name Firm's EIN ▶ **Use Only** Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part	
_	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
~	1 F 000 000 F70
3	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 43,376,903 including grants of \$ 694,689) (Revenue \$ 2,886,510)
70	
	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 \$10,639,897 including grants of \$17,400) (Revenue \$10,210)
12	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.

	•••••••••••••••••••••••••••••••••••••••
4c	(Code:) (Expenses \$ 65,807,610 including grants of \$ 21,354,325) (Revenue \$ 37,724,834)
	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, 2012, there were youth registered in 2,658,
	794 individual programs served by adult leaders registered in 1,067,513 individual programs for a grand total of 3,726,307.
	The state of the s

4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 1
70	
4e	
70	Total program service expenses ► 205,764,118

205,764,118

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	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	1	
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	5		1
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	6		1
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	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	1	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
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	10	/	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	/	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	10.00
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	1	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1 - 2 - 2 - 1		
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	1	
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	15	1	
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	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	(S.V)	1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		./
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Y

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

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			. \square
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 733			5 =
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		18	Jac.
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	V. S.	HAT.	
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		tk- i	100
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3868	177	136	197
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	1	
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	1	
b	If "Yes," enter the name of the foreign country: ▶ Bahamas, Canada		NG I	
	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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	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 as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	inno	witte	L.X
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year		100	
е	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	1	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	illa s		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1381	15.3	all large
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	(resp)	Des.	place h
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		1000
10	Section 501(c)(7) organizations. Enter:	TELS.	200	111
a b	Initiation fees and capital contributions included on Part VIII, line 12	1.11	8.80	200
ា1		Mary.		
a a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			73.21
b	Gross income from members or shareholders			1917
~	against amounts due or received from them.)	200		ight.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	DESCRIPTION OF THE PERSON OF T	H11 SE
b		124	10000	Hertin
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Sec. 4		WE'S
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		Shark S
а	Note. See the instructions for additional information the organization must report on Schedule O.	104	776-9	The h
b	Enter the amount of reserves the organization is required to maintain by the states in which	X BY	Par	THE TAX
-	the organization is licensed to issue qualified health plans		45	13 0
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule</i> O	14a		V
	The rest and a restrict to report these payments in the provide an explanation in schedule O	ועדו		(

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. 74 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. Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? ✓ 8h 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. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No Did the organization have local chapters, branches, or affiliates? 10a 1 If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 1 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 1 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 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 16b 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 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Another's website ✓ Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Stephanie Phillips, (972)580-2300

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

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.

(A)	(B)	/do n	ot of	Pos	C) iition	e than (one	(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, office	unles	ss pe	rson	is both or/trus	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Anderson W Chandler	1									
Natl Exec Board Member	0	1						0	0	0
Arthur F Oppenheimer	1	96								
Natl Exec Board Member	0	1						0	0	0
Aubrey B Harwell Jr	1									
Treasurer and Natl Exec Board Member	2	1		1				0	0	0
Aubrey B Patterson	1									
Natl Exec Board Member	0	✓						0	0	0
B Howard Bulloch	1									
Natl Exec Board Member	1	✓						0	0	0
Bruce D Parker	1									
Vice President and Natl Exec Board Member	0	1		1				0	0	0
C Travis Traylor Jr	. 1									
Natl Exec Board Member	0	✓						0	0	0
Charles H Smith	1									
Natl Exec Board Member	0	1						0	0	
Christian H Poindexter	1	,,								
Natl Exec Board Member	0	✓						0	0	0
D Kent Clayburn	1									
Natl Exec Board Member	0	1						0	0	0
David L Beck	1							F1		
Natl Exec Board Member	0	✓						0	0	0
David M Weekley	1									
Natl Exec Board Member (Jan-May 2012)	0	✓						0	0	0
Dennis H Chookaszian	1									·
Natl Exec Board Member	0	1						0	0	0
Donald D Belcher	1									
Natl Exec Board Member	0	1						0	o	0

				(C)					
(A) Name and Title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Douglas B Mitchell	1									
Natl Exec Board Member	0	✓						0	0	0
Douglas H Dittrick	1									
Natl Exec Board Member	0	1						0	0	0
Drayton McLane Jr	1									
Vice President and Natl Exec Board Member	0	1		1				0	0	0
Earl G Graves	1									
Vice President and Natl Exec Board Member	0	✓		1				0	0	0
Francis H Olmstead Jr	1									
Natl Exec Board Member Jan-May 2012	0	✓						0	0	0
Francis R McAllister	1									
Natl Exec Board Member	0	✓						0	0	0
Frank Ramirez	1									
Natl Exec Board Member	0	✓						0	0	0
Gary E Wendlandt	1									
Natl Exec Board Member	0	1						0	0	0
George F Francis III	1									
Natl Exec Board Member	0	1						0	o	0
Gerald J Voros	1									
Natl Exec Board Member	0	1						0	0	0
Harriss A Butler III	1									
Natl Exec Board Member (May - Dec 2012)	0	1						0	o	0
Henry A Rosenberg Jr	1									
/ice President and Natl Exec Board Member	1	1		1				0	0	0
Brett Harvey	1									
Nati Exec Board Member	1	1						0	o	0
lack D Furst	1	15								1192
/ice President-Outdoor Adventures and Natl Exec		1		1				0	. 0	0

				(C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any hours for	요절	5	0	~	皇王	F	from the	related organizations	other compensation
	related	divid	stitu	Officer	y er	ghes	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted		tion		Key employee	yee yee	-	(W-2/1099-MISC)		organization and related
	line)	trus	al to		уее	mp				organizations
		tee	Institutional trustee			Highest compensated employee				
				H		ů.				
James D Rogers	1	10.40								
Natl Exec Board Member	0	1						0	0	0
James S Turley	1									
International Commissioner and Natl Exec Board N	0	✓		1				0	0	0
James S Wilson	11									
Natl Exec Board Member	0	✓						0	0	0
David L Steward	11									
Natl Exec Board Member (May-Dec 2012)	0	✓						0	0	0
John C Cushman III	1									
Natl Exec Board Member	0	1						0	0	0
William W Stark Jr	11									
Natl Exec Board Member (May-Dec 2012)	0	✓						0	0	0
John Gottschalk	11									
Natl Exec Board Member	0	✓						0	0	0
John R Donnell Jr	1	-								
Natl Exec Board Member	0	✓						0	0	0
Jon E Barfield	1									
Natl Exec Board Member	0	✓						0	0	0
Jose F Nino	1									
Natl Exec Board Member	0	1						0	0	0
Joseph P Landy	1									
Natl Exec Board Member	0	✓						0	0	0
Keith A Clark	1									
Natl Exec Board Member	0	1						0	0	0
L B Eckelkamp Jr	1									
Natl Exec Board Member	0	1						0	0	0
Larry W Keliner	11									
Natl Exec Board Member (Jan-May 2012)	0	1						0	0	0

				(C)		=			
(A) Name and Title	(B) Average hours per	box,	unles	Pos neck ss pe	ition more	e than o is both or/trus	n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Lyle R Knight	1									
Vice President-Human Resources and Natl Exec B	1 1	1		1				0	0	0
Mark P Mays	1									
Natl Exec Board Member	0	1						0	0	0
Marshall M Sloane	1									
Natl Exec Board Member	0	1						0	0	0
Matthew K Rose	1									
Vice President and Natl Exec Board Member	1	✓		1				0	0	0
Michael D Harris Esq	1									
Natl Exec Board Member	0	1						0	0	0
Nathan O Rosenberg	1									
Vice President-Marketing and Natl Exec Board Mer	0	1		1				0	0	0
O Temple Sloan Jr	1									
Vice President-Supply and Natl Exec Board Member	0	1		1				0	0	0
Philip M Condit	1									
Natl Exec Board Member	0	1						0	o	0
R Michael Daniel	1									
Natl Exec Board Member	0	1						0	o	0
R Ray Wood	1									
Natl Exec Board Member	0	1						0	o	0
R Thomas Buffenbarger	1									
Assistant Treasurer and Natl Exec Board Member	0	1		1				0	0	0
Ralph de la Vega	1									
Natl Exec Board Member	0	1						0	o	0
Randall L Stephenson	1									
Vice President-Finance and Natl Exec Board Memb	1	1		1				0	o	0
Rex W Tillerson	1									
President (Jan-May 2012) and Natl Exec Board Mer		1		1				0	o	. 0
		_				-	_			Form 990 (2012)

				(C)					
(A)	(B)			Pos	sition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any hours for	970	Ins	9	T _e	en H	Fo	from the	related organizations	other compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ual t	iona		oldt	ee t cor	(C.B.	(W-2/1099-MISC)		organization and related
	line)	rust	1		yee	npe				organizations
		e	stee			Highest compensated employee				
	22									
Richard L Burdick	11	,							_	_
Natl Exec Board Member	0	/			-		-	0	0	0
Robert H Reynolds	1	1								
Natl Exec Board Member	0	V	Н					0	0	0
Robert J LaFortune	1	1								
Natl Exec Board Member	0	٧						0	0	0
Robert J Mazzuca	40	1		1				4 704 000		407.075
Chief Scout Executive and Natl Exec Board Memb		ν		Ψ.	-			1,781,092	0	137,675
Robert J Smith Natl Exec Board Member (Jan-May 2012)	0	1								
Da ann M. Calarinan	1	•				-		0	0	0
Roger M Schrimp Natl Exec Board Member	0	1						0	0	70
Roland Smith	1		=						U	0
Natl Exec Board Member	0	1						0	o	0
Ronald K Migita	1	7.00							0	
Natl Exec Board Member	0	1						0	o	0
Ronald O Coleman	1	-							0	
Natl Exec Board Member	0	1	1					0	0	0
Roy S Roberts	1									
Natl Exec Board Member	0	1						0	0	0
Scott D Oki	1							T.	2.5	<u></u>
Natl Exec Board Member	0	1						0	o	0
Stephen B King	1									
VP (May-Dec 2012) and Natl Exec Board Member	0	1		1				0	0	0
Stephen G Hanks	1									
Natl Exec Board Member	0	1						0	0	0
Stephen Hemsley	1									
Natl Exec Board Member (Jan-May 2012)	0	1						0	0	0

(A) Name and Title	(B) Average hours per	box,	unles	Pos neck ss pe	rson	e than o is both or/trus	an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Steven E Weekes	1									
Natl Exec Board Member	0	1						0	0	0
Steven R Rogel	1									
Natl Exec Board Member (Jan-May 2012)	0	1						0	0	0
T Michael Goodrich	1		П							
Natl Exec Board Member	0	1						0	o	0
Terrence P Dunn	1							10.50		
Vice President-Council Operations and Natl Exec E	2	1		1				0	0	0
Thomas S Monson	1									
Natl Exec Board Member	0	1						0	0	0
Tico A Perez	1									
National Commissioner and Natl Exec Board Memb		1		1				0	0	0
Togo D West Jr	1									
Natl Exec Board Member (Jan-May 2012)	0	1						0	0	0
Wayne M Perry	1									11.61
President (May-Dec 2012) Pres-Elect (Jan-May 201)	3	1		1				0	0	0
William F Cronk	1									
Natl Exec Board Member	0	1						0	o	0
C Wayne Brock	40									
Chief Scout Executive (Sept-Dec 2012) and ACSE/0	11	1		1				647,757	o	276,689
John D Finch	1							3.341.33		
Natl Exec Board Member	0	1						0	o	0
Bradley E Haddock	1									
Natl Exec Board Member	0	1						0	o	0
R Doyle Parrish	1		\neg							
Natl Exec Board Member	0	1						0	0	0
John Green	40		\neg							-
Group Director - Outdoor Adventures	0				1			314,549	0	147,572

Par	Section A. Officers, Directors, Trus	stees, Key E	mplo	yees	s, a	nd F	lighe	st C	Compensated E	mployees	(continue	ed)
						C)						
	(A)	(B)	/	_4 _6		ition			(D)	(E)		(F)
	Name and title	Average	١,				e than is botl		Reportable	Reportat	ole	Estimated
		hours per week (list any	office	er and		lirect	or/trus	tee)	compensation from	compensatio related	- 1	amount of other
		hours for	유교	Ins	Officer	X e	em	Fo	the	organizati		compensation
		related	ivid	titut	icer	y en	ploy	Former	organization	(W-2/1099-I		from the
		organizations below dotted	tor t	iona		Key employee	ee t co	1	(W-2/1099-MISC)			organization and related
		line)	Individual trustee or director	Institutional trustee		yee	mpe					organizations
			0	stee			Highest compensated employee					
Bradl	ey Farmer	40					Ď,					
	Development	6				1			407,774		0	129,748
	Ashline	40						П				
Supp	y Group Director	0				1			290,532		o	75,826
Perry	Cochell	40										
Direct	or, Office of Philanthropy	0				1			220,555		0	115,520
	t A Tuggle	40										
CFO		0				1		_	507,764		0	159,412
	rd Mathews	40							C20011-24-20-12-12-12-12-12-12-12-12-12-12-12-12-12-			
	y Legal Counsel	3				/			274,609		0	103,414
	itzgibbon	40					,					
-	nal Director	0					/	H	366,883		0	161,778
	lcChesney	40					1		420.050			120,000
Gary	nal Director	40		\dashv					438,059		0	136,068
	Council Operations	2					1		341,613		0	162,524
	Duran	40					34.52		341,013		U	102,324
	nal Director	0					1		336,949		0	189,794
Al Lar	5.00 (**)	40							000,010			100,104
Regio	nal Director	0					1		335,159		0	123,816
James	J Terry Jr	11										
Forme	r ACSE and CFO	0						1	88,274		0	0
1b	Sub-total							•	6,351,569		0	1,919,836
C	Total from continuation sheets to Part											
d	Total (add lines 1b and 1c)						34	•	6,351,569		0	1,919,836
2	Total number of individuals (including bu			ose	list	ed a	above	e) wl	ho received mo	ore than \$1	00,000	of
-	reportable compensation from the organ	ization > 17	12		_							Yes No
3	Did the organization list any former of	fficer, direct	or. o	r trı	iste	e. I	kev e	emp	lovee, or high	est compe	ensated	Tes No
-	employee on line 1a? If "Yes," complete											3 🗸
4	For any individual listed on line 1a, is the											
	organization and related organizations											
	individual											4 /
5	Did any person listed on line 1a receive of									ation or inc	dividual	
	for services rendered to the organization	? If "Yes," co	omple	ete S	Sch	edu	le J f	or s	uch person .	9 18 18 08	900 1905	5 1
	n B. Independent Contractors										4	
1	Complete this table for your five highest compensation from the organization. Rep											
	year.	on comper	isalio	11 10	rui	e ca	ienu	ai y	ear ending will	i or within	ine orga	inization's tax
	(A)								(B)			(C)
	Name and business add	ress							Description of se	ervices	С	ompensation
DELL	MARKETING LP, PO BOX 676021, DALLAS,	TX 75267						Con	nputer Consulti	ng		3,136,513
	E COMMUNITY SERVICES LLC, 413 OAK HI		2					777	ject Manageme	nt		1,207,072
	en Arps Slate Meagher and Flom LLP, PO Bo								orney			1,880,851
	ABE WILLIAMSON & WYATT PC, 1211 SW F				1900), Pc						1,171,810
STEPT 2	OE & JOHNSON PLLC, PO BOX 247, BRIDG Total number of independent contracto				# D	mi+c			orney	vo) who	- Spott	1,012,857
	received more than \$100,000 of compens							uik	use listed about	ve, wild		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		:	<u> </u>					73			The second line is not been as a second line in the second line in the second line in the second line is not been as a second line in the second line in the second line is not been as a second line in the second line in the second line is not been as a second line in the second line in the second line is not been as a second line in the second line is not been as a second line in the second line is not been as a second line in the second line in the second line is not been as a second line in the second line is not been as a second line in the second line is not been as a second line in the second line is not been as a second line in the second line is not been as a second line is not been as a second line in the second line is not been as a second line in the second line is not been as a

Part VIII	Statement of Revenue
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		Check if Schedule O	contains a re	espo	nse to any questi	o <mark>n i</mark> n this Part VI	IL	((e)) <u>e</u> :	
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Grants	1a	Federated campaigns	S	1a	248,313		THE BY IT I		
3rai iour	b	Membership dues .		1b	54,831,843	13			
is, (С	Fundraising events .		1c	0		District Child		
Giff	d	Related organizations		1d	608,991		1 1 1 1	The State of State of	
ns,	е	Government grants (cor		1e	0		The same of	- 1-30-3 FW	
itio	f	All other contributions, g							
년 본		and similar amounts not in	The property of the second	1f	8,409,291		2		
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include			5,103,860			1300	
_	h	Total. Add lines 1a-1	†	·	.	64,098,438	WIND IN THE		
enue			8		Business Code	mr is publication	100000		
eve	2a	Philmont Scout Ranch	and High Ac	lven	900099	31,570,964	31,393,372	177,592	0
Program Service Revenue	b	Order of the Arrow			900099	3,739,174	3,739,174	0	0
	C C	Local Council assessr	************		900099	16,570,928	16,570,928	0	0
	d e	Regional and Professi			900099	2,886,510	2,886,510	0	0
	f	National Eagle Scout A		3	900099	1,432,683	1,432,683	0	0
	g	Total. Add lines 2a–2				1,923,024 58,123,283	1,923,024	O C	Miles and the second
_	3	Investment income				30,123,263			
		and other similar amo	, ,			15,131,283	0	56,142	15,075,141
	4	Income from investment		nt bo	nd proceeds	2,284	0	0	2,284
	5	D	1 9 1 1			2,811,999	0	0	2,811,999
		2 000 0 00 00	(i) Real		(ii) Personal			The dealers	Declination of the second
	6a	Gross rents	46,	391	0				
	b	Less: rental expenses		0	0				
	С	Rental income or (loss)	46,	391	0				
	d	Net rental income or (loss)	14 3	92 (94) 45 AS	46,391	0	0	46,391
	7a	Gross amount from sales of	(i) Securities	3	(ii) Other	K Do L W			
		assets other than inventory	1,925,996,	498	2,355,529			DE THE TIME	
	b	Less: cost or other basis							
		and sales expenses .	1,906,951,		2,651,441				
	C	Gain or (loss)	19,044,	677	-295,912		ON THE REAL PROPERTY.		Local Language Section
	d	Net gain or (loss)	5 5 5 8	er i jê	>	18,748,765	0	0	18,748,765
Other Revenue	8a		o ed on line 1c).	а					
ō	b	Less: direct expenses		b				a Esta auten	All tolegons a 154
	c 9a	Net income or (loss) fr Gross income from ga			vents . >				
	Ja							Service Control of	
	b	Less: direct expenses		b b					
	C	Net income or (loss) fr			ities ►	W-011,-10910	THE REAL PROPERTY.	At September 1	ALCOHOL VALUE OF THE
	10a	Gross sales of in			THOS I I		al weether the		
		returns and allowance	•		159,645,866				
	b	Less: cost of goods so		b	130,115,148				
	C	Net income or (loss) fr				29,530,718	0	-3,102,387	32,633,105
Ì		Miscellaneous Re			Business Code	23,030,710		3,102,307	32,033,103
ı	11a	High Adventure Base -	Other Incom	e	900099	543,021	0	0	543,021
	b	Other regional activitie		-	900099	2,860,116	0	0	2,860,116
	c	NESA - Other Revenue			900099	63,998	0	0	63,998
	d	***************************************	*			00,000	0	0	03,330
	е	Total. Add lines 11a-			9 9 90 -	3,467,135	TO SERVICE S	STANLES	
	12	Total revenue. See in	structions.		>	191,960,296	57,945,691	-2,868,653	72,784,820

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).

Secti	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons				* * * 4 00
	ot include amounts reported on lines 6b, 7b, b, 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	20,769,434	20,769,434	THE EAST OF	
2	Grants and other assistance to individuals in				MASS SECTION
	the United States. See Part IV, line 22	1,157,144	1,157,144		
3	Grants and other assistance to governments,			The Japan's Street a	
	organizations, and individuals outside the			STATE OF THE STATE	
	United States. See Part IV, lines 15 and 16	281,441	281,441		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,	-			
	trustees, and key employees	5,590,487	2,700,677	1,819,102	1,070,708
6	Compensation not included above, to disqualified	0,000,107	2,700,077	1,010,102	1,070,700
0.70	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages				1 200 041
8	Pension plan accruals and contributions (include	51,056,399	38,473,429	11,374,129	1,208,841
Ü	section 401(k) and 403(b) employer contributions)	4 000 004	0.000.005	000.000	0.5 100
9	Other employee benefits	4,032,691	3,038,825	898,386	95,480
		5,622,297	2,100,028	3,299,904	222,365
10	Payroll taxes	5,330,284	4,016,623	1,187,458	126,203
11	Fees for services (non-employees):				
a	Management				
b	Legal	216,477	207,736	0	8,741
С	Accounting	723,444	282,207	441,237	0
d	Lobbying	180,000		180,000	0
e	Professional fundraising services. See Part IV, line 17	759,124			759,124
f	Investment management fees	1,957,307		1,957,307	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	4,779,195	4,300,792	229,517	248,886
12	Advertising and promotion	3,386,110	3,336,051	0	50,059
13	Office expenses	3,493,396	2,431,250	640,706	421,440
14	Information technology	2,018,545	1,968,565	0	49,980
15	Royalties				
16	Occupancy	15,386,684	11,765,318	3,001,038	620,328
17	Travel	6,679,877	5,080,645	1,154,818	444,414
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	10,503,564	9,899,153	101,852	502,559
20	Interest	7,439,514		7,439,514	0
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	5,388,330	3,894,400	1,387,217	106,713
23	Insurance	47,977,628	47,779,239	198,389	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				Marie Street
	(A) amount, list line 24e expenses on Schedule O.)	Activity with the last			
а	Other Expenses, including fundraising ex	21,854,032	21,409,459	120,207	324,366
b	Taxes, Permit, and Licenses	29,511	3,323	26,188	0
С	Insurance Claims	20,469,404	20,469,404	0	0
d	Supply and Magazine Allocated	-6,182,438	398,975	-3,954,786	-2,626,627
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	240,899,881	205,764,118	31,502,183	3,633,580
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following ŠOP 98-2 (ASC 958-720)				
					Form 990 (2012)

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X	16 16 16 16 16 161	e +2x	🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	52,662,549	1	96,701,564
	2	Savings and temporary cash investments	20,832,010	2	4,328,681
	3	Pledges and grants receivable, net	82,573,392	3	74,091,183
	4	Accounts receivable, net	81,890,025	4	228,806,261
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	0
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	56,291,672	8	72,964,793
	9	Prepaid expenses and deferred charges	19,089,648	9	15,484,015
	10a	Land, buildings, and equipment: cost or		8.	
		other basis. Complete Part VI of Schedule D 194,347,652	THE RESIDENCE	5V-1	
	b	Less: accumulated depreciation 10b 108,109,656	87,560,040	10c	86,237,996
	11	Investments—publicly traded securities	282,692,764	11	336,769,149
	12	Investments – other securities. See Part IV, line 11	331,485,501	12	361,915,711
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7,954,360	15	9,304,737
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,023,031,961	16	1,286,604,090
	17	Accounts payable and accrued expenses	118,378,255	17	136,363,027
	18	Grants payable		18	
	19	Deferred revenue	32,196,862	19	65,746,932
	20	Tax-exempt bond liabilities	99,812,962	20	275,534,548
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ies	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	Mail 1922, 183, 21 12 3		
Liabilities				22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			St. 10. 10. 1000
		of Schedule D	95,076,048	25	140,484,088
	26	Total liabilities. Add lines 17 through 25	245 464 127	26	C10 120 EDE
_	20	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and	345,464,127	20	618,128,595
Se		complete lines 27 through 29, and lines 33 and 34.			
ű	27	Unrestricted net assets	534,462,271	27	532,820,418
ala	28	Temporarily restricted net assets	97,077,860		85,023,542
B	29	Permanently restricted net assets	46,027,703	30000	50,631,535
Net Assets or Fund Balances	20	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.	40,027,703		30,031,033
ō	30			30	ALL DESCRIPTION OF THE PARTY OF
šet	30 31	Capital stock or trust principal, or current funds		31	
Ass	32	Retained earnings, endowment, accumulated income, or other funds .		32	
et /	33	Total net assets or fund balances	677,567,834	33	668,475,495
Z	34	Total liabilities and net assets/fund balances	1,023,031,961		1,286,604,090
	UT	rotal nabilities and het assets/fully balances	1,023,031,301	0.1	1,200,004,090

Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		91,960	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	40,899	9,881
3	Revenue less expenses. Subtract line 2 from line 1 .	3		48,939	9,585
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	77,56	7,834
5	Net unrealized gains (losses) on investments	5		39,847	7,246
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	ave:			
	33, column (B))	10	6	68,47	5,495
Par	Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	* * *		34 34	Ш
1	Accounting method used to prepare the Form 990: Cash Accrual Other		ATTEND	Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," ex	nlain in) liv	
	Schedule O.	фіант ІІІ		110	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		1
-5.0	If "Yes," check a box below to indicate whether the financial statements for the year were com-				
	reviewed on a separate basis, consolidated basis, or both:		100	- 1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		HILLOY!	- 41	
b	Were the organization's financial statements audited by an independent accountant?		2b	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	310	100	
	separate basis, consolidated basis, or both:		行成基		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			, Jan	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	√	
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain in		- HOLD	
_	Schedule O.			1	PR
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth in			27
1	the Single Audit Act and OMB Circular A-133?		3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		Oh.		
	required addit or addits, explain why in Schedule O and describe any steps taken to undergo such a	luults	3b	000	
			Forn	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number **BOY SCOUTS OF AMERICA** 22-1576300 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An organization that normally receives: (1) more than 331/3% 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 331/3% 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. **b** Type II **c** Type III–Functionally integrated **d** Type III-Non-functionally integrated 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). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting 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 Yes No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of monetary organization in col. (i) listed in your the organization in (described on lines 1-9 organization in col. support col. (i) of your governing document? (i) organized in the above or IRC section support? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

Total

Schedule A (Form 990 or 990-EZ) 2012 Page 2 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) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 58,987,673 45,271,816 42,383,665 59,088,848 66,531,505 272.263.507 revenues Tax levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 45,271,816 42,383,665 59,088,848 272,263,507 66,531,505 58,987,673 5 The portion of total contributions by person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 272,263,507 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 7 Amounts from line 4 45,271,816 42,383,665 59,088,848 66,531,505 58,987,673 272,263,507 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 23,675,564 14,059,255 16,044,777 16,850,496 18,322,499 88,952,591 Net income from unrelated business activities, whether or not the business 10 Other income. Do not include gain or loss from the sale of capital assets

	(Explain in Fart IV.)	377,682	510,300	357,851	507,585	3,	467,135	5,220,	553
11	Total support. Add lines 7 through 10						WHID!	366,436	6,651
12	Gross receipts from related activities, etc.	(see instruction	ns)			12		1,199,379,	794
13	First five years. If the Form 990 is for th	e organization'	s first, second,	third, fourth, o	or fifth tax ye	ar as	a section	1 501(c)(3))
	organization, check this box and stop her	е	* * * * *	3 080 K B B		(XX + #5	*: *: *:	* * >	
Secti	on C. Computation of Public Suppor	t Percentage	B						
14	Public support percentage for 2012 (line 6	, column (f) div	ided by line 11,	column (f)) .		14		74.3	%
15	Public support percentage from 2011 Sch	edule A, Part II	, line 14			15		71.88	%
16a	331/3% support test-2012. If the organize	ation did not c	heck the box or	n line 13, and l	ine 14 is 331/2	3% or	more, ch	eck this	
	box and stop here. The organization qual	ifies as a public	cly supported or	ganization 🦂				. 🕨	√
b	33 ¹ /3% support test—2011. If the organicheck this box and stop here. The organi						331/3%		_
		·							L
17a	10%-facts-and-circumstances test—20	•							
	10% or more, and if the organization meet Part IV how the organization meets the "fa			•		•		•	
	organization			•	•		•		
									L.
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat								
	Explain in Part IV how the organization me							-	
	supported organization				_				
18	Private foundation. If the organization did								_
10	instructions		•					. •	

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.)

Sect	ion A. Public Support	under the te	313 113100 001	ow, picase o	ompiete i ait	11.7	
_	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	-						
с 8	Add lines 7a and 7b						
0	line 6.)		U		A to sive in		
Secti	ion B. Total Support		ALCOHOLD TO THE				
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(4) 2000	(5) 2000	(0) 2010	(4) 2011	(0) 2012	(i) rota
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether			1			
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)						-
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	A organization	'e firet sooon	d third fourth	or fifth tay w	ear as a soctio	n 501(c)(3)
17	organization, check this box and stop he	-					
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3. column (fl)	at at at 12 Va	15	%
16	Public support percentage from 2011 Sch						%
Secti	on D. Computation of Investment Inc						
17	Investment income percentage for 2012 (I			y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2011					18	%
19a	331/3% support tests-2012. If the organi	zation did not	check the box	on line 14, a	nd line 15 is m		
	17 is not more than 331/3%, check this box a	and stop here .	The organization	on qualifies as	a publicly supp	orted organizat	ion . ▶ 🗌
b	331/3% support tests—2011. If the organiz						
	line 18 is not more than 331/3%, check this b	_	_	-			
20	Private foundation. If the organization die	d not check a	box on line 14,	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🗌

General Explanation - There were five unusual contributions totaling \$5,110,765 were made in 2012.	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 Ex	planation - Other miscellaneous income.

	General Ex	planation - There were five unusual contributions totaling \$5,110,765 were made in 2012.
		М

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	*************	······································
	***************************************	***************************************

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2012

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.

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

	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization	W		Employer ide	ntification number
	SCOUTS OF AMERICA				22-1576300
Part		e organization is exempt und			organization.
1 2 3	Political expenditures . Volunteer hours	the organization's direct and indire		> 5	\$
Part		e organization is exempt und			
1	-	excise tax incurred by the organiza			\$
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file Fo			
4a					Yes No
b	If "Yes," describe in Part		11 504/	\	1/-1/01
Part		e organization is exempt und			(C)(3).
1					
2	Enter the amount of the	filing organization's funds contrib	uted to other org	anizations for section	
3	Total exempt function of line 17b	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL, ▶ \$	3
4 5	Enter the names, address organization made payme the amount of political co	n file Form 1120-POL for this year'ses and employer identification nurents. For each organization listed, ontributions received that were problemed or a political action committed.	mber (EIN) of all se enter the amount mptly and directly	ection 527 political organ paid from the filing organ delivered to a separate p	izations to which the filing ization's funds. Also enter political organization, such
	(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)					

Par	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (elec	tion under
Α (ongs to an affiliated group (and list in Part IV esses, and share of excess lobbying expenditur		ıp member's
В	Check 🕨 🗌 if the filing organization che	ecked box A and "limited control" provisions a	apply.	
	Limits on Lobby	ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a	a legislative body (direct lobbying)	180,000	
С	Total lobbying expenditures (add lines 1a	and 1b)	180,000	
d	Other exempt purpose expenditures		365,356,853	
е	Total exempt purpose expenditures (add	lines 1c and 1d)	365,536,853	
f	Lobbying nontaxable amount. Enter the columns.	he amount from the following table in both	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	W. State Control	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	A STATE OF THE PARTY OF	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	A WEST	
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 259	% of line 1f)	250,000	
h	Subtract line 1g from line 1a. If zero or les	ss, enter -0-	0	
Ĩ	Subtract line 1f from line 1c. If zero or les		0	
j 	If there is an amount other than zero or reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes 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.)

	Lobby	ng Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
С	Total lobbying expenditures	222,947	269,003	386,847	180,000	1,058,797
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2012

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	ription of the lobbying activity.	Yes	No	Ar	nount	
1	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:		1 5 2 ×			Š
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Publications, or published or broadcast statements?				_	
g	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?					_
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					_
i	Other activities?					
j	Total. Add lines 1c through 1i	1,877				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			U 1	III e e ma	
b	If "Yes," enter the amount of any tax incurred under section 4912	130	16			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	him	1134			_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\(E\		Danie	158	
Fent	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), (or se	ction		
-	(·//·/·			,	Yes N	lo
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line 3,	is
1	Dues, assessments and similar amounts from members	990	1			_
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).					
a	Current year		2a			_
b	Carryover from last year		2b			_
S C	Total		2c			_
4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		3			_
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part						
Comp ist); P	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; art II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	Part II	-A (af	iliated	group	
		******				enen.
		******			******	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	SCOUTS OF AMERICA		22-1576300
Pa		or Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to F		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and		
	funds are the organization's property, subje	_	
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the		
Par	conferring impermissible private benefit?	elete if the exemination enguered "Ves	Yes No
- 21		plete if the organization answered "Yes	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	recreation or education Preservation	of an historically important land area
	Protection of natural habitat	·	
	Preservation of open space	☐ Preservation	of a certified historic structure
2	Complete lines 2a through 2d if the organization	ation held a qualified conservation contribut	ion in the form of a conservation
-	easement on the last day of the tax year.	ation field a qualified conscivation contribut	and in the form of a conservation
	,,,,,,,,		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation eas		
С	Number of conservation easements on a ce		
d	Number of conservation easements include		
	historic structure listed in the National Regis		
3	Number of conservation easements modifie	d, transferred, released, extinguished, or te	rminated by the organization during the
	tax year ►		
4	Number of states where property subject to		
5	Does the organization have a written po	licy regarding the periodic monitoring, in	spection, handling of
	violations, and enforcement of the conserva	tion easements it holds?	· · · · · · · · · Yes 🗌 No
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservatio	n easements during the year
66.7	***************************************		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year
•	> \$		
8	Does each conservation easement reported		
•	(i) and section 170(h)(4)(B)(ii)?		_ · · · ·
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the organization's accounting for conservation e		nanciai statements that describes the
Part		ections of Art, Historical Treasures, o	r Other Similar Assets
- ure	· ·	vered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text of		
b	If the organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other		
	public service, provide the following amount		•
			. > \$
	(i) Revenues included in Form 990, Part VIII (ii) Assets included in Form 990, Part X		• \$
2	If the organization received or held works	of art, historical treasures, or other similar	ar assets for financial gain, provide the
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin	e1	> \$0
b	Assets included in Form 990, Part X	e1	> \$ 0

b f "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Par	Organizations Maintaining	Collections of	Art, His	torical	reasures, c	or Other Similar A	ssets (cor	ntinued)
b Scholarly research Other	3	Using the organization's acquisition,	accession, and of						
b Scholarly research Other	а	✓ Public exhibition		d	Loan	or exchange	programs		
c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in F XIII. 5						_	-		
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in F XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?			9	Ü		>************			******
Sull				and avale	in how t	hey further th	e organization's eve	mnt nurnos	ea in Parl
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 [7] Yes [7] Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV included on Form 990, Part XIII and complete the following table: 1	0.00		tion 3 conceitons i	and expir	alli HOVV t	ney faither th	e organization s exe	mpt parpos	oc IIII ali
Sasets to be sold to raise funds rather than to be maintained as part of the organization's collection?	5		adiait ar raadiya	donation	a af aut	biotovical tuna		le.	
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part N 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?	3								
Inine 9, or reported an amount on Form 990, Part X, line 21. In Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes	Dor								
Included on Form 990, Part X?	Par	line 9, or reported an amour	nt on Form 990, I	Part X, li	ne 21.				Part IV,
Beginning balance 1c	1a								
C Beginning balance 1d								☐ Yes	s 🗌 No
C Beginning balance 1c	b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing to	able:			
d Additions during the year Distributions during the year 1d 1e								Amount	
d Additions during the year Distributions during the year 1d 1e	С	Beginning balance					1c		
Ending balance Finding ba	d	Additions during the year					1d		
f Ending balance	е	Distributions during the year				** ** **	-0.5%		
2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. □ Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	f	Ending balance			1 HT 10510 1	50 F4 F4 F4			
Part V Endowment Funds. Complete if the explanation has been provided in Part XIII. □ □ □ □ □ □ □ □ □	2a							☐ Yes	No No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. The property are all the organization answered "Yes" to Form 990, Part IV, line 10. The property are all the organization answered (a) Three years back (b) Four years back (c) Four years have a few years (c) Four years have years (c) Four years have years (c) Four years have yea		Constant in Figure 2	•	,					
1a Beginning of year balance 280,080,716 285,870,684 264,362,388 221,017,998 327,778,8 b Contributions 2,357,938 645,067 518,129 750,007 3,444,9 c Net investment earnings, gains, and losses 29,679,521 -5,483,574 21,947,430 44,270,613 -95,963,2 d Grants or scholarships 0 702,937 392,973 501,405 673,1 e Other expenditures for facilities and programs 66,923,349 211,359 81,703 582,080 13,390,7 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:									
1a Beginning of year balance 280,080,716 285,870,684 264,362,398 221,017,998 327,778,8 b Contributions 2,357,938 645,067 518,129 750,007 3,444,9 c Net investment earnings, gains, and losses 29,679,521 -5,483,574 21,947,430 44,270,613 -95,963,2 d Grants or scholarships 0 702,937 392,973 501,405 673,1 Other expenditures for facilities and programs 0 702,937 392,973 501,405 673,1 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 20,7% 276,72% 277,712,80 277,712,80 277,712,80 277,712,80 277,712,80 277,712,80 277,712,80 277,712,80 277,712,80 277,712,8	A.M.	2 Indownione i dilasi compi							ears back
Contributions Contributio	10	Reginning of year balance		15.555					A 900-107
Net investment earnings, gains, and losses 29,679,521 -5,483,574 21,947,430 44,270,613 -95,963,2 Grants or scholarships 0 702,937 392,973 501,405 673,1 Other expenditures for facilities and programs 66,923,349 211,359 81,703 582,080 13,390,7 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 76.72 % Permanent endowment ▶ 20,7 % Temporarily restricted endowment ▶ 20,8 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(i) 3a(ii)							1000		
losses 29,679,521 -5,483,574 21,947,430 44,270,613 -95,963,2 d Grants or scholarships 0 702,937 392,973 501,405 673,1 e Other expenditures for facilities and programs 66,923,349 211,359 81,703 582,080 13,390,7 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 76,72 % Permanent endowment 20,7 % C Temporarily restricted endowment 2,58 % 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: (ii) unrelated organizations 3a(ii) 13a(ii) 13a(i			2,357,938		645,067	518	750,00)7	3,444,975
d Grants or scholarships 0 702,937 392,973 501,405 673,1 e Other expenditures for facilities and programs 66,923,349 211,359 81,703 582,080 13,390,7 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 20,7 % c Temporarily restricted endowment ▶ 25,8 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	C								
Other expenditures for facilities and programs 66,923,349 211,359 81,703 582,080 13,390,7			29,679,521	-{	,483,574	21,947	,430 44,270,6	13 -9	5,963,281
programs 66,923,349 211,359 81,703 582,080 13,390,7 f Administrative expenses 1,480,022 326,648 193,355 720,040 178,6 g End of year balance 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment 20,7 % c Temporarily restricted endowment 25,8 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(i) 1			0		702,937	392	,973 501,40)5	673,172
f Administrative expenses . 1,480,022 326,648 193,355 720,040 178,6 g End of year balance . 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 76.72 % b Permanent endowment ▶ 20,7 % c Temporarily restricted endowment ▶ 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(ii)	е								
g End of year balance . 243,714,804 279,791,233 286,159,926 264,235,093 221,017,9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ 76.72 // Permanent endowment ▶ 20.7 % Temporarily restricted endowment ▶ 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i)			66,923,349		211,359	81	,703 582,08	30 13	3,390,702
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ► 76.72 % Permanent endowment ► 20.7 % Temporarily restricted endowment ► 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land 0 11,360,096 11,360,096 5 11,360,096 C Leasehold improvements 0 0 95,670,519 6 66,177,909 29,492,6 Other 0 Other 0 Other 0 Other 0 Other	f	Administrative expenses	1,480,022		326,648	193	,355 720,0	10	178,625
a Board designated or quasi-endowment ▶ 76.72 % b Permanent endowment ▶ 20.7 % c Temporarily restricted endowment ▶ 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	g	End of year balance	243,714,804	279	,791,233	286,159	,926 264,235,09	33 22	1,017,998
a Board designated or quasi-endowment ▶ 76.72 % b Permanent endowment ▶ 20.7 % c Temporarily restricted endowment ▶ 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	2	Provide the estimated percentage of t	he current year en	id balance	e (line 1g	, column (a)) h	neld as:		
Temporarily restricted endowment ▶ 2.58 % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	а	Board designated or quasi-endowmer	nt ▶ 76.72	2 %					
The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII 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 (other) (other) (b) Cost or other basis (other) (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (e) Buildings 11,360,096 11,360,096 11,360,096 22,492,66 (d) Book value (d) Book value (e) Buildings (c) Accumulated depreciation (d) Book value (e) Book value (f) Bo	b	Permanent endowment > 20	0.7 %						
The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII 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 (other) (other) (b) Cost or other basis (other) (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (e) Buildings 11,360,096 11,360,096 11,360,096 22,492,66 (d) Book value (d) Book value (e) Buildings (c) Accumulated depreciation (d) Book value (e) Book value (f) Bo	С	Temporarily restricted endowment ▶	2.58 %						
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations				0%.					
Yes Na Na Na Na Na Na Na N	3a	=			ation tha	at are held an	d administered for t	he	
(i) unrelated organizations 3a(i) 3a(ii) 3a(iii) 3a(iiii) 3a(iiii) 3a(iiii) 3a(iiii)<			•	Ü				12	'es No
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 11,360,096 11,360,096 b Buildings 0 87,317,037 41,931,747 45,385,2 c Leasehold improvements 0 95,670,519 66,177,909 29,492,6 e Other 0 0		(i) unrelated organizations							1
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 11,360,096 Buildings		•						7000	1
Describe in Part XIII 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 (nivestment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	h			oquirad a	n Sahadi				
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 1a Land 0 11,360,096 11,360,0 11	4							SD	
Cost or other basis (other) Cost	Dar								
(investment) (other) depreciation 1a Land 0 11,360,096 11,360,0 b Buildings 0 87,317,037 41,931,747 45,385,2 c Leasehold improvements 0 0 0 d Equipment 0 95,670,519 66,177,909 29,492,6 e Other 0 0 0 0	r all								
b Buildings		Description of property	///////// ILINISSAN CONTRACT	A CONTRACTOR OF THE CONTRACTOR				(d) Book	value
b Buildings	1a	Land		0	2	11,360,096	0.3. 1-2. 30 5 10	11	1,360,096
c Leasehold improvements 0 0 0 d Equipment 0 95,670,519 66,177,909 29,492,6 e Other 0 0 0	b	Buildings		0			41,931,747		5,385,290
d Equipment	С	•					200		0
e Other	d	•			§			20	9.492 610
	-						24		0,102,010
	_		oust equal Form 90		column			0(3 237 996

Part VII	Investments - Other Securities.	See Form 990, Part X,	line 12.	
	(including name of security)	(b) Book value	(c) Method of va Cost or end-of-year	
	al derivatives			
	held equity interests			
	SSA Commingled Endowment Fund LP	361,915,711	End-of-Year Market Value	
(A) (B)				
(C)	***************************************			
(D)				
(E)				
(F)	***************************************			
(G)	***************************************			
(H)				
(1)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.)	361,915,711		
Part VIII	Investments-Program Related	See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	
_(1)				
_(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets. See Form 990, Par			
	(a)	Description		(b) Book value
(1)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	ımn (b) must equal Form 990, Part X, col.			
Part X	Other Liabilities. See Form 990, F			
1.	(a) Description of liability	(b) Book value		
	income taxes	0		
	nuity Liability	8,321,000		
	ce Reserves	132,163,088		
(4)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	b) must equal Form 990, Part X, col. (B) line 25.)	140,484,088		
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the tex	ct of the footnote to the orga	anization's financial statements that	t reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

-	ıle D (Form 990) 2012				Page 4
Par	Reconciliation of Revenue per Audited Financial Stateme	ents \	Nith Revenue per	Retu	ırn
1	Total revenue, gains, and other support per audited financial statements			1	228,913,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12;				
а	Net unrealized gains on investments	2a	39,847,226	-21	
b	Donated services and use of facilities	2b	0	5 10	
С	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	39,847,226
3	Subtract line 2e from line 1			3	189,065,774
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i		IEO F	100,000,771
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	2,894,522		
С	Add lines 4a and 4b	and the same of		4c	2,894,522
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	191,960,296
Part	XII Reconciliation of Expenses per Audited Financial Statem			7,7 1, 7 1	
Indiana della	Total expenses and losses per audited financial statements			1	212,402,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				212,402,000
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 XIII.)	2d	0		
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	010 400 000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	()		3	212,402,000
	Investment expenses not included on Form 990, Part VIII, line 7b	40			
a b	Other (Describe in Part XIII.)	4a 4b	0		
C	·		28,497,881	4-	00.407.004
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line			4c	28,497,881
Part		3 10.)	7	5	240,899,881
	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b				
inform					,
Sched	ule D, Part III, Line 1 - Collections. The National Scouting Museum in Irving, Te	vac n	necoccos fino art annra	hasin	in March 2012 at
	ximately \$60,000,000. The Museum also houses collections of Scouting memor				
	ximately \$1,500,000. These collections are not recognized as assets in the cons				***********************
	naintenance of these collections has been expensed. During 2012, no major add		********		**********
	and of the second of the secon		or disposais or conce		······································
			*********************	*****	
Schen	ule D, Part III, Line 4 - Extensive collection of Scouting memorabilia and Rocky	rell na	intings reflecting Roy S	Scout	s in daily life are on
	y for the enjoyment of members, volunteers, and visitors. Encourages boys to				
-uispiu	y io the orgonium of members, voidineers, and visitors. Effectinges boys to	cybioi	e the many facets of 5	coatt	19:

Schad	ule D, Part V, Line 4 - Endowments consist of approximately 78 individual fund	e acta	hliched for a variety of	nur	ncas Tha
	ment includes both donor-restricted endowment funds and funds designated l				
	associated with endowment funds, including funds designated by the Executi				
	ed based upon the existence or absence of donor-imposed restrictions or in ac				************
report	or appearable the evisioned of appende of apploisitibosed testrictions of ill ac	.corua	nee with the Executive	וסטט	a 3 miles pretation of

relevant law.

Part XIII - Supplemental Information (Continued)
Schedule D, Part X, Line 2 - Uncertainty in Income Taxes. The National Council recognizes interest and penalties related to underpayment of income taxes as income tax expense. As of December 31, 2012, 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 4b - A consolidated audit of the Boy Scouts of America and related organizations financial statements was done for the year ending December 31, 2012. 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, 2012. Per the audit expenses include Learning for Life, National Boy Scouts of America Foundation, Arrow WV, Inc. and regional trust expenses and reclassification of expenses netted to income are eliminated for reporting purposes.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

2012 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name	e of the organization					Employer id	entification number
BO	SCOUTS OF AMERICA						-1576300
Pa	General Information Form 990, Part IV, line		ies Outside	the United States. Com	plete if the organ	zation ansv	wered "Yes" to
1	For grantmakers. Does the assistance, the grantees' el grants or assistance?	igibility for th	e grants or as				
2	For grantmakers. Describe assistance outside the Unite		the organizat	ion's procedures for moni	toring the use o	f its grant	s and other
3	Activities per Region. (The fo	ollowing Part	I, line 3 table	can be duplicated if additio	nal space is need	led.)	
	(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 liste a program se describe specifi service(s) in r	rvice, c type of	(f) Total expenditures for and investments in region
(1)	Central America and the Ca	0	0	Grantmaking	Support Internat	onal S	61,848
(2)	East Asia and the Pacific	0	0	Grantmaking	Support Internati	onal S	47,613
(3)	Europe (including Iceland	0	0	Grantmaking	Support Internati	onal S	155,880
(4)	Middle East and North Afri	0	0	Grantmaking	Support Internati	onal S	1,659
(5)	Russia and the newly indep	0	0	Grantmaking	Support Internati	onal S	13,823
(6)	South Asia	0	0	Grantmaking	Support Internati	onal S	618
(7)	Central America and the Ca	0	0	Program Services	Site visits and Me	esseng	17,356
(8)	East Asia and the Pacific	0	0	Program Services	Reviewing vendo	r facili	290,236
(9)	Europe (including Iceland	0	0	Program Services	Meetings with We	orld Sco	93,911
(10)	Middle East and North Afri	0	0	Program Services	Messengers of P	eace mee	23,049
(11)	North America (including C	0	0	Program Services	Meetings and site	e visit	7,314
(12)	South America	0	0	Program Services	Site visit.		2,149
(13)	South Asia	0	0	Program Services	Asia Pacific Regi	onal S	20,479
(14)	North America (including C	2	18	Program Services	Support Internati	onal S	679,493
(15)	Central America and the Ca	0	0	Investments			1,585,954
16)	Europe (including Iceland	0	0	Investments			5,177,046
17)							
За	Sub-total						
b	Total from continuation sheets to Part I						

c Totals (add lines 3a and 3b)

8,178,428

Page 2

Schedule F (Form 990) 2012

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. Part II can be duplicated if additional space is needed. Part II

						The second second second	reproduced in describer of described of		
- [(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)
3			Central America a	Support Internatio	61,398	61,398 Wire Transfer			
<u>R</u>			East Asia and the	Support Internatio	47,613 \	47,613 Wire Transfer			
<u>@</u>			Europe (including	Support Internatio	155,880	155,880 Wire Transfer			
€			Russia and the ne	Support Internatio	13,823	13,823 Wire Transfer			
(2)									
(9)									
ε									
(8)									
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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 Enter total number of other organizations or entities က 2

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

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, appraisa, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sche	Schedule F (Form 990) 2012

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).	□ 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)	✓ 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)	☐ 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)	□ 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)	□ 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)	☑ No

STREET, STREET	
Part V	Suppl

_			
Sunn	lamantal	Int	ormation
Jubb	ienientai	1111	Ullialiuli

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

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

SCHEDULE G (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

BOY SCOUTS OF AMERICA					22-1	22-1576300			
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.									
Indicate whether the organization raised funds through any of the following activities. Check all that apply.									
	= " one continue of the figure								
<u> </u>	- Solicitation of government grants								
	g - opolial failures g volta								
d In-person solicitations2a Did the organization have a writt									
2a Did the organization have a writt or key employees listed in Form									
b If "Yes," list the ten highest paid		-		•	9	Yes ∐ No e fundraiser is to be			
compensated at least \$5,000 by			, ,	· ·					
(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) Arnount 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									
Total				415,921	759,124	-343,203			
3 List all states in which the organ				olicit contribution	s or has been notifie	d it is exempt from			
registration or licensing.									
AK, AL, AR, AZ, CA, CO, CT, FL, GA, IN, KS TX, UT, VA, WA, WI, WV	S, KY, LA, MA, I	MD, ME, MI,	MN, MO, MS	S, NC, ND, NH, NJ,	NM, NY, OH, OK, OR, I	PA, PR, RI, SC, TN,			
17, 01, VA, WA, WI, WV									
				•••••					

	*****************		***********	******************	************	***************************************			

Part II

_		gross receipts greater tha				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
,			(event type)	(event type)	(total number)	COI. (C))
	1	Gross receipts				
	2	Less: Contributions Gross income (line 1 minus				
+		line 2)				
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment	=			
	9	Other direct expenses .				
	10 11	Direct expense summary. Ad Net income summary. Comb	ine line 3, column (d), a	nd line 10		(
al I	t III	Gaming. Complete if the	e organization answe	red "Yes" to Form 990), Part IV, line 19, or	reported more
		than \$15,000 on Form 99	90-EZ. line 6a.		, , , , ,	
		than \$15,000 on Form 99	90-EZ, line 6a. (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1	than \$15,000 on Form 99		(b) Pull tabs/instant		(d) Total gaming (add
	1 2			(b) Pull tabs/instant		(d) Total gaming (add
		Gross revenue		(b) Pull tabs/instant		(d) Total gaming (add
	2	Gross revenue		(b) Pull tabs/instant		(d) Total gaming (add
	2	Gross revenue Cash prizes	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
	2 3 4	Gross revenue Cash prizes Noncash prizes Rent/facility costs		(b) Pull tabs/instant		(d) Total gaming (add
	2 3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses .	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo Yes% No	(c) Other gaming	(d) Total gaming (add
	2 3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor	(a) Bingo Yes % No d lines 2 through 5 in c	(b) Pull tabs/instant bingo/progressive bingo Yes% No olumn (d)	(c) Other gaming ☐ Yes% ☐ No	(d) Total gaming (add
) a b	2 3 4 5 6 7 8 Entrius	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor Direct expense summary. Ad Net gaming income summary ter the state(s) in which the ore	(a) Bingo Yes % No d lines 2 through 5 in c Combine line 1, colur ganization operates gar perate gaming activities	(b) Pull tabs/instant bingo/progressive bingo Yes % No olumn (d)	(c) Other gaming Yes % No	(d) Total gaming (add

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

Schedu	lle G (Form 990 or 990-EZ) 2012
11 12	Does the organization operate gaming activities with nonmembers?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:
	Name ▶
	Address►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	□ Director/officer □ Employee □ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part I	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

*****	***************************************

Form: Schedule G

Page: 1

Line Number: Part I Line 2b

Fundraiser Activity Information

Name and Address	Activity	C1	Gross Receipts	C2	C3
HARTSOOK COMPANIES INC 1100 Walnut Street Suite 2935 Kansas City, MO 64106	Train local councils with fundraising programs.	No	0	27,118	-27,118
THE GARRIGAN LYMAN GROUP 1524 Fifth Avenue 4th Floor Seattle, WA 98101	Digital fundraising campaign for the organization and Arrow WV, Inc. affiliate, A portion was outcharged to Arrow WV, Inc.	No	0	247,296	-247,296
V-FORWARD INC 1592 Conner St Noblesville, IN 46060	Fundraising expenses for the organization and Arrow WV, Inc. A portion was outcharged to Arrow WV, Inc.	No	0	354,335	-354,335
GRENZEBACH GLIER & ASSOCIATES INC 401 N Michigan Avenue Suite 2800 Chicago, IL 60611	Benchmarking Analysis.	No	0	20,222	-20,222
America's Charities 14150 Newbrook Drive 110 Chantilly, VA 20151	Employee Annual Giving Campaign and Federated Campaign.	Yes	280,071	79,521	200,550
Automotive Recovery Services Inc Two Westbrook Corporate Center Suite 500 Westchester, IL 60154	Automobile donation program service provider.	Yes	135,850	30,632	105,218
Total:			415,921	759,124	-343,203

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	
-------------------	--

Employer identification number

BOY SCOUTS OF AMERICA Part General Information on Grants and Assistance	on Grants and	Accietance					22-1576300	
Does	in records to sub	stantiate the amou	unt of the grants or	assistance the	rantees' eligibility fo	r the grants or assistance	and and	
the selection criteria used to award the grants or assistance?	award the grants	or assistance?			י י י י י י י י י י י י י י י י י י י	יו ווופ אנשוונט טו מטטוטושוונ	ie, alid	(
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedu	res for monitoring	the use of grant fu	nds in the United	States.			5
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,	sistance to Go	vernments and	Organizations	in the United S	tates. Complete if	the organization ansv	vered "Yes" to Form 99	390,
1 (a) Name and address of organization (b) EIN (c) IRC section	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	re than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of the control of the control of the cash (g) Description of the cash (g)	space is needed. (g) Description of	(h) Purpose of grant	
or government (1) Sch I, Stmt 1		alceanice ii	grant	cash assistance	other)	non-cash assistance	or assistance	
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)			@					
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and gov	vernment organiza	tions listed in the li	ne 1 table		* * *	500	
Pa	see the Instruction	is for Form 990.	V.		Cat. No. 50055P	වි වි වි වි වි	0 Schedule I (Form 990) (2012)	(2012)

Schedule I (Form 990) (2012)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance Schedule I, Part I, Line 2 - Periodic progress reports from organizations. Site visits are made as necessary. (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 1 See Schedule I, Part IV, Statement 2 information. Part IV Part III 2 2 9 က 4

BOY SCOUTS OF AMERICA

22-1576300

Form: Schedule I Page: 1

Line Number: Part II

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

-	Description of Grants and Other Assista	ance to Governments and Organizations in the	United States
		Amount of cash grant	Amount of non-cash assistance
Name and address	Alamo Area Council	29,750	
	2226 NW Military Hwy		
	San Antonio, TX 78213		
EIN	74-6079583		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	T		
Purpose of grant	To support local council Scouting.		
Name and address	Aloha Council	100,000	
	42 Puiwa Road		
	Honolulu, HI 96817		
EIN	99-0073482		
IRC code section	501(c)(3)		
Method of valuation			
Description of non- cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Andrew Jackson Council	6,050	
	855 Riverside Dr		
EIN	Jackson, MS 39202 64-0303071		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Baden-Powell Council	6,925	
	2150 NYS Route 12	0,520	
	Binghamton, NY 13901		
EIN	15-0536607		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Baltimore Area Council	14,450	
	701 Wyman Park Drive		
	Baltimore, MD 21211		
EIN	52-0591572		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	To our part least source Secretical		
Purpose of grant	To support local council Scouting.		
Name and address	Bay Lakes Council	8,875	
	900 Walnut		
	Green Bay, WI 54301		
EIN	39-1184320		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			

Schedule I, Part IV,	Statement 1	BOY SCOUTS OF AMER
cash assistance	To assess the collection of the collection of	
Purpose of grant	To support local council Scouting.	
Name and address	Blue Grass Council	8,275
	3445 Richmond Road	
	Lexington, KY 40509	
EIN	61-0444653	
IRC code section Method of valuation	501(c)(3)	
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Boston Minuteman Council	5,850
Nume and address	411 Unquity Road	0,000
	Milton, MA 02186	
EIN	04-3184713	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	California Inland Empire Council	7,100
	1230 Indiana Court	
	Redlands, CA 92374	
EIN	95-1744350	
IRC code section	501(c)(3)	
Method of valuation		
Description of non- cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Cape Fear Council	5,590
Maine and address	110 Longstreet Drive	0,000
	Wilmington, NC 28412	
EIN	56-0529941	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Capitol Area Council	25,000
	12500 North IH 35 Avenue	
	Austin, TX 78753	
EIN	74-1143057	
IRC code section Method of valuation	501(c)(3)	
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
7	Cascade Pacific Council	28,913
	2145 Natio Pkwy	1 tg 1
	Portland, OR 97201	*
EIN	93-0386792	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		
cash assistance	To support local sound! Societies	
Purpose of grant	To support local council Scouting.	
Name and address	Central Florida Council	21,175

10,258

5,700

138,050

9,100

7,300

1951 S Orange Blossom Trail

Suite 102

Apopka, FL 32703

EIN

59-0624376

IRC code section

501(c)(3)

Method of valuation Description of noncash assistance

Purpose of grant

To support local council Scouting.

Name and address

Cherokee Area Council 6031 Lee Highway

Chattanooga, TN 37421

EIN

62-0475671

IRC code section

501(c)(3)

Method of valuation Description of noncash assistance

Purpose of grant

To support local council Scouting.

Name and address

Chester County Council 504 S Concord Rd

West Chester, PA 19382

EIN IRC code section 23-1365192 501(c)(3)

Method of valuation Description of noncash assistance

Purpose of grant

To support local council Scouting.

Name and address

Chief Seattle Council

3120 Rainer Ave South Seattle, WA 98144

EIN IRC code section 91-0569878 501(c)(3)

Method of valuation

Description of noncash assistance

Purpose of grant

To support local council Scouting,

To support local council Scouting.

Name and address

710 S Hastings Way Eau Claire, WI 54701

Chippewa Valley Council

EIN

39-0807227 501(c)(3)

IRC code section Method of valuation Description of non-

cash assistance

Purpose of grant

Choctaw Area Council

Name and address

4818 North Park Drive Meridian, MS 39305

EIN

64-0324398 501(c)(3)

IRC code section Method of valuation Description of non-

cash assistance

Purpose of grant To support local council Scouting.

Name and address

Circle Ten Council 8605 Harry Hines Blvd Dallas, TX 75235

8,825

Schedule I, Part IV, Statement 1 75-0800615 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Coastal Carolina Council 6,800 1025 Sam Rittenberg Blvd Charleston, SC 29407 EIN 57-0327870 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. 9,750 Name and address Cornhusker Council 600 South 120th St Walton, NE 68461 EIN 47-0378985 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Coronado Area Council 5,300 644 S Ohio St Salina, KS 67401 EIN 48-0545921 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. 18,340 2130 Winter Street Philadelphia, PA 19103 EIN 23-1352052 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Crossroads of America Council 15,213 7125 Fall Creek Road Indianapolis, IN 46256 EIN 35-0867962 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. 12,525 Name and address Dan Beard Council 10078 Reading Rd Cincinnati, OH 45241 EIN 31-0536651 IRC code section 501(c)(3) Method of valuation

Schedule I, Part IV,			BOY SCOUTS OF AMERICA
Description of non- cash assistance	•		
Purpose of grant	To support local council Scouting.		
Name and address	Flint River Council	0.000	
Name and address	1361 Zebulon Rd	6,938	
	Griffin, GA 30224		
EIN	58-0574922		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	To our port level occurrent Coouting		
Purpose of grant	To support local council Scouting.		
Name and address	Grand Canyon Council	6,625	
	2969 N Greenfield Rd Phoenix, AZ 85016		
EIN	86-0101295		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Great Lakes Council	6,199	
	P O Box 4		
EIN	Grand Blanc, MI 48480		
IRC code section	38-1359086 501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Great Salt Lake Council	23,000	
	525 Foothill Blvd		
EIN	Salt Lake City, UT 84113 87-0212460		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Great Smoky Mountain Council	5,075	
	1333 Old Weisgarber Rd		
EIN	Knoxville, TN 37909		
EIN IRC code section	62-0476811 501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Greater Alabama Council	25,000	
24	P O Box 43307		
	Birmingham, AL 35243		
EIN	63-0302107		
IRC code section Method of valuation	501(c)(3)		
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		

16,000

5625 East State Road 46

To support local council Scouting.

Hoosier Trails Council

Method of valuation Description of noncash assistance Purpose of grant

Name and address

20,725

16,310

36.078

10,975

7,950

16,000

Bloomington, IN 47401

EIN

35-1290776

IRC code section 501(c)(3) Method of valuation

Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address Hudson Valley Council

6 Jeanne Drive Newburgh, NY 12550

EIN 14-1338385 **IRC code section** 501(c)(3)

Method of valuation Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address Illowa Council

4412 N Brady St Davenport, IA 52806

EIN 36-2616917 **IRC code section** 501(c)(3)

Method of valuation
Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address Indian Nations Council

4295 S Garnett Rd Tulsa, OK 74146 73-0579230

EIN 73-0579230 IRC code section 501(c)(3)

Method of valuation Description of noncash assistance

Purpose of grant To support local council Scouting,

Name and address Istrouma Area Council

9644 Brookline Ave Baton Rouge, LA 70809

EIN 72-0411324 **IRC code section** 501(c)(3)

Method of valuation
Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address Jersey Shore Council

1518 Ridgeway Rd Toms River, NJ 08755

EIN 21-0634999 IRC code section 501(c)(3)

Method of valuation
Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address LaSalle Council

1340 South Bend Ave South Bend, IN 46617

EIN 35-0867966 **IRC code section** 501(c)(3)

Page: 7

Schedule I, Part IV,	Statement 1		BOY SCOUTS OF AMERICA
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Last Frontier Council	7,200	
	3031 N W 64th St		
	Oklahoma City, OK 73116		
EIN	73-0580263		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Lincoln Heritage Council	10,925	
	12001 Sycamore Station Place		
	Louisville, KY 40299		
EIN	61-0445839		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
		25.050	
Name and address	Longhorn Council	25,850	
	850 Cannon Drive		
	Hurst, TX 76054		
EIN	74-1157377		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	T 10 10 11		
Purpose of grant	To support local council Scouting.		
Name and address	Michigan Crossroads Council	171,352	
	3213 Walker Ave NW		
	Grand Rapids, MI 49544		
EIN	45-4003240		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	To support local council Cocuting		
Purpose of grant	To support local council Scouting.		
Name and address	Mid-America Council	9,875	
	12401 West Maple Rd		
	Omaha, NE 68164		
EIN	47-0376545		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	To support local council Scouting.		
Name and address	Minsi Trails Council	15,150	
	991 Postal Road		
	Allentown, PA 18109		
EIN	23-1708585		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			

Purpose of grant To support local council Scouting. Name and address Mobile Area Council 5,875 2587 Government Blvd Mobile, AL 36606 EIN 23-7185797 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Narragansett Council 5,700 10 Risho Avenue East Providence, RI 02904 EIN 05-0308384 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address National Boy Scouts of America Foundation 743,546 1325 W Walnut Hill Lane Irving, TX 75038 EIN 75-2675978 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant Support Scouting. Name and address National Catholic Committee on Scouting 77,500 55 Broad St Red Bank, NJ 07701 EIN 53-0196617 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant Support Scouting. NONPROFIT LEADERSHIP ALLIANCE Name and address 15,000 P O Box 875083 Kansas City, MO 64187 EIN 44-0546869 IRC code section Method of valuation Description of noncash assistance Purpose of grant Support the preparation of nonprofit professionals. Name and address North Florida Council 11,800 521 S Edgewood Ave Jacksonville, FL 32205 **EIN** 59-0637816 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Northern Star Council 12,700 393 Marshall Ave

BOY SCOUTS OF AMERICA Schedule I, Part IV, Statement 1 St Paul, MN 55102 EIN 20-3000282 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting, 20,200 Name and address Occoneechee Council 3231 Atlantic Ave Raleigh, NC 27604 EIN 56-0529984 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Old Hickory Council 6,725 6600 Wilas Creek Pkwy Winston Salem, NC 27106 EIN 56-0529985 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. 25,000 Name and address Old North State Council P O Box 29046 Greensboro, NC 27429 EIN 56-1762001 IRC code section 501(c)(3) Method of valuation Description of noncash assistance To support local council Scouting. Purpose of grant 8,325 Name and address Orange County Council 1211 East Dyer Road Santa Ana, CA 92705 EIN 95-1727660 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Pacific Skyline Council 5,400 1150 Chess Drive Foster City, CA 94404 **EIN** 94-1156483 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting.

5,700

IRC code section 501(c)(3)

Palmetto Council 420 S Church St Spartanburg, SC 29306

57-0314450

Name and address

EIN

Schedule I, Part IV, Statement 1 **BOY SCOUTS OF AMERICA** Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting, Name and address Patriots' Path Council 9,950 222 Columbia Turnpike Florham Park, NJ 07932 EIN 22-3661431 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting, Name and address Pennsylvania Dutch Council 6,900 630 Janet Ave Lancaster, PA 17601 EIN 23-1855082 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Pine Burr Council 12,000 1318 Hardy St Hattiesburg, MS 39401 EIN 64-0303072 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Potomac Council 7,500 14416 McMullen Hwy SW Cumberland, MD 21502 EIN 52-0591630 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Puerto Rico Council 100,850 Ave Esmeralda 405 Suite 102 PMB 661 Guaynabo, PR 00969 EIN 66-0201809 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Quivira Council 5,825 1555 E Second St Wichita, KS 67214 EIN 23-7147508 IRC code section 501(c)(3) Method of valuation Description of non-

Schedule I, Part IV,	Statement 1	BOY SCOUTS OF AMERIC
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Rainbow Council	15,000
	2600 N Winterbottom Rd	
	Morris, IL 60450	
EIN	36-2169129	
IRC code section	501(c)(3)	
Method of valuation Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Sagamore Council	11,375
	518 N Main St	
EIN	Kokomo, IN 46901	
EIN	35-0867972	
IRC code section Method of valuation	501(c)(3)	
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
		0.005
Name and address	San Diego Imperial Council	8,225
	1207 Upas St	
EIN	San Diego, CA 92103 95-1643983	
IRC code section	501(c)(3)	
Method of valuation	301(0)(3)	
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	Seneca Waterways Council	7,075
Name and address	474 East Ave	7,010
	Rochester, NY 14607	
EIN	16-0743108	
IRC code section	501(c)(3)	
Method of valuation	· // /	
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	South Florida Council	7,350
	15255 NW 82nd Ave	
	Miami Lakes, FL 33016	Si .
EIN	59-0637817	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	South Georgia Council	14,975
	1841 Norman Drive	
	Valdosta, GA 31601	
EIN	58-0825827	
IRC code section	501(c)(3)	
Method of valuation		
Description of non-		
cash assistance		
Purpose of grant	To support local council Scouting.	
Name and address	South Texas Council	6,950

11,900

10,570

5,100

15,750

9,750

700 Everhart Terr

Bldg A

Corpus Christi, TX 78411

EIN

74-1143068

IRC code section

501(c)(3)

Method of valuation Description of non-

cash assistance Purpose of grant

To support local council Scouting.

Name and address

Three Fires Council 415 N Second St

St Charles, IL 60174

EIN

36-3831877

IRC code section

501(c)(3)

Method of valuation

Description of noncash assistance

Purpose of grant To support local council Scouting.

Name and address

Trapper Trails Council

1200 East 5400 South Ogden, UT 84403

EIN

87-0212580 501(c)(3)

Method of valuation Description of noncash assistance

IRC code section

Purpose of grant

To support local council Scouting.

Name and address

Twin Rivers Council

253 Washington Ave Ext

Albany, NY 12205

EIN

14-1340028 501(c)(3)

IRC code section

Method of valuation

Description of noncash assistance

Purpose of grant

To support local council Scouting.

To support local council Scouting.

Name and address

Utah National Parks Council

748 North 1340 West Orem, UT 84057

EIN

84-1402736 501(c)(3)

IRC code section

Method of valuation

Description of non-

cash assistance

Purpose of grant

Name and address W D Boyce Council 614 NE Madison Ave

Peoria, IL 61603

EIN IRC code section 37-0661188 501(c)(3)

Method of valuation Description of non-

cash assistance Purpose of grant

To support local council Scouting.

Name and address

Westchester-Putnam Council

41 Saw Mill River Rd

Hawthorne, NY 10532

11,600

BOY SCOUTS OF AMERICA Schedule I, Part IV, Statement 1 13-2750608 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. 6,900 Name and address Westmoreland-Fayette Council 2 Garden Center Dr Greensburg, PA 15601 25-0965266 EIN IRC code section 501(c)(3) Method of valuation Description of noncash assistance Purpose of grant To support local council Scouting. Name and address Arrow WV Inc 18,257,641 1325 West Walnut Hill Lane Irving, TX 75038 EIN 27-0441319 IRC code section 501(c)(3) Method of valuation Description of noncash assistance Support development of national high adventure Purpose of grant 688,651 Name and address Boy Scouts of America Northeast Region Trust Fund 1325 West Walnut Hill Lane Irving, TX 75038 EIN 04-6183691 IRC code section 501(c)(3) Method of valuation Description of noncash assistance

Purpose of grant

Region.

Support local council Scouting in the Northeast

Form: Schedule I

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
Type of grant	Lowe's Foundation Eagle	6600	660,000	assistance
Method of valuation Description of non-cash assistance	Scout Service Projects			
Type of grant	International Youth Scholarships	1	6,000	
Method of valuation Description of non-cash assistance	·			
Type of grant Method of valuation Description of non-cash assistance	Kiefer Scholarship	31	24,750	
Type of grant Method of valuation Description of non-cash assistance	Maguire Scholarship	302	74,917	
Type of grant	National Catholic Committee on Scouting Scholarships	10	12,375	
Method of valuation Description of non-cash assistance				
Type of grant	National Jewish Committee on Scouting Scholarship	8	7,000	
Method of valuation Description of non-cash assistance				
Type of grant Method of valuation Description of non-cash assistance	NESA Scholarship	95	305,422	
Type of grant	Order of the Arrow Special Projects Grants	8	15,000	
Method of valuation Description of non-cash assistance	•			
Type of grant	Palmer Eagle Scout Scholarships	2	5,000	
Method of valuation Description of non-cash assistance				
Type of grant Method of valuation Description of non-cash assistance	Philmont Scholarships	15	7,430	
Type of grant Method of valuation Description of non-cash	Regional Scholarship	1	2,500	

assistance			
Type of grant	Florida Seabase Scholarships	29	17,800
Method of valuation			
Description of non-cash			
assistance			
Type of grant	Samuel Pratt Venturing	1	13,350
	Scholarships		
Method of valuation			
Description of non-cash			
assistance			
Type of grant	Waite Phillips Grants	23	4,600
Method of valuation			
Description of non-cash			
assistance			
Type of grant	Youth Development	1	1,000
	Scholarship		
Method of valuation	•		
Description of non-cash			
assistance			

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

the Check the appropriate box(es) if the organization provided any of the following to or for a person isted in Form \$990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Payments for business use of personal use ☐ Travel for companions ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Discretionary spending account ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Discretionary spending account ☐ Payments for least of the services (e.g., maid, chauffeur, chef) ☐ Travel for organization and gross up payments ☐ Payments for low a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain ☐ Travel for 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? ☐ The organization of the CEO/Executive Director, regarding the items checked in line 1a? ☐ The organization of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Independent compensation consultant ☐ Part III. ☐ Compensation or a related organization: ☐ Approval by the board or compensation committee ☐ Participate in, or receive payment from, a supplemental nonqualified retirement plan? ☐ Ab ✓ ☐ Participate in, or receive payment from, a supplemental nonqualified retirement plan? ☐ Ab ✓ ☐ Participate in, or receive payment from, a supplemental nonqualified retirement plan? ☐ Ab ✓ ☐ The organization? ☐ Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: ☐ The organization? ☐ Form 990, Part VII, Section A, l	Part	Questions Regarding Compensation			
990. Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. ☑ First-class or charter travel ☐ Payments I Pousiness use of personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Payments For business use of personal residence ☐ Travel for companions ☐ Payments For business use of personal residence ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Travel for companions ☐ Payments ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Payments ☐ Payments for business use of personal residence ☐ ☐ Travel for companions ☐ Payments ☐ Payments for business use of personal residence ☐ ☐ Travel for companions ☐ Payments ☐ Did the organization and for the expenses described above? If *No,* complete Part III to explain for personal personal personal services (e.g., maid, chauffeur, chef) 1 b If any of the boxes on line 1a are checked, did the expenses described above? If *No,* complete Part III to explain for personal personal services (e.g., maid, chauffeur, chef) 1 b If the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, the personal for personal personal for personal expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, but explain in Part III. ☐ Indicate which, if any, of the following the filing organization accordance or the personal consultant ☐ Do not check any boxes for methods used by a related organization consultant ☐ Do not check any boxes for methods used by a related organization consultant ☐ Do not check any boxes for methods used by a related organization consultant ☐ Dought the Eco/Executive Director, but explain in Part III. 2 b Participate in, or receive payment from, an eq				Yes	No
☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ 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. c 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?	1a	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
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 CEC/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 CEC/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEC/Executive Director, but explain in Part III. ☑ Compensation committee ☑ Independent compensation consultant ☐ Form 990 of other organizations ☑ 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 filling organization or a related organization: a Receive a severance payment from, a supplemental nonoualified retirement plan? b Participate in, or receive payment from, an equity-based compensation arrangement? f "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. 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: a The organization? b Any related organization? 5 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: a The organization? 6 Any related organization? 6 Any related organization and the net earnings of: a The organization? 6 Any related organization? 6 Any related organization? 7 ✓ 8 Were any amounts reported in Form 990, Part VII, Section A, line 1a, did the organization provide any non		 ✓ Travel for companions ☐ Payments for business use of personal residence 		Annie Sie J	3
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				The state of	rii
or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain			H-		
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?	b		i lieu	1-11	100
directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Compensation survey or study Porm 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: Receive a severance payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: The organization? Any related organization? If "Yes" to line 6a or 6b, describe in Part III. Were any amounts reported 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. 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. If Image is a subject to the initial contract exception described in li		explain and the second of the	1b	1	
organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee	2		2	1	
Independent compensation consultant	3	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? dt "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. 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: a The organization? b Any related organization? if "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? b Any related organization? if "Yes" to line 6a or 6b, describe in Part III. 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. 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		✓ Compensation committee ✓ Written employment contract			
During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: The organization? If "Yes" to line 5a or 5b, describe in Part III. 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: The organization? If "Yes" to line 6a or 6b, describe in Part III. 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. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			In s		30
organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: a The organization? b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 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. 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. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Interest of the initial contract exception also follow the rebuttable presumption procedure described in Interest of the initial contract exception also follow the rebuttable presumption procedure described in Interest of the organization also follow the rebuttable presumption procedure described in Interest of the organization also follow the rebuttable presumption procedure described in Interest of the organization also follow the rebuttable presumption procedure described in Interest of the organization also follow the rebuttable presumption procedure described in Interes		☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: The organization? Any related organization? 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: The organization? Any related organization? 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: The organization? Any related organization? 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. 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. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	4				000
c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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: a The organization? b Any related organization? f "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? b Any related organization? if "Yes" to line 6a or 6b, describe in Part III. 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. 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. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	а	Receive a severance payment or change-of-control payment?	4a	1	
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. 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: a The organization? b Any related organization? f "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? f "Yes" to line 6a or 6b, describe in Part III. 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. 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. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	b		4b	1	
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9. 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: The organization? Any related organization? 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: The organization? Any related organization? 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: Any related organization? 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	С		4c		1
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: a The organization?		If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
compensation contingent on the revenues of: a The organization?				113	w 5
b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	5				
If "Yes" to line 5a or 5b, describe in Part III. 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: a The organization?	а		5a	1	
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: a The organization?	b	Any related organization?	5b		1
a The organization?	6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
b Any related organization?				t ju	
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					<u>/</u>
 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	D		60		<u> </u>
 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	7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	7		1
to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		1		(10)
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		1
	9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			

Schedule J (Form 990) 2012

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.

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation :	(C) Retirement and	Oldovotació (O)	(E) Total of an invest	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	(b) Nontaxable benefits	(E) (i)–(D) (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
Robert J Mazzuca, Chief Scout	8	311,828	43,707	1,425,557	119,430	21,457	1,921,979	0
1 Rambar (lan Ray 2012)	<u> </u>	0	0	0	0	0	0	0
C Wayne Brock, Chief Scout	8	392,627	28,438	256,692	260,863	20,803	929,423	0
2 ACSEICOO (150-Aug 2012)	Ξ	0	0	0	0	0	0	0
Bradley Farmer, ACSE	<u> </u>	299,008	46,267	62,499	112,136	21,806	541,716	0
3 Development	Ξ	0	0	0	0	0	0	0
James J Terry Jr, Former ACSE	E	173	25,007	63,094	0	0	88,274	0
4 and CFU	E	0		0	0	0	0	0
Al Lambert, Regional Director	6	280,953	21,006	33,200	104,756	23,133	463,048	0
5	Œ	0	0	0	0	0	0	0
Richard Mathews, Deputy Legal	E	262,049	0	12,560	87,781	19,543	381,933	0
6 Counsel	<u> </u>	0		0	0	0	0	0
Ponce Duran, Regional Director	<u> </u>	257,505	20,486	58,958	162,935	30,818	530,702	0
7	Ξ	0	0	0	0	0	0	0
Mike Ashline, Supply Group	(276,460	0	14,072	55,675	24,198	370,405	0
8 Director	€	0		0	0	0	0	0
Perry Cochell, Director, Office of	E	211,564	0	8,990	88,951	30,190	339,692	0
9 Philanthropy	€	0	0	0	0	0	0	0
Gary Butler, ACSE Council	E	270,919	22,344	48,350	139,823	26,727	508,163	0
10 Operations	(E)	0	0	0	0	0	0	0
Robert A Tuggle, CFO	6	326,811	24,746	156,207	143,552	20,384	671,700	0
11	€	0	0	0	0	0	0	0
Tom Fitzgibbon, Regional	6	291,025	24,567	51,290	134,319	31,667	532,868	0
12 Director	€	0	0	0	0	0	0	0
Don McChesney, Regional	8	302,797	23,895	111,366	117,039	23,262	578,359	0
13 Director	€	0	0	0	0	0	0	0
John Green, Group Director -	6	237,087	0	77,462	132,115	19,382	466,046	0
14 Outdoor Adventures	€	0		0	0	0	0	0
	8							
15	Ξ							
	<u> </u>					9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
16	€							

art 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.

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 Schedule J, Part I, Line 1a - Employees who travel extensively are allowed to join the Airline Travel Clubs for a total of \$4,050. The payment of Admirals Club fees were not included in included in employee compensation. The Chief Scout Executive, and Assistant Chief Scout Executive are reimbursed for club dues at the LaCima club which is used for meeting 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 2012 was \$129,003 and was not potential donors, volunteers, and offsite meetings. These expense reimbursements are not included in taxable employee compensation. The total of the LaCima expense in 2012 was \$5,448. Other expenses of \$120 were paid by the organization for cleaning services related to a department directors meeting held at the employee's home. Participants in the non reimbursement of these expenses are not included in employee taxable compensation. The total expense for spousal travel during 2012 was \$68,818. Employees traveling with organization requiring spousal participation. Their expenses are considered necessary to fullfill the business purpose of the organization. All expenses are substantiated. The qualified retirement restoration plan have the taxable portion grossed-up to cover the taxes.

Schedule J, Part I, Line 3 - The Hay Group conduct an Intermediate Sanctions review during late 2012 to review the total compensation, benefits and perquisites for the Chief Scout Executive and Chief Financial Officer. The review was presented to the National Council Executive Compensation Committee and accepted in March 2013. This was a routine Intermediate Sanctions review of BSA's disqualified individuals and no new programs were added or changed.

Robert A Tuggle \$81,276 restoration plan; John Green \$27,715 restoration plan; Bradley Farmer \$31,929 restoration plan; Don McChesney \$57,879 restoration plan; Gary Butler \$24,737 otherwise be limited by the Omnibus Budget Reconcilliation Act of 1993. Benefits attributed under the Restoration Plan supplement those accrued under the qualified Retirement Plan 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 restoration plan and Ponce Duran \$29,357 restoration plan; Al Lambert \$16,327 restoration plan; Richard Mathews \$3,972 restoration plan. Robert J Mazzuca retired after 41 years of \$655,542 plan 457(f) ; James J Terry Jr \$62,819 plan 457(f); C Wayne Brock \$127,680 restoration plan; Mike Ashline \$5,139 restoration plan; Tom Fitzgibbon \$25,003 restoration plan; and payments do not commence until an employee's retirement. Participants include employees with compensation over \$ 250,000. Robert J Mazzuca \$196,139 restoration plan, service in August 2012 - the change of control payment (unused vacation and severance) was \$324,995.

Schedule J, Part I, Line 5 - An Annual Incentive Plan was adopted with a component of compensation is based on items such as: membership, obtaining funding commitments, maintaining operations within budget, and achieving goals within the organizations strategic plan.

SCHEDULE K (Form 990) **BOY SCOUTS OF AMERICA**

Name of the organization 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.

OMB No. 1545-0047

Open to Public Inspection

▶ See separate instructions. ▶ Attach to Form 990.

Employer identification number 22-1576300

Ġ	L								0050/61-77	2000	
Palc	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Descrip	(f) Description of purpose	(g) Defeased	ed (h) On behalf of		(i) Pooled financing
*									issuer		
•	(WV)	55-6000314		11/05/2010	50,000,000		quipping of the mily National Sco	Yes No	Yes	No Yes	8 >
m	The County Commission of Fayette County (WV)	55-6000314		11/05/2010	50,000,000	4000	quipping of the mily National Sco			. `	<u> </u>
ပ	County Commission of Fayette County	55-6000314		03/09/2012	175,000,000	100	quipping of the mily National Sco			`	\ \
b											
Part	1 Proceeds										
					A	æ	O		-	۵	
-	Amount of bonds retired		16		1,214,941	1,064,359	6	0			
8	Amount of bonds legally defeased		10 10 10 10 10 10 10 10 10 10 10 10 10 1	•:	0		0	0			
က	Total proceeds of issue	***	#2 #2 #3	*5	50,000,000	50,000,000		175,000,000			
4	Gross proceeds in reserve funds	* * * * * *	20 20 20 20		0		0	0			
2	Capitalized interest from proceeds	S 5 8 8 8 8	*		0		0	0			
9	Proceeds in refunding escrows.	* * * *		•	0		0	0			
7	Issuance costs from proceeds	9 15 15 15 15 15 15 15 15 15 15 15 15 15	* *		0		0	0			
8	Credit enhancement from proceeds		94 94 84	2	0		0	0			
6	Working capital expenditures from proceeds	sı	*	0.0	0		0	0			
9	Capital expenditures from proceeds				0		0	0			
F	Other spent proceeds	20 00 00 00 00 00 00 00 00 00 00 00 00 0	2 2 2	**	50,000,000	50,000,000	100	105,675,074			
12	Other unspent proceeds	A R R R SE SE	18. 18. 18. 18.	81	0		9 0	69,324,926			
13	Year of substantial completion	20 (20 (20 (20 (20 (20 (20 (20 (20 (20 (* * *	*	2013	2013	3	2013			
				Yes	No	Yes No	Yes	No	Yes	No	
14	Were the bonds issued as part of a current refunding issue?	refunding issue?	9 9	* *	`	`		,			
15	Were the bonds issued as part of an advance refunding issue?	ce refunding issu	e?	18	`	`		`			
16	Has the final allocation of proceeds been made? .	nade?	9	`		`>	`				
17	Does the organization maintain adequate books and records final allocation of proceeds?	books and record	ds to support the	the .		`	`				
Par	Part III Private Business Use										
					A	В	O		_	۵	
-	Was the organization a partner in a partnership, or a member	ship, or a membe	r of an LLC,	Yes	oN N	Yes	Yes	No	Yes	No	
	which owned property financed by tax-exempt bonds? .	mpt bonds?			`	`		`,			

bond-financed property?.

N

Are there any lease arrangements that may result in private business use of

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Schedule P

Schedule K	Schedule K (Form 990) 2012 Part III Private Business Use (Continued)								Page 2
(A		8		ပ		D
gg	Are there any management or service contracts that may result in private business use of hond-financed property?	Yes	No.	Yes	S.	Yes	No	Yes	No
۵	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside		>		>		>		
U	Are there any research agreements that may result in private business use of bond-financed property?		1				ā		
ס	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?		>		>		>		
4	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		% 0		8
2	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 powerment.								8
9			%0		%0		%0		% %
7		>	%0	,	%0	,	0 20		%
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		`		>	•	,		
q	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		. 70		ò
o	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?				3		R		70
o	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	>		`		>			
Part IV	V Arbitrage					•			
		A			B		U	_	٥
2		Yes	No	Yes	No	Yes	No	Yes	No
	Has the issuer filed Form 8038-T?		1		`		`		
2	If "No" to line 1, did the following apply?								
	Rebate not due yet?	>		`		`			
	*		>		>		`		
د			>		`		`		
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
ဗ	Is the bond issue a variable rate issue?		>		`		`		
4 a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		`		`		`		
٩	Name of provider								
1	Term of hedge								
	Was the hedge superintegrated?								
Φ	Was the hedge terminated?								
							•	Schedule K (F	Schedule K (Form 990) 2012

		A		В	J	.	_	۵
	Yes	No	Yes	No	Yes	No	Yes	N
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? .		`		`		`>		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period? .		>		`		>		
7 Has the organization established written procedures to monitor the								
팅	>		,		1			
Part V Procedures To Undertake Corrective Action								
		A		В	၁		_	D
Has the organization established written procedures to ensure that violations	Yes	No	Yes	9 N	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program it self-remediation is not available	9		8					
ander applicable regulations: Sipplemental Information Complete this part to provide additional information for reconnect to questions on Schodulo K (socioety activity)	y linformi	tion for ro	> 000000	oucitoo 15	, 00 uo	1003) XI OI	300it0111100	-
			on socialods	questions		1 (300)	וופרו מכרוסוי.	./0
Schedule K, Paich, Line 3 - Worley from the borid ISSUe was used by a related organization in the construction of the Summit Becntel Family National Scout Reserve and National Jamborae site. Interest was canitalized by the related organization.	In the cons	truction of the	e summit B	ecntel Family	National Sc	out Keserve	and Nationa	
- 11 - 4	1	1		7	0 10 10 10 10		4	-
Schedule K, Part II, Line 11 - Money from the bond issue was used by a related organization in the construction of the Summit Bechtel Family National Scout Reserve and National	ın the con	struction of	he Summit	Sechtel Fami	y National S	cout Reserv	e and Nation	la
Jamboree site. Interest was capitalized by the related organization.								
							Schedule K (Form 990) 201	orm 990) 20

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

BOY SCOUTS OF AMERICA

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

Name of the organization

Part I

Employer identification number

22-1576300

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-FZ, Part V, line 40b

(1) (2) (3) (4) (5)	1	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Co	rrected
(2) (3) (4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.	•	(a) Hame of disquamed person	organization	(c) Description of transaction	Yes	No
(2) (3) (4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.	(1)					
(3) (4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.						
(4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958						1
(5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.						
2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.						
2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.						
under section 4958		Enter the amount of tax incu	rred by the organization managers or disqui	alified persons during the year		-
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization					S	
	3	Enter the amount of tax, if any	, on line 2, above, reimbursed by the organizat	tion ▶ 9	<u> </u>	
	art		nterested Persons.	line 200 ou Fewer 200 Port IV line 2	C	:::::::::::::::::::::::::::::::::::::::

organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or n the ization?	(e) Original principal amount	(f) Balance due	(g) In c	lefault?	by bo	proved pard or nittee?	(i) W agree	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
10)												
otal			1			\$			30	3.51		101

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 of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) Douglas Dittrick	Board Member	970	Gift of commemorative BSA	Appreciation Gift
(2) Terry Dunn	Board Member	777.7100		Appreciation Gift
(3) Jack Furst	Board Member and Officer	970	Gift of commemorative BSA	Appreciation Gift
(4) J Brett Harvey	Board Member	200	Gift of bowl.	Appreciation Gift
(5) Stephen King	Board member	55	Gift of Summit Pen	Appreciation Gift
(6) Lyle Knight	Board Member and Officer	200	Gift of Summit bowl	Appreciation Gift
(7) Frank McAllister	Board Member	55	Gift of Summit Pen	Appreciation Gift
(8) Drayton McLane Jr	Board Member and Officer	970	Gift of commemorative BSA	
(9)				
(10)			98	

Par	Business Transactions Involv Complete if the organization an		0, Part IV, line 28a, 2	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) Sha organiz reven	zation's
1000-101					Yes	No
(1)	AT&T	Chairman and CEO on BS		Telephone Services and Sponsor		/
(2)		President and CEO on BS		Telephone Service		/
(3)	American Airlines	Former Board Member on		Air travel		/
(4)		Former Board Member on		Purchased computers		/
(5)		Board Member on BSA Bo		Purchased supplies		1
(6)	Heritage Institute	Key employee is co-found	15,000	Training materials		1
(7)						
(8)						
(9)						
(10) Par						
Sche				ns on Schedule L (see instructions some board members which did no		ed
	ese transactions.					

******	***************************************	**************************	***************************************	***************************************		
******	**************************************					******

				***************************************	•••••	

SCHEDULE M (Form 990)

Noncash Contributions

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

90, 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

Inspection Employer identification number

22-1576300

OMB No. 1545-0047

2012

Open To Public

Par	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	Method noncash cor	(d) of determir ntribution a	
1	Art-Works of art			· sim sosj · are mij into /g			
2	Art-Historical treasures						
3	Art-Fractional interests						
4	Books and publications						
5	Clothing and household		NASS IN A SAID OF SAID				
	goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded	1	24	5,103,860	FMV on date	e of aift	
10	Securities—Closely held stock .					3	
11	Securities – Partnership, LLC, or trust interests						
12	Securities—Miscellaneous						
13	Qualified conservation						
. •	contribution—Historic						
	structures						
14	Qualified conservation						
	contribution-Other						
15	Real estate-Residential						
16	Real estate - Commercial						
17	Real estate-Other						======
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies . 🗼						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other► ()						
26	Other ► (
27	Other ► (-
28	Other ► (
29	Number of Forms 8283 received	by the org	anization during the tax y	ear for contributions for			
	which the organization completed	Form 8283	, Part IV, Donee Acknowled	lgement	29		0
						Yes	s No
30a	During the year, did the organizati	ion receive	by contribution any prope	rty reported in Part I, lines	1-28 that		17 V2
	it must hold for at least three year	rs from the	date of the initial contribut	tion, and which is not requ	uired to be		
	used for exempt purposes for the	entire holdiı	ng period?			30a	1
b	If "Yes," describe the arrangement						
31	Does the organization have a g	gift accept	ance policy that requires	the review of any nor	n-standard		
	contributions?					31	1
32a	Does the organization hire or use	third parti	es or related organizations	to solicit, process, or se	II noncash		
			M			32a	1
b	If "Yes," describe in Part II.						
33	If the organization did not report an	amount in	column (c) for a type of prop	perty for which column (a) is	s checked.		
	describe in Part II.				,	38	The state of

Schedule M (Form 990) (2012) 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 O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

BOY SCOUTS OF AMERICA

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Employer identification number

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.

2012 Open to Public Inspection

BOY SCOUTS OF AMERICA	22-1576300
Form 990, Part III, Line 3 - The organization devoted a significant portion of their resources to the deve	elopment of the Summit Bechtel
Family National Scout Reserve and Jamboree site in West Virginia in conjunction with Arrow WV, Inc.	an affiliated organization.
V	A P P P P P P P P P P P P P P P P P P P
Form 990, Part VI, Section B, Line 11b - Form 990 was reviewed and approved by the Controller and Na	ational Legal Counsel. An executive
summary was prepared and that, along with Form 990 without Schedule B, was distributed to the Office	
review. PricewaterhouseCoopers reviewed and signed Form 990 as paid preparer. Finally, Form 990 w	ithout Schedule B was distributed to
all Executive Board members before it was filed. Schedule B was not included due to confidentiality a	greements with donors, some of
which are members of the Executive Board.	9
Form 990, Part VI, Section B, Line 12c - Annually a conflict of interest policy confirmation is required of	of the organizations Executive Board
Members and employees responsible for every department. The organization uses an outside compan	y for anonymous reporting of
potential ethics violations.	**************************************
Form 990, Part VI, Section B, Line 15 - The Hay Group conducted an Intermediate Sanctions review du	
compensation, benefits and perquisites for officers. The review was presented to the National Council	Executive Compensation Committee,
composed of volunteers and accepted in March 2013.	
Form 990, Part VI, Section C, Line 19 - Governing documents and conflict of interest policy are availab	le upon request.

Schedule O, Statement 1

Form: 990 Page: 2

Line Number: Part III Line 4d

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. In addition, protection and promotion of the Scouting brand.	16,278,616	141,605	30,801
	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.	68,248,643	0	16,570,928
	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.	1,412,449	0	0
Total:		85,939,708	141,605	16,601,729

Page: 1

BOY SCOUTS OF AMERICA 22-1576300

Form: 990 Page: 6

Line Number: Part VI Section C Line 17

States Where Copy Of Return Is Filed

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

BOY SCOUTS OF AMERICA

Related Organizations and Unrelated Partnerships

▶ See separate instructions. Attach to Form 990.

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

Open to Publ 2012

OMB No. 1545-0047

Employer identification number Inspection

22-1576300

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state	(d) Total income	(e) End-of-year assets	(f) Direct controlling
		or foreign country)			entity
(1) BSA Asset Management LLC (26-2473220)	General Partner/Investments DE	DE	0	0	O N/A
1325 West Walnut Hill Lane, Irving, TX 75038-3008			•	•	
(2) Atikokan Youth Ventures Inc	Non-Profit Youth	Canada	0	0	O N/A
PO Box 509, Ely, MN 55731	Organization				
(3) Atikaki Youth Ventures Inc	Non-Profit Youth	Canada	0	0	0 N/A
PO Box 509, Ely, MN 55731	Organization			1	
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(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled	12(b)(13)
				# - W - W - W - W - W - W - W - W - W -		entit	у?
						Yes	No
(1) Learning for Life (75-2396057)	Youth development.	DC	501(c)(3)	6	N/A		
1329 West Walnut Hill Lane, Irving, TX 75038							>
(2) National Boy Scouts of America Foundation (75-2675978)	Support Scouting	DC	501(c)(3)	7	N/A		
1325 West Walnut Hill Lane, Irving, TX 75038-3008							>
(3) Learning for Life Foundation (26-2270708)	Support Learning for	XL	501(c)(3)	7	Learning for Life		į,
1329 West Walnut Hill Lane, Irving, TX 75038	Life programs.				•		>
(4) Scout Executives Alliance (22-6069455)	Support Scouts'	TX	501(c)(9)		N/A	28	
PO Box 152079, Irving, TX 75015-2079	employees					>	
(5) Boy Scouts of America Employee Welfare Benefits Plan (75-23478 Welfare Benefits Plan	8 Welfare Benefits Plan	XX	501(c)(9)		N/A	,	
P O Box 152079, Irving, TX 75015-2079						>	
(6) Arrow WV Inc (27-0441319)	Develop program &	WV	501(c)(3)	7	Boy Scouts of	`	
1325 West Walnut Hill Lane, Irving, TX 75038-3008	facility for Boy Scouts				America	>	
(7) BSA Endowment Master Trust (27-6850785)	Support Scouting	DE	501(c)(3)	7	N/A		,
1325 West Walnut Hill Lane, Irving, TX 75038-3008							>
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	.06	Cat. No	Cat. No. 50135Y		Schedule R (Form 990) 2012	Form 99(0) 2012

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.)

(k) Percentage ownership		78.519%		*						(i) Section 512(b)(13) controlled entity?	8								Schedule R (Form 990) 2012
100	_		-	-	-			-	art IV	(i) ection 5 contra entii	Yes								rm 99
(i) General or managing partner?	s No	>	-		-			-	90, P	age S									R (Fo
	Yes	0	-					-	orm 9	(h) Percentage ownership									hedule
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									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.)	(g) Share of end-of-year assets									So
(h) Disproportionate allocations?	å								were	ıtal en									
Disprop	Yes	-							n ans ar.)	(f) Share of total income									
end-of-		407,487,676							zatio ax ye	Sha									
(g) Share of end-of- year assets		407,4							organi og the t	(e) Type of entity (C corp, S corp, or trust)									
(f) Share of total income		24,590,901							te if the	Type o									
Share		24							mple or tru	gilling									
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		70							Frust (Co poration	(d) Direct controlling entity									
Predo income unre exclud tax (Excluded							tion or	nicile n country)									
ntrolling ity									orporal reated	(c) Legal domicile (state or foreign country)									
(d) Direct controlling entity		N/A							as a Co	35									
(c) Legal domicile (state or foreign		DE							s Taxable	(b) Primary activity									
		nent							ations relate										
(b) Primary activity		t investr							rganiz r more	_									
Primai		lowmen							ated O	ganization									
		ng Enc				<u> </u>	<u> </u>	-	Rela	ated org									
jo u		(1) BSA Commingled Endowmen Endowment investment 1325 West Walnut Hill Lane, Irving							tion of	(a) Name, address, and EIN of related organization									
(a) Name, address, and EIN of related organization		ngled E							ntifica 34 be	ess, and									
i, addrei lated on		ommi Walnı							Ine Ine	ıe, addr		-							
Name		BSA C							Part IV	Nan									
		132	(2)	(6)	4	(2)	9	(E)	T C			E	(2)	(6)	(4)	(2)	(9)	E	

Part V

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

Note. Complete line 1 if any	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 During the tax year, dic	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?	more related organ	izations listed in Part	S II-IV?	
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			5 5	1a 🗸
b Gift, grant, or capital or	Gift, grant, or capital contribution to related organization(s)				1b /
c Gift, grant, or capital co	Gift, grant, or capital contribution from related organization(s)				1c /
d Loans or loan guarante	Loans or loan guarantees to or for related organization(s)			6 ×	> PL
e Loans or loan quarante	Loans or loan quarantees by related organization(s)			6	10
				© ⊗ \$5 • • •	<u>v</u>
f Dividends from related organization(s)	organization(s)				4 7
				10 32 32	>
g Sale of assets to related organization(s)	d organization(s)			* * *	1g ~
h Purchase of assets fror	Purchase of assets from related organization(s)			69 78 78	th /
 Exchange of assets with 	Exchange of assets with related organization(s)			(S)	;=
j Lease of facilities, equi	Lease of facilities, equipment, or other assets to related organization(s)			38 38	>
				181 184 184	
k Lease of facilities, equi	Lease of facilities, equipment, or other assets from related organization(s)				74
l Performance of service	Performance of services or membership or fundraising solicitations for related organization(s)	•	•	¥6 :	· / =
m Performance of service	Performance of services or membership or fundraising solicitations by related organization(s)		•		
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				10 /
	pos with related exception(s))
	oraning of paid eniployees with related organization(s)			36 36) OI
	Baimhi reamont paid to related organization(e) for expenses				i i
Together School Sales	related organization(s) for expenses			69 62 62	A .
	neillibulsettietit palu by related ofganization(s) for expenses			5 3 8	> 01
	Other transfer of each or property to related organization(s)			(600 (600) (600)	۱۲ ۷
,	Other transfer of cash of property from related organization(8)			33 37 10 11	1s <
2 If the answer to any of	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	iplete this line, inclu	ding covered relation	ships and transaction	on thresholds.
2	(a) Name of other organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	g amount involved
		type (a~s)			
See Schedule R, Part VII, Statement 1	atement 1				
(1)					
ć					
(5)					
(3)					
(4)					
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				Schedule F	Schedule R (Form 990) 2012

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

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.

er groot over any not a related organization. See instituctions regarding exclusion for certain investment partnerships.	gai lization. Oct	I ISLI UCUOITS LE	garding exclusi	IOII IOI CELLA	III IIIVestrient pa	trinersnips.				
(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	(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)	General or managing partner?	(k) Percentage ownership
			section 512-514)	Yes No			Yes No		Yes	
(1)	1								3	
(2)										
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(13)										
(14)	34									
(15)										
(16)										
								Sche	dule R (For	Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 Page 5 Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see

Form: Schedule R

Page: 3

Line Number: Part V Line 2

Description of Covered Relationships and Transaction Thresholds

		Amount involved
Name	Scout Executives Alliance	12,000
Transaction type	m	
Method of determining amount involved	Estimated FMV.	
Name	Scout Executives Alliance	548,194
Transaction type	r	
Method of determining amount involved	Per tax return of Scout Executives Alliance.	
Name	Boy Scouts of America Employee Welfare	64,888,149
	Benefits Plan	
Transaction type	r	
Method of determining amount involved	Cash transactions per tax return of related organization.	
Name	BSA Commingled Endowment Fund LP	4,254,305
Transaction type	b	
Method of determining amount involved	Per tax return of related organization.	
Name	BSA Commingled Endowment Fund LP	16,962,213
Transaction type	r	
Method of determining amount involved	Per tax return of related organization.	
Name	BSA Commingled Endowment Fund LP	4,244,700
Transaction type	a-i	
Method of determining amount involved	Per tax return of related organization.	
Name	Arrow WV Inc	7,253,264
Transaction type	a-i	
Method of determining amount involved	Interest expense incurred by Arrow through the conduct of an activity	
	which would be exempt if conducted by the Boy Scouts of America.	

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, are filing for an Additional (Not Automatic) 3-Month in the complete Part II unless you have already been go	onth Exten	sion, complete onl	y Part II (on page 2 of	this t	form).	
Electror a corpor 8868 to Return f	nic filing (e-file). You can electronically file Form ation required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Personations). For more details on the electronic filing of the	n 8868 if yo nal (not auto forms listed l Benefit (u need a 3-month a omatic) 3-month ext d in Part I or Part II Contracts, which m	utomatic extension of ension of time. You ca with the exception of ust be sent to the IF	time an ele f Forr RS in	to file (6 ectronicall n 8870, I paper fo	months for ly file Form nformation ormat (see
Part I							
A corpo Part I on All other	ration required to file Form 990-T and reque ly	sting an a	utomatic 6-month	extension—check this			. ▶ 🗆
to tile ind	come tax returns.			Enter filer's identifying	a num	nher, see i	nstructions
	Name of exempt organization or other filer, see in	nstructions.		Employer identification			
Type or print	Boy Scouts of America			22-1	157630	00	
•	Number, street, and room or suite no. If a P.O. b	ox, see instr	uctions.	Social security number			
File by the due date for							
filing your return. See instructions	City, town or post office, state, and ZIP code. Fo	or a foreign a	ddress, see instruction	is.			
	Return code for the return that this application	is for (file a	separate application	n for each return) .			0 1
Applica	ation	Return	Application		. ,		Return
Is For		Code	Is For				Code
Form 99	90 or Form 990-EZ	01	Form 990-T (corpo	oration)			07
Form 99	90-BL	02	Form 1041-A				08
Form 4	720 (individual)	03	Form 4720				09
Form 99	90-PF	04	Form 5227				10
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 99	90-T (trust other than above)	06	Form 8870				12
Teleph If the o	one No. ► 972-580-2300 rganization does not have an office or place of be for a Group Return, enter the organization's for	Fousiness in our digit Gro	up Exemption Numb	heck this box per (GEN)		$\underline{}$. If this	
	hole group, check this box \ldots \blacktriangleright \square . If		t of the group, chec	k this box	▶ [and att	ach
1 I u	n the names and EINs of all members the extens request an automatic 3-month (6 months for a contil	ornoration i	required to file Form zation return for the	990-T) extension of ti organization named a	me bove.	. The exte	ension is
>	tax year beginning	, 20	, and ending			, 20	
2 If	the tax year entered in line 1 is for less than 12 in Change in accounting period	months, ch	eck reason: Initia	al return 🔲 Final ret	urn		
3a If	this application is for Form 990-BL, 990-PF, 99 onrefundable credits. See instructions.	0-T, 4720,	or 6069, enter the to	entative tax, less any	3a	\$	0
b lf	this application is for Form 990-PF, 990-T,	4720, or 6	069, enter any ref	undable credits and			<u>_</u>
e:	stimated tax payments made. Include any prior y	/ear overpa	lyment allowed as a	credit.	3b	\$	0
Е	alance due. Subtract line 3b from line 3a. Includ FTPS (Electronic Federal Tax Payment System).	See instruc	ctions.		3с		0
Caution.	If you are going to make an electronic fund withdrawal	with this Fo	rm 8868, see Form 84	53-EO and Form 8879-E	O for p	payment in	structions.

-	68 (Rev. 1-2013) I are filing for an Additional (Not Automatic) 3-M i	onth Exter	sion, complete o	nly Part II and check th	is bo	x	Page 2
note.	Only complete Part II if you have already been grain			=			
	are filing for an Automatic 3-Month Extension,						
Part	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file	e the original (no cop	ies n	eeded).	,
				Enter filer's identifyin	g nun	nber, see	instructions
Туре	Name of exempt organization or other filer, see in	nstructions.		Employer identification	numt	er (EIN)	or
print	Boy Scouts of America			22-	15763	00	
File by t	Number, street, and room or suite no. If a P.O. b	ox, see instr	uctions.	Social security number	(SSN)	_
due date							
filing you return. S		r a foreign a	ddress, see instruction	ons.			
nstructi							
	ha Datum and for the veture that this application	in for Hilo o	aanavata annliaati	ion for each return			
Enter t	he Return code for the return that this application	is for (file a	separate applicati	on for each return) .	• •		. 0 1
Appli	cation	Return	Application				Return
Is Fo	·	Code	Is For				Code
Form	990 or Form 990-EZ	01			nga ja jagi		
Form	990-BL	02	Form 1041-A				08
Form	4720 (individual)	03	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
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Knowledge and belief, it is true, correct and complete, and Signature • Utthwww Hugh

Title ➤ Controller

6/7/3013 Form **8868** (Rev. 1-2013)