Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
NATIONAL 4-H COUNCIL

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
7100 CONNECTICUT AVENUE

City or town, state or country, and ZIP + 4
CHEVY CHASE, MD 208154999

D Employer identification number
36-2862206

E Telephone number
(301) 961-2800

G Gross receipts $ 35,033,925

F Name and address of Principal Officer
Donald T Floyd Jr
7100 CONNECTICUT AVENUE
CHEVY CHASE,MD 208154999

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list See instructions)

H(c) Group Exemption Number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Web site: ▶ www 4-h org

K Type of organization ☑ Corporation ☐ trust ☐ association ☐ other ▶

L Year of Formation 1976 **M** State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
See Schedule OTo advance the 4-H youth development movement to build a world in which youth and adults learn, grow and work together as catalysts for positive change

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	28
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5	Total number of employees (Part V, line 2a)	5	181
6	Total number of volunteers (estimate if necessary)	6	67
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	261,298
b	Net unrelated business taxable income from Form 990-T, line 34	7b	21,231

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	15,700,293	11,237,195
	9	Program service revenue (Part VIII, line 2g)	7,942,621	7,686,312
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,636,125	-124,688
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,546,399	6,682,867
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,825,438	25,481,686
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,861,045	3,000,751
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,409,722	11,773,631
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 2,048,940)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	12,111,962	11,295,449
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	24,382,729	26,069,831
	19	Revenue less expenses Subtract line 18 from line 12	7,442,709	-588,145

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	37,578,089	33,551,985
	21	Total liabilities (Part X, line 26)	9,391,674	11,715,911
	22	Net assets or fund balances Subtract line 21 from line 20	28,186,415	21,836,074

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

▶ Signature of officer — Date 2010-04-30

▶ Donald T Floyd Jr President and CEO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Joyce M Underwood CPA | Date | Check if self-empolyed ▶ ☐ | Preparer's PTIN (See Gen Inst)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ BDO Seidman LLP
7101 Wisconsin Ave Suite 800
Bethesda, MD 208144827

EIN ▶

Phone no ▶ (301) 654-4900

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

Part III **Statement of Program Service Accomplishments** (See the instructions.)

1 Briefly describe the organization's mission

See Additional Data Table

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 8,278,555 including grants of $ 3,000,751) (Revenue $)

see schedule oEDUCATIONAL PROGRAMS - For more than 100 years 4-H has had a positive influence on our nation by preparing generations of productive workers, citizens, and leaders National 4-H Council strives to build on this effort through investing educational resources where change happens-at the local level Funds that support innovation in the areas of healthy living, citizenship, and science, engineering and technology programs enable 4-H professionals and volunteers to build a better future for today's youth For example, National 4-H Council remains focused on a bold goal of reaching one million new young people by 2013 with science, engineering, and technology programs To advance that goal, Council launched the first ever 4-H National Youth Science Day(tm) in October 2008, when 4-H'ers around the country displayed the kind of passion for science exploration that has helped keep America competitive for the past 100 years Similar efforts are underway for the citizenship and healthy living focus areas, providing 4-H with a diverse portfolio of curricula, professional development efforts, thorough evaluation methods, and top tier workforce and leadership development programs for more than 6 million of our nation's youth

4b (Code) (Expenses $ 7,392,921 including grants of $) (Revenue $ 11,467,695)

see schedule oNATIONAL 4-H CENTER 2009 marked National 4-H Youth Conference Center's golden anniversary Now, 50 years after President Dwight D Eisenhower presided over its opening ceremonies, Center is one of the largest nonacademic youth education and conference facilities in the United States and continues to be the national home for 4-H, hosting annual 4-H conferences and year-round training programs for youth, volunteer leaders, and professional staff National 4-H Youth Conference Center hosts more than 30,000 youth each year on its 12-acre Washington, DC metro campus while they tour the city's historic landmarks, attend conferences and leadership programs, and experience the best of our nation's capital And every young person, volunteer leader, or professional who has visited National 4-H Youth Conference Center over the years has always left with something to inspire them-some new point of view, some new idea to take home That's the ingredient that has kept the experience of Center fresh and exciting for every one of its 50 years

4c (Code) (Expenses $ 4,608,491 including grants of $) (Revenue $ 5,478,494)

see schedule oNATIONAL 4-H SUPPLY SERVICE "Make it Happen" and "Born Leader" aren't just great T-shirt slogans For the National 4-H Supply Service, they're a way of life Since 1924, 4-H Supply has provided high-quality branded products to meet the needs of 4-H offices, clubs, and families alike Today, 4-H Supply takes its customer-friendly approach to new levels, with convenient online shopping and expert advice 4-H'ers show their pride every day by purchasing items with the 4-H Name and Emblem 4-H Supply shows the same devotion, providing the best products and the highest level of customer service to keep these dedicated customers coming back, year after year

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses $ 20,279,967 *Must equal Part IX, Line 25, column (B).*

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? *If "Yes," complete Schedule F, Part I*	14b		No
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, Part II*	15		No
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, Part III*	16		No
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	Yes	
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 questions 24b–24d and complete Schedule K. If "No," go to question 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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*	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No

Part IV Checklist of Required Schedules *(Continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	1a	105			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	181			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? **Note:** *If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.*			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
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		No
b	If "Yes," enter the name of the foreign country ______ See the instructions for exceptions and 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, *Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?*			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
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).*					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of $75 or more?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		No
8	*Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	*Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.*					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	*Section 501(c)(7) organizations.* Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	*Section 4947(a)(1) non-exempt charitable trusts.* Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI **Governance, Management, and Disclosure** *(Sections A, B, and C request information about policies not required by the Internal Revenue Code.)*

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

			Yes	No
1a	Enter the number of voting members of the governing body . . (1a) 28			
b	Enter the number of voting members that are independent . . (1b) 28			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or 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	11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No", go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CT , DC , FL , GA , IL , KS , KY , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , TX , UT , VA , WA , WV , WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ own website ☑ another's website ☑ upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

Joseph P Roche
7100 CONNECTICUT AVENUE
CHEVY CHASE,MD 208154999
(301) 961-2800

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

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

1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed

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

* 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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations

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

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

Part VII Continued

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total							▶	1,650,166	0	327,949

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶19

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
EUREST DINING SERVICES PO BOX 91337 Chicago, IL 60693	Food Service	1,037,754
TUFTS UNIVERSITY 4-H STUDY OF POSITIVE YOUTH DEV LIN Meford, MA 02155	Research & Prog Evals	918,782
BANK OF AMERICA PO BOX 15731 Wilmington, DE 19886	Financial Mgmt Services	694,825
Fidelity Investments PO Box 673001 Dallas, TX 75267	investment management service	337,500
University of Minnesota 450 McNamara Alumni Center Minneapolis, MN 55455	printing services	321,982

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 25

Part VIII **Statement of Revenue**

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	**1a** Federated campaigns . . **1a**	61,967				
	b Membership dues **1b**					
	c Fundraising events **1c**					
	d Related organizations . . . **1d**					
	e Government grants (contributions) **1e**	684,482				
	f All other contributions, gifts, grants, and similar amounts not included above **1f**	10,490,746				
	g Noncash contributions included in lines 1a-1f $ 211,117					
	h **Total (Add lines 1a-1f)** . . . . ▶		11,237,195			
Program Service Revenue		Business Code				
	2a NATL 4-H youth conf ct	721,000	6,830,805	6,598,007	232,798	
	b REG FEES and TUITIONS	900,099	855,507	855,507		
	c					
	d					
	e					
	f All other program service revenue					
	g **Total. Add lines 2a-2f** . . . . ▶ $ 7,686,312					
	3 Investment income (including dividends, interest other similar amounts) . . . . ▶		500,705			500,705
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties		123,526			123,526

	(i) Real	(ii) Personal
6a Gross Rents	80,890	
b Less rental expenses		
c Rental income or (loss)	80,890	

		(A)	(B)	(C)	(D)
d Net rental income or (loss) . . . . ▶		80,890			80,890

	(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	6,126,480	
b Less cost or other basis and sales expenses	6,751,873	
c Gain or (loss)	-625,393	

Other Revenue		(A)	(B)	(C)	(D)
d Net gain or (loss) . . . . ▶		-625,393			-625,393
8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 *Attach Schedule G if total exceeds $15,000* . . . . **a**					
b Less direct expenses . . . **b**					
c Net income or (loss) from fundraising events . . ▶					
9a Gross income from gaming activities See part IV, line 19 *Complete Schedule G if total exceeds $15,000* **a**					
b Less direct expenses . . . **b**					
c Net income or (loss) from gaming activities . . . ▶					
10a Gross sales of inventory, less returns and allowances . **a**	9,278,817				
b Less cost of goods sold . . **b**	2,800,366				
c Net income or (loss) from sales of inventory . . ▶		6,478,451	6,449,951	28,500	
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue ______					
e **Total. Add lines 11a-11d** . . . . $					
12 **Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . . ▶		25,481,686	13,903,465	261,298	79,728

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	3,000,751	3,000,751		
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	437,955	175,182	175,182	87,591
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,804,812	6,065,231		1,111,408
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	891,161	538,349	217,893	134,919
9 Other employee benefits	1,045,597	706,290	204,104	135,203
10 Payroll taxes	594,106	401,121	115,916	77,069
11 Fees for services (non-employees)				
a Management				
b Legal	224,429	52,335	171,806	288
c Accounting	165,229	19,650	145,579	
d Lobbying				
e Professional fundraising *See Part IV, line 17*				
f Investment management fees	94,754		94,754	
g Other	1,829,234	1,514,274	182,086	132,874
12 Advertising and promotion				
13 Office expenses	2,236,911	1,972,365	168,340	96,206
14 Information technology	283,090	241,532	27,727	13,831
15 Royalties				
16 Occupancy	401,865	234,639	165,605	1,621
17 Travel	857,226	652,336	75,563	129,327
18 Payments of travel or entertainment expenses for any Federal, state or local public officials				
19 Conferences, conventions and meetings	44,244	8,118	31,079	5,047
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,186,377	991,676	142,308	52,393
23 Insurance	113,073	70,374	42,699	
24 Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a Research & Program eval	1,138,215	1,138,215		
b pr & Promotions	997,009	980,072	2,276	14,661
c program operating Resou	600,503	475,760	98,848	25,895
d curriculum Development	471,176	453,078		18,098
e inkind	211,117	209,557	1,500	60
f All other expenses	440,997	379,062	49,486	12,449
25 **Total functional expenses.** Add lines 1 through 24f	26,069,831	20,279,967	3,740,924	2,048,940
26 **Joint Costs.** Check ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	617,201	1	2,655,617
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	2,834,781	3	3,629,154
	4	Accounts receivable, net	1,227,096	4	1,667,828
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties *Complete Part II of Schedule L*		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) *Complete Part II of Schedule L*		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	1,399,584	8	1,253,430
	9	Prepaid expenses and deferred charges	305,371	9	168,615
	10a	Land, buildings, and equipment cost basis — 10a 31,690,514			
	b	Less accumulated depreciation *Complete Part VI of Schedule D* — 10b 22,653,801	9,257,004	10c	9,036,713
	11	Investments—publicly traded securities	20,504,249	11	13,893,662
	12	Investments—other securities See Part IV, line 11 *Complete Part VII of Schedule D*	1,422,803	12	1,246,966
	13	Investments—program-related See Part IV, line 11 *Complete Part VIII of Schedule D*		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11 *Complete Part IX of Schedule D*	10,000	15	0
	16	**Total assets.** *Add lines 1 through 15 (must equal line 34)*	37,578,089	16	33,551,985
Liabilities	17	Accounts payable and accrued expenses	2,731,965	17	2,406,849
	18	Grants payable		18	
	19	Deferred revenue	1,408,650	19	1,434,934
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability *Complete Part IV of Schedule D*		21	
	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	100,000
	25	Other liabilities *Complete Part X of Schedule D*	5,251,059	25	7,774,128
	26	**Total liabilities.** *Add lines 17 through 25*	9,391,674	26	11,715,911
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	14,784,470	27	8,681,678
	28	Temporarily restricted net assets	13,191,598	28	12,944,049
	29	Permanently restricted net assets	210,347	29	210,347
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	28,186,415	33	21,836,074
	34	Total liabilities and net assets/fund balances	37,578,089	34	33,551,985

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☑ accrual ☐ other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b		No
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1 ☐ A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i).**

2 ☐ A school described in **Section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 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).** (See instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally Integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(See Instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 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.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	5,530,967	6,878,633	9,626,669	15,700,293	11,237,195	48,973,757
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add line 1-3	5,530,967	6,878,633	9,626,669	15,700,293	11,237,195	48,973,757
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						22,241,066
6 **Public Support** subtract line 5 from line 4						26,732,691

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	5,530,967	860,242	9,626,669	15,700,293	11,237,195	48,973,757
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	614,444	860,242	1,089,489	1,977,400	705,121	5,246,696
9 Net income from unrelated business activities, whether or not the business is regularly carried on	41,634	44,179	20,153	20,376	21,520	147,862
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	11,782	23,513				35,295
11 **Total Support** (Add lines 7 through 10)						54,403,610

12 Gross receipts from related activities, etc (See instructions) | 12 | 75,845,363

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

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f)) | 14 | **49.140 %**

15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f | 15 | **52.080 %**

16a **33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☑

b **33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

b **10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

18 **Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(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 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Total of lines 7a and 7b						
8 **Public Support** (Substract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2004	**(b)** 2005	**(c)** 2006	**(d)** 2007	**(e)** 2008	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total Support** (Add lines 9, 10c, 11 and 12)						

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

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	**16**	

Computation of Investment Income Percentage

17 Investment Income Percentage for **2008** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment Income Percentage from **2007** Schedule A, Part IV-A, line 27h	**18**	

19a **33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 36-2862206
Name: NATIONAL 4-H COUNCIL

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
James C Borel , Chair	50	X		X				0	0	0
EK Baker , Vice Chair	50	X		X				0	0	0
FA Lowrey , Treasurer	50	X		X				0	0	0
Dr Clyde E Chesney , Extension & Institution	50	X						0	0	0
Dr Thomas G Coon , Extension & Institution	50	X						0	0	0
Dr E Gordon Gee , Extension & Institution	50	X						0	0	0
Dr Linda K Fox , Extension & Institution	50	X						0	0	0
Dr Roger A Rennekamp , Extension & Institution	50	X						0	0	0
Dr Janice A Seitz , Extension & Institution	50	X						0	0	0
Dr Roger C Ryles Jr , Extension & Institution	50	X						0	0	0
Jeremy Embalabala , Youth Class	50	X						0	0	0
Victoria LeBlanc , Youth Class	50	X						0	0	0
April Johnson , Youth Class	50	X						0	0	0
Whitney Kupferer , Youth Class	50	X						0	0	0
Stephen D Barr , Public Class	50	X						0	0	0
Lily H Bentas , Public Class	50	X						0	0	0
Carl M Casale , Public Class	50	X						0	0	0
Carol A John Davidson , Public Class	50	X						0	0	0
Joseph B Dzialo , Public Class	50	X						0	0	0
Dr Robert H Foglesong , Public Class	50	X						0	0	0
Daniel Glickman , Public Class	50	X						0	0	0
Lynn O Henderson , Public Class	50	X						0	0	0
Clarence Kelley , Public Class	50	X						0	0	0
Alison Lewis , Public Class	50	X						0	0	0
Robert W Owens , Public Class	50	X						0	0	0
Orion C Samuelson , Public Class	50	X						0	0	0
Anthony A Tansimore , Public Class	50	X						0	0	0
Douglas R Coffey , Public Class	50	X						0	0	0
W Gaines Smith , Extension & Institution	50	X						0	0	0
Natalie Cheng , Youth Class	50	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Herman L Scott , public Class	50	X						0	0	0
Donald H Schriver , public Class	50	X						0	0	0
Douglas L Steele , extension & Institution	50	X						0	0	0
Corinna M Byrum , youth Class	50	X						0	0	0
Ken C Hicks , public Class	50	X						0	0	0
Michael Johnson , youth Class	50	X						0	0	0
Mark A McCann , Extension & Institution	50	X						0	0	0
Edward J Beckwith , Secretary	50			X				0	0	0
Donald T Floyd , President & CEO, N4H Cou	59 50			X				437,073	0	79,717
Jennifer Sirangelo , SVP, Chief Resource Devp	50 50				X			259,334	0	42,555
Paul J Koehler , SVP, National 4-H Youth	45 50				X			196,414	0	40,675
Andy Ferrin , SVP, Chief Marketing Off	51 50					X		161,590	0	39,010
Karla Howard , Chief Financial Officer	44 50					X		190,623	0	29,789
Sharon Schainker , Director, Human resource	57 50					X		136,494	0	40,944
Kirk James , Director, IT Department	45 00					X		137,949	0	32,452
Robert Ranson , Director, Access 4-H	50 00					X		130,689	0	22,807

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

To advance the 4-H youth development movement to build a world in which youth and adults learn, grow and work together as catalysts for positive change.The world can present big challenges, but 4-H believes the ability to generate positive change is a core strength of youth-one that can be nourished with the right resources. The 4-H philosophy of learning by doing and leading by example has proved to have a positive impact on young people, their families, and their communities. It is with that belief and proven success that National 4-H Council focuses its efforts to advance the 4-H youth development movement-and to build a world where youth and adults work together as catalysts for positive change.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X ▶ $

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

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

b Assets included in Form 990, Part X ▶ $

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain why in Part XIV and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

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

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

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

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance	8,743,268				
b	Contributions	64,595				
c	Investment earnings or losses	-1,457,690				
d	Grants or scholarships					
e	Other expenditures for facilities and programs	152,059				
f	Administrative expenses					
g	End of year balance	7,198,114				

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 70 570 %

b Permanent endowment ▶ 26 510 %

c Term endowment ▶ 2 920 %

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

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		300,000		300,000
b Buildings		23,977,855	15,263,436	8,714,419
c Leasehold improvements				
d Equipment		7,412,659	7,390,365	22,294
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				9,036,713

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

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

(a) Description of Liability	(b) Amount
Federal Income Taxes	
agency funds	799,814
accrued post retirement benefit liab	2,172,295
unfunded pension liability	4,802,019
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	7,774,128

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	25,481,686
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,069,831
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-588,145
4	Net unrealized gains (losses) on investments	4	-3,566,981
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2,195,215
9	Total adjustments (net) Add lines 4 - 8	9	-5,762,196
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-6,350,341

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	22,500,718
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-3,566,981		
b	Donated services and use of facilities	2b	43,865		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-2,163,464		
e	Add lines **2a** through **2d**			2e	-5,686,580
3	Subtract line **2e** from line **1**			3	28,187,298
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	94,754		
b	Other (Describe in Part XIV)	4b	-2,800,366		
c	Add lines **4a** and **4b**			4c	-2,705,612
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	25,481,686

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	28,851,059
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	43,865		
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	2,832,117		
e	Add lines **2a** through **2d**			2e	2,875,982
3	Subtract line **2e** from line **1**			3	25,975,077
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	94,754		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	94,754
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	26,069,831

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Endowment funds are intended to be used for educational program activities
Part XI, Line 8 - Other Adjustments		pension related changes other then net period pension costs -2195215
Part XII, Line 2d - Other Adjustments		pension related changes other then net period pension costs -2195215 income of affiliate in consolidated financials 31751
Part XII, Line 4b - Other Adjustments		COST OF GOODS SOLD -2800366
Part XIII, Line 2d - Other Adjustments		Cost of Goods Sold 2800366 expenses of affiliate in consolidated financials 31751

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 if additional space is needed . . . . ▶ ☐

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

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶

3 Enter total number of other organizations . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Identifier	**Return Reference**	**Explanation**
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 For grantees supported through corporate, foundation, and government dollars, the procedures for monitoring use of grant funds are established on a per-grant basis Applications are taken through an online system and reviewed by internal and external stakeholders Once grantees are selected, they are assigned an account manager, who monitors the grant activities throughout the life of the grant (continued on page 37) (continued from page 24) Monitoring begins with a description of unallowable costs in the request for proposals issued for a grant opportunity Submitted budgets are reviewed, and unclear items are questioned and clarified before either final approval or rejection Typically grantees submit at least mid-term and final financial reports reflecting actual expenses on an annual basis These reflect spending against approved budget lines Any of these stages may be amended or dropped as appropriate for the specifics of a given grant Grantees supported through federal dollars may require site visits and/or additional auditing procedures

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 36-2862206
Name: NATIONAL 4-H COUNCIL

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ADAIR COUNTY 4-H COUNCILPO BOX 309 Columbia,KY 42728	31-4933833	501 c 3	23,220				Educational
ALABAMA 4-H FOUNDATION110 DUNCAN HALL AUBURN,AL 36849	63-0457929	501 c 3	19,994				Educational
ALABAMA A&M UNIVERSITYPATTON HALL ROOM 213 PO BOX 411 NORMAL,AL 35762	02-9016351	501 c 3	17,500				Educational
ARKANSAS 4-H FOUNDATIONPO BOX 391 LITTLE ROCK,AR 72203	71-6060767	501 c 3	10,833				Educational
BERGEN COUNTY 4-H ADMINISTRATIONONE BERGEN COUNTY PLAZA 4TH FLOOR Hackensack,NJ 07601	22-6209291	501 c 3	19,675				Educational
BLACKFEET COMMUNITY COLLEGEPO BOX 819 BROWNING,MT 59417	81-0378943	501 c 3	45,000				Educational
Board of Regents312 NORTH 14TH ALEX WEST Lincoln,NE 68588	47-0049123	501 c 3	23,333				Educational
BOARD OF REGENTS NSHE obo UNRROSE HALL ROOM 204 MAIL STOP 325 RENO,NV 89557	88-6000024	501 c 3	10,000				Educational
CHESHIRE UNH COOPERATIVE EXTENSION 800 PARK AVE Keene,NH 03431	02-0463869	501 c 3	74,567				Educational
COLORADO STATE UNIVERSITYROOM 108 JOHNSON HALL - SP Fort Collins,CO 80523	23-7098397	501 c 3	9,581				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNELL COOPERATIVE EXTENSION3288 MAIN ST MEXICO, NY 13114	16-6072891	501 c 3	19,100				Educational
CORNELL COOPERATIVE EXT-ERIE COUNT21 SOUTH GROVE STREET SUITE 230 EAST AURORA, NY 14052	16-6072879	501 c 3	17,200				Educational
CORNELL UNIVERSITY 750 CASCADILLA STREET PO BOX 6525 Ithaca, NY 14851	15-0532082	501 c 3	39,500				Educational
CORNELL UNIVERSITY SPONSORED FINA750 CASCADILLA STREET PO BOX 6525 ITHACA, NY 14850	15-0532082	501 c 3	69,000				Educational
CUMBERLAND 4-H ADVISORY COMMITTEE 291 MORTON AVE Millville, NJ 08332	23-7086291	501 c 3	48,375				Educational
DANE COUNTY-UW EXTENSION1 FEN OAK CT Madison, WI 53718	29-0817632	501 c 3	13,500				Educational
DELAWARE 4-H FOUNDATION113 TOWNSEND HALL 531 S COLLEGE AVENUE Newark, DE 19716	28-4426980	501 c 3	5,583				Educational
DELAWARE STATE UNIVERSITY1200 N DUPONT HWY Dover, DE 19901	51-2336118	501 c 3	28,487				Educational
EAU CLAIRE COUNTY-UW EXTENSION2271 1ST STREET WEST Altoona, WI 54720	51-0305893	501 c 3	8,600				Educational
EMBASSY SUITES PORTLAND319 SW PINE STREET Portland, OR 97204	54-2139630	501 c 3	8,000				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FLORIDA 4-H FOUNDATION3103 McCARTY HALL PO Box 110225 GAINESVILLE, FL 32611	59-1000186	501 c 3	48,723				Educational
FLORIDA 4-H FOUNDATION INCPO BOX 110225 GAINESVILLE, FL 32611	59-1000186	501 c 3	17,500				Educational
FOND DU LAC COUNTY UW EXT400 UNIVERSITY DRIVE Fond Du Lac, WI 54935	39-6100393	501 c 3	49,500				Educational
GEORGIA 4-H FOUNDATIONTHE UNIVERSITY OF GEORGIA HOKE SMITH ANNEX ATHENS, GA 30602	58-0832988	501 c 3	65,200				Educational
GORHAM FAMILY RESOURCE CENTER 629A MAIN STREET Lancaster, NH 03584	04-3383141	501 c 3	19,351				Educational
IOWA STATE UNIVERSITY3617 ADMIN SERVICES BLDG Ames, IA 500113617	42-6527697	501 c 3	37,500				Educational
KENTUCKY 4-H FOUNDATION209 SCOVELL HALL Lexington, KY 405060064	23-7437297	501 c 3	23,232				Educational
KENTUCKY STATE UNIVERSITY400 EAST MAIN STREET FRANKFORT, KY 406012355	61-1099712	501 c 3	17,500				Educational
LSU AGRICULTURE CENTER104 EFFERSON HALL Baton Rouge, LA 70803	72-6000848	501 c 3	40,550				Educational
MARSHALL COUNTY EXTENSION2608 SOUTH 2ND STREET Marshalltown, IA 50158	26-3305087	501 c 3	5,400				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARYLAND 4-H FOUNDATION8020 GREENMEAD DRIVE COLLEGE PARK, MD 20740	52-6056016	501 c 3	14,710				Educational
MASSACHUSETTS 4-H FOUNDATION400 MAIN ST Walpole, MA 02081	04-2303708	501 c 3	26,580				Educational
MERCER COUNTY 4-H930 SPRUCE ST Trenton, NJ 08648	22-6070229	501 c 3	29,700				Educational
MICHIGAN 4-H FOUNDATION14901 4H DRIVE TUSTIN, MI 49688	38-1539997	501 c 3	51,950				Educational
MINNESOTA 4-H FOUNDATION270-B MCNAMARA ALUMNI CENTRE 200 OAK ST SE Minneapolis, MN 55455	41-1408161	501 c 3	129,211				Educational
MISSISSIPPI 4H CLUB FOUNDATIONPO BOX 9601 MISSISSIPPI STATE, MS 39762	64-6023591	501 c 3	38,500				Educational
Mississippi State UniversityPO DRAWER 5227 MISSISSIPPI STATE, MS 39762	06-7589752	501 c 3	8,955				Educational
MONTANA 4-H FOUNDATION210 TAYLOR HALL Bozeman, MT 59717	23-7051460	501 c 3	6,500				Educational
NAE4-HA 2009 CONFERENCE50 WEST HIGH STREET Ballston Spa, NY 12020	23-7127452	501 c 3	10,000				Educational
NORTH CAROLINA 4-H DEVELOPMENT FUND120 PATTERSON HALL / BOX 7645 Raleigh, NC 27695	56-6049505	501 c 3	21,472				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH CAROLINA A&T STATE UNIVERSITY1890 COOPERATIVE EXTENSION PO BOX 21928 GREENSBORO,NC 27411	56-6023166	501 c 3	37,840				Educational
NYS 4-H FOUNDATION 50 WEST HIGH STREET BALLSTON SPA,NY 12020	14-6021395	501 c 3	7,890				Educational
OKLAHOMA 4-H FOUNDATION205 4-H YOUTH DEVELOPMENT Stillwater,OK 74078	73-6109761	501 c 3	45,500				Educational
Oklahoma State University SOUTHEAST DISTRICT PO BOX 1378 Ada,OK 74820	73-6017987	501 c 3	29,995				Educational
OREGON 4-H FOUNDATION200 WARNER-MILNE ROAD Oregon City,OR 97045	93-0790867	501 c 3	37,500				Educational
PASSAIC COUNTY 4-H LEADERS ASSOCIATION 317 PENNSYLVANIA AVE RM 204 Paterson,NJ 07503	23-7318967	501 c 3	15,480				Educational
PINE TREE STATE 4-H FOUNDATION9 OLSON ROAD South Paris,ME 04281	01-6011487	501 c 3	39,148				Educational
PRAIRIE VIEW A & M UNIVERSITYP O BOX 667 Prairie View,TX 77446	74-6001078	501 c 3	24,505				Educational
PUERTO RICO AGRICULTURAL EXT SERV1204 CEIBA STREET SAN JUAN,PR 00926	35-6002041	501 c 3	37,500				Educational
PURDUE UNIVERSITY 615 W STATE ST AGAD BUILDING West Lafayette,IN 47907	35-1097611	501 c 3	17,988				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
RUTGERS COOP EXT OF MIDDLESEX CO42 RIVA AVE NORTH BRUNSWICK, NJ 08902	22-6043015	501 c 3	15,000				Educational
RUTGERS THE UNIVERSITY OF NEW JERseyMARTIN HALL ROOM 32988 NORTH BRUNSWICK, NJ 08901	22-6001086	501 c 3	37,500				Educational
SOUTH DAKOTA 4-H FOUNDATIONAG HALL ROOM 116 Brookings, SD 57007	46-6016086	501 c 3	23,665				Educational
SOUTH DAKOTA STATE UNIVERSITY2097 MEADOW LANE BROOKINGS, SD 57703	46-6000634	501 c 3	5,805				Educational
SOUTHERN UNIVERSITY AGRICULTURALPO BOX 10010 Baton Rouge, LA 70813	72-6000817	501 c 3	45,375				Educational
SULLIVAN COUNTY UNH COOP EXTENSION240 MAIN STREET NEWPORT, NH 03773	02-6000937	501 c 3	8,107				Educational
TERRELL COUNTY 4-HPO BOX 271 DAWSON, GA 39842	58-1510984	501 c 3	23,220				Educational
TEXAS AGRILIFE EXTENSION 4-HTAMUS 2147 CONTRACTS GRANTS College Station, TX 77843	74-6000541	501 c 3	48,750				Educational
TEXAS COOPERATIVE EXTENSION5600 FM 3021 Brownwood, TX 768010666	74-6000537	501 c 3	10,000				Educational
THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN432 N LAKE ST 104 EXTENSION BLDG Madison, WI 53702	39-1805963	501 c 3	10,000				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN432 N LAKE ST 104 EXTENSION BLDG MADISON,WI 53706	39-1805963	501 c 3	20,000				Educational
THE OHIO STATE UNIVERSITY2120 FYFFE ROAD ROOM 25 COLUMBUS,OH 43210	31-6025986	501 c 3	33,375				Educational
THE OHIO STATE UNIVERSITY FOUNDATION1480 W LANE AVE Columbus,OH 43215	31-6401599	501 c 3	69,000				Educational
THE PENNSYLVANIA STATE UNIVERSITYTHE PENN STATE CONFERENCES CENTER HOTEL ROOM 78 University Park,PA 168027002	02-4600376	501 c 3	23,852				Educational
THE REGENTS OF THE UNIV OF CALIFORNIA 1111 FRANKLIN STREET 6TH FLOOR OAKLAND,CA 94607	94-3067788	501 c 3	10,000				Educational
THE REGENTS OF THE UNIVERSITY OF IDAHO PO BOX 443020 MOSCOW,ID 838443020	82-6000945	501 c 3	20,000				Educational
THE UNIVERSITY OF TENNESSEE205 MORGAN HALL 2621 MORGAN CIRCLE Knoxville,TN 379964510	62-6047753	501 c 3	13,500				Educational
UNH COOPERATIVE EXT STRAFFORD CO268 COUNTY FARM ROAD DOVER,NH 03820	02-0228707	501 c 3	19,351				Educational
UNH COOPERATIVE EXTENSION59 COLLEGE ROAD DURHAM,NH 038243587	02-6009699	501 c 3	63,320				Educational
UNH MERRIMACK COUNTY EXTENSION SER315 DANIEL WEBSTER HIGHWAY BOSCAWEN,NH 03303	02-6012635	501 c 3	27,091				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNHCE GRAFTON COUNTY3855 DARTMOUTH COLLEGE HIGHWAY BOX 5 North Haverhill, NH 03774	02-6000339	501 c 3	46,440				Educational
UNHCE ROCKINGHAM COUNTY 4-H YOUTH DEV113 NORTH ROAD BRENTWOOD, NH 03833	02-6000937	501 c 3	14,707				Educational
UNIV OF ARKANSAS COOP EXT SVCBOX 391 LITTLE ROCK, AR 72203	71-6060767	501 c 3	5,895				Educational
UNIVERSITY OF ALASKA FAIRBANKS3295 COLLEGE RD ROOM 109 Fairbanks, AK 99775	92-6000147	501 c 3	9,000				Educational
UNIVERSITY OF CALIFORNIA11477 E AVE Auburn, CA 95603	94-6036494	501 c 3	15,000				Educational
UNIVERSITY OF CONNECTICUT843 UNIVERSITY DRIVE Torrington, CT 06790	06-0772160	501 c 3	83,310				Educational
UNIVERSITY OF DELAWARE113 TOWNSEND HALL 531 SOUTH COLLEGE AVENUE NEWARK, DE 197162210	51-0236118	501 c 3	10,395				Educational
University of Delaware coop ext service210 HULLIHEN HALL NEWARK, DE 197162210	51-0236118	501 c 3	27,250				Educational
University of Delaware coop ext210 HULLIHEN HALL NEWARK, DE 197162210	51-0236118	501 c 3	20,000				Educational
UNIVERSITY OF DELAWARE-CASHIER UNIVERSITY OF DELAWARE Newark, DE 19716	51-0236118	501 c 3	10,000				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF HAWAIIOFFICE OF RESEARCH SERVICES 2530 DOLE STREET SAKAMAKI D200 HONOLULU, HI 968222303	53-0260105	501 c 3	37,500				Educational
UNIVERSITY OF ILLINOIS302 E JOHN 1901 Champaign, IL 61820	37-6000511	501 c 3	49,835				Educational
UNIVERSITY OF KENTUCKYROOM 212 SCOVELL HALL Lexington, KY 40546	23-7437297	501 c 3	15,000				Educational
UNIVERSITY OF KENTUCKY RESEARCH FOUND109 KINKEAD HALL LEXINGTON, KY 40506	61-6033693	501 c 3	9,915				Educational
UNIVERSITY OF KENTUCKY RESEARCH FOUND109 KINKEAD HALL LEXINGTON, KY 40506	61-6033693	501 c 3	20,000				Educational
University of Nebraska-Lincoln312 N 14TH ST ALEXANDER WEST Lincoln, NE 68588	47-0049123	501 c 3	22,811				Educational
UNIVERSITY OF NEW HAMPSHIRE180 MAIN STREET Durham, NH 03824	02-6000937	501 c 3	37,500				Educational
UNIVERSITY OF TENNESSEE205 MORGAN HALL 2621 MORGAN CIRCLE Knoxville, TN 379964510	62-6047753	501 c 3	26,250				Educational
UNIVERSITY OF WISCONSIN EXTENSIONUS BANK LOCKBOX 78138 Milwaukee, WI 532780138	39-1805963	501 c 3	10,000				Educational
UNIVERSITY OF WISCONSIN-EXT637 EXTENSION BLDG 432 N LAKE STREET MADISON, WI 53706	39-1805963	501 c 3	37,500				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNVERSITY OF ARIZONA FRS#408400 888 N EUCLID AVE ROOM 510 Tucson, AZ 85719	74-2652689	501 c 3	25,000				Educational
UTAH STATE UNIVERSITY5049 OLD MAIN HILL LOGAN, UT 843225049	87-6000528	501 c 3	199,180				Educational
UW EXTENSION-LA CROSSE COUNTY400 4TH ST N La Crosse, WI 54601	39-1473039	501 c 3	17,415				Educational
VIRGINIA 4-H FOUNDATION2000 KRAFT DR SUITE 2100 Blacksburg, VA 24060	54-6001805	501 c 3	25,150				Educational
VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY1880 PRATT DRIVE SUITE 2006 Blacksburg, VA 24060	54-6001805	501 c 3	17,500				Educational
VIRGINIA STATE UNIVERSITYPO BOX 9081 PETERSBURG, VA 23806	54-7300760	501 c 3	5,412				Educational
WASHINGTON COUNTY 4-H LEADERS ASSO 18460 NW WALKER RD SUITE 1400 BEAVERTON, OR 97006	93-0229514	501 c 3	15,000				Educational
WASHINGTON STATE 4H FOUNDATION7612 PIONEER WAY E Puyallup, WA 98371	91-6055395	501 c 3	12,000				Educational
WEBSTER COUNTY EXTENSION OFFICE217 S 25TH STREET SUITE C-12 Fort Dodge, IA 50501	42-6021484	501 c 3	7,425				Educational
WEST VIRGINIA UNIVERSITY FOUNDATIOn160 JACKSON MILL RD WESTON, WV 26452	55-6084204	501 c 3	15,000				Educational

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA UNIVERSITY RESEARCH CORP886 CHESTNUT RIDGE RD ROOM 202 MORGANTOWN, WV 26506	55-0665758	501 c 3	8,750				Educational
WINNEBAGO COUNTY TREASURER625 E CTY RD Y SUITE 600 Oshkosh, WI 54901	39-6101443	501 c 3	11,611				Educational

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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☑ First class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ 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			
a	Receive a severance payment or change of control payment?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
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	**4c**		No
	501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
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	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Donald T Floyd	(i)	437,073			15,000	64,717	516,790	425,545
	(ii)							
Jennifer Sirangelo	(i)	259,334				42,555	301,889	256,198
	(ii)							
Paul J Koehler	(i)	196,414				40,675	237,089	191,100
	(ii)							
Andy Ferrin	(i)	161,590				39,010	200,600	
	(ii)							
Karla Howard	(i)	190,623				29,789	220,412	185,833
	(ii)							
Sharon Schainker	(i)	136,494			15,500	25,444	177,438	137,848
	(ii)							
Kirk James	(i)	137,949				32,452	170,401	137,848
	(ii)							
Robert Ranson	(i)	130,689				22,807	153,496	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	Part I, Line 1a	first class travel primarily associated with long haul international travel in support of the global 4-H network, or schedule requirements in domestic travel Lunch and dinner club for recognition of associates and business meetings
	Part I, Line 4a	Severance Name undisclosed Amount undisclosed Terms The Organization provides a severance package consistent with industry standards, the terms of which are confidential Donald T Floyd, Jr participated in a Section 457 plan sponsored by National 4-H Council A contribution of $15,000 was made to the plan by National 4-H Council for the year ended December 31, 2008 The Council maintains an individual account that is credited with the contributions and any gains, losses and earnings based upon the terms of the plan with executive's rights vesting annually on December 31st

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Attach to Form 990 or Form 990-EZ.
▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

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

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

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that 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 grant or type of assistance

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
EDWARD J BECKWITH ESQ	Business	185,955	LAW FIRM BAKER & HOSTETLER LLP, is an independent contractor WHICH Provides A FULL RANGE OF LEGAL SERVICES FOR THE ORGANIZATION ALL FEES ARE REVIEWED AND APPROVED BY CEO MONTHLY AND ALL LEGAL SERVICES PROVIDED ARE REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES		No

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		All trustees are furnished drafts of Form 990 and given ten days to confirm their review of the document All of their comments and suggestions are resolved prior to filing the Form 990

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The conflict of interest policy is reviewed annually All new associates are required to review and sign the conflict of interest policy upon employment

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The process for determining the compensation of Donald T Floyd, Jr includes the following -compensation survey and study -independent compensation consultant -review of Form 990 for other organizations -use of a compensation committee -approval by the board of trustees -written employment contract The process for determining the compensation of the senior leadership team includes the following -compensation survey and study -independent compensation consultant -review of Form 990 for other organizations

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Form 990, Part VI, Section C, Line 19 Governing documents Upon Request Conflict of interest policy Upon Request Financial statements Annual Report

Identifier	Return Reference	Explanation
Form 990, Part IV, line 12 and Part XI, line 2	audit of consolidated financial statements/Oversight of audit	There was no change in the process for oversight of the audit from the prior year The organization is audited as part of a consolidated financial statement It does not receive separate audited statements

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
NATIONAL 4-H COUNCIL

Employer identification number
36-2862206

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
NATIONAL 4-H ACTIVITIES FOUNDATION 7100 CONNECTICUT AVE CHEVY CHASE, MD208154999 52-2292245	ACCOUNTING AND ADMINISTRATIVE NEEDS OF NATIONALLY OPERATED 4-H INITIATIVES	OH	501(c)(3)	509(a)(3)	N/A
NATIONAL 4-H FOUNDATION FOR INNOVATION 7100 CONNECTICUT AVE CHEVY CHASE, MD208154999 52-2292242	development and dissemination of curriculum-inactive	OH	501(c)(3)	509(a)(3)	N/A

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions with Related Organizations

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

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**		No
b	Gift, grant, or capital contribution to other organization(s)	**1b**		No
c	Gift, grant, or capital contribution from other organization(s)	**1c**		No
d	Loans or loan guarantees to or for other organization(s)	**1d**		No
e	Loans or loan guarantees by other organization(s)	**1e**		No
f	Sale of assets to other organization(s)	**1f**		No
g	Purchase of assets from other organization(s)	**1g**		No
h	Exchange of assets	**1h**		No
i	Lease of facilities, equipment, or other assets to other organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets from other organization(s)	**1j**		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**		No
l	Performance of services or membership or fundraising solicitations by other organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets	**1m**		No
n	Sharing of paid employees	**1n**		No
o	Reimbursement paid to other organization for expenses	**1o**		No
p	Reimbursement paid by other organization for expenses	**1p**		No
q	Other transfer of cash or property to other organization(s)	**1q**		No
r	Other transfer of cash or property from other organization(s)	**1r**		No

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

	(A) Name of other organization(s)	**(B)** Transaction type(a-r)	**(C)** Amount Involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership**

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

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No