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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 2011 Open to Public Inspection
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A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization BOONE AND CROCKETT CLUB Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 250 STATION DRIVE City or town, state or country, and ZIP + 4 MISSOULA, MT 59801	D Employer identification number 13-6400091 E Telephone number (406) 542-1888 G Gross receipts \$ 2,607,155
	F Name and address of principal officer TIMOTHY C BRADY 250 STATION DRIVE MISSOULA, MT 59801	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) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	
	J Website: ▶ WWW.BOONE-CROCKETT.ORG	

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1923	M State of legal domicile DC
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Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities WORK FOR PRESERVATION OF WILD ANIMALS, PROMOTE HUNTING & EXPLORATION & RECORD RESULTS FOR STUDY		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	23
6 Total number of volunteers (estimate if necessary)	6	17	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	110,603	
7b Net unrelated business taxable income from Form 990-T, line 34	7b	-3,699	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,089,728	1,092,846
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	659,481	695,545
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	109,823	128,939
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	437,953	464,415
		2,296,985	2,381,745
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	32,052	138,825
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,056,314	1,053,415
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b Total fundraising expenses (Part IX, column (D), line 25) ☐ 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,205,159	1,265,070
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,293,525	2,457,310
	19 Revenue less expenses Subtract line 18 from line 12	3,460	-75,565
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	5,121,710	5,045,085
	21 Total liabilities (Part X, line 26)	1,483,382	1,420,151
	22 Net assets or fund balances Subtract line 21 from line 20	3,638,328	3,624,934

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

Sign Here	***** Signature of officer	2013-02-13 Date		
	TIMOTHY C BRADY TREASURER Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ▶ JAMES V GALIPEAU CPA	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions) P00087309
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ JUNKERMIERCLARKCAMPANELLASTEVENS PC PO BOX 16237 MISSOULA, MT 59808			EIN ▶ 81-0348775
				Phone no ▶ (406) 549-4148

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

Part III

Statement of Program Service Accomplishments

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

☐

☒

1

Briefly describe the organization's mission

TO PROMOTE GUARDIANSHIP AND PROVIDENT MANAGEMENT OF BIG GAME AND ASSOCIATED WILDLIFE IN NORTH AMERICA AND MAINTAIN THE HIGHEST STANDARDS OF FAIR CHASE AND SPORTSMANSHIP IN ALL ASPECTS OF BIG GAME HUNTING IN ORDER THAT THIS RESOURCE OF ALL THE PEOPLE MAY SURVIVE AND PROSPER IN ITS NATURAL HABITATS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 466,832 including grants of \$) (Revenue \$ 244,052)

THE RECORDS & PUBLICATIONS PROGRAMS KEEPS THE RECORDS OF NATIVE NORTH AMERICAN BIG GAME FOR THE PURPOSE OF PROVIDING A VITAL CONSERVATION RECORD OF EXCELLENCE IN SPECIMEN QUALITY AND LINKING IT WITH BOTH EXCELLENCE IN HABITAT MANAGEMENT AND WILDLIFE MANAGEMENT PRACTICES THAT PRODUCE SUCH SPECIMENS AND EXCELLENCE IN HUNTING SKILLS DEMONSTRATED BY THE TAKING OF SUCH SPECIMEN IN A MANNER THAT FULLY COMPLIES WITH THE CLUB'S FAIR CHASE CODE. THE CLUB ALSO ORGANIZES RECOGNITION PROGRAMS TO HONOR SPECIMEN QUALITY, HUNTER SKILLS, SPORTSMANSHIP, AND MANAGEMENT PRACTICES THAT PRODUCE QUALITY WILDLIFE POPULATIONS. DURING THE YEAR THE ORGANIZATION HELD 3 OFFICIAL MEASURER WORKSHOPS, CERTIFYING 61 NEW MEASURERS FOR A TOTAL OF 1,389 WORLDWIDE. THE PROGRAM ALSO PROCESSED 1,458 NEW RECORD ENTRIES. IN ADDITION, 2 NEW BOOKS WERE PUBLISHED: "RECORDS OF NORTH AMERICAN BIG GAME 13TH EDITION" AND THE "VINTAGE HUNTING ALBUM." THE ORGANIZATION ALSO LAUNCHED THE EBOOK PROGRAM WITH A NEW WEB SITE AND 9 INITIAL TITLES.

4b

(Code) (Expenses \$ 361,173 including grants of \$) (Revenue \$ 46,412)

THE OUTREACH PROGRAM CONDUCTS A VARIETY OF PROGRAMS THAT AID IN THE OVERALL GROWTH, STRENGTH, AND FISCAL RESPONSIBILITIES OF THE CLUB BY SCOUTING FOR OR CREATING OPPORTUNITIES TO EXPOSE THE CLUB'S CORE VALUES TO THE HUNTING AND OUTDOOR COMMUNITY. THE PROGRAM COMPLETED THE 6TH TV SEASON OF 13 ORIGINAL EPISODES OF "BIG GAME PROFILES." THE OUTREACH PROGRAM ALSO CONTINUED TO BUILD AND NURTURE RELATIONSHIPS WITH LICENSING PARTNERS TO FURTHER THE GOALS OF THE ORGANIZATION.

4c

(Code) (Expenses \$ 241,864 including grants of \$ 15,184) (Revenue \$ 69,774)

THE WILDLIFE CONSERVATION PROGRAMS PROMOTE OUTDOOR ETHICS FOR ALL PEOPLE, EMPHASIZING SHARED USE OF NATURAL RESOURCES TO PROTECT MULTIPLE OPTIONS FOR USE AND ENJOYMENT AND ESPECIALLY TO PROTECT WILDLIFE POPULATIONS, PUBLIC AND PRIVATE LAND HABITATS, AND ASSOCIATED OUTDOOR RECREATIONAL EXPERIENCES. DURING THE YEAR THE ORGANIZATION CONDUCTED 32 OUTDOOR PLACE-BASED CONSERVATION EDUCATION PROGRAMS, PROVIDING EDUCATION TO 660 K-12 AND UNIVERSITY STUDENTS, 35 TEACHERS, AND 152 ADULTS. STUDENTS RANGE FROM LOCAL COMMUNITIES TO SOUTHEAST ASIA. THE PROGRAM ALSO HELD THREE SEPARATE OUTDOOR ADVENTURE CAMPS: THE OUTDOOR SKILLS CAMP FOR 12 CAMPERS AND THE LITTLE CRITTERS DAY CAMP FOR 18 CAMPERS, PROVIDING A TOTAL OF 30 CAMPERS WITH THEIR OWN UNIQUE EXPERIENCE. THE ORGANIZATION ALSO HOSTED A BOY SCOUTS OF AMERICA ULTRALIGHT BACKPACKING TRAINING PROGRAM FOR 13 SCOUTS FROM ALBERTA, CANADA, AND 4 MOHAB BACKCOUNTRY TREKS FOR 57 BOY SCOUTS FROM MICHIGAN, TEXAS, AND ILLINOIS. IN ADDITION, THE ORGANIZATION OPERATED A WOMEN'S HUNTER EDUCATION COURSE TITLED "BECOMING A OUTDOORSWOMEN" EVENT IN WHICH 5 WOMEN PARTICIPATED. THE ORGANIZATION ALSO FUNDED TWO SEPARATE UNIVERSITY-BASED RESEARCH PROJECTS (SEE SCHEDULE I FOR FULL DESCRIPTION).

(Code) (Expenses \$ 245,235 including grants of \$) (Revenue \$ 167,678)

MEMBERSHIP PROGRAM - PROVIDES EDUCATION OF MEMBERS AND ENSURES THE ORGANIZATION'S OBJECTIVES ARE FULFILLED. DURING THE YEAR THE CLUB SERVED 10 HONORARY LIFE MEMBERS, 97 REGULAR MEMBERS, 1 JUNIOR MEMBER, 134 PROFESSIONAL MEMBERS, AND 30 EMERITUS MEMBERS.

(Code) (Expenses \$ 247,485 including grants of \$) (Revenue \$ 206,317)

ASSOCIATES PROGRAM - PROVIDES SERVICES TO ASSOCIATES TO PROMOTE HUNTER ETHICS AND CONSERVATION THROUGH EDUCATION AND DEMONSTRATIONS. DURING THE CURRENT YEAR THE CLUB HAD 7,218 ASSOCIATES AND 803 LIFETIME ASSOCIATES.

(Code) (Expenses \$ 191,615 including grants of \$) (Revenue \$ 131,134)

THEODORE ROOSEVELT MEMORIAL RANCH - EXPLORES WAYS WILDLIFE & LIVESTOCK CAN SAFELY & PROFITABLY SHARE LANDS & REDUCE COMPETING FORCES WITHOUT REDUCING THEIR NUMBERS. THE RANCH SUPPORTED 219 ANGUS MOTHER COWS, IMPLEMENTED NOXIOUS WEED CONTROL EFFORTS, AND HAD NEARLY 100 HUNTERS PURSUE DIFFERENT SPECIES FOR CONSERVATION EFFORTS INCLUDING YOUTH AND NON-YOUTH HUNTERS.

(Code) (Expenses \$ 62,171 including grants of \$) (Revenue \$ 0)

THE BUILDING TENANT PROGRAM PROVIDES OFFICE SPACE IN THE CLUB'S HEADQUARTERS BUILDING FOR THE UNIVERSITY OF MONTANA.

(Code) (Expenses \$ 123,641 including grants of \$ 123,641) (Revenue \$)

TO ASSIST WITH THE OPERATION OF THE BOONE AND CROCKETT CLUB FOUNDATION, THE ORGANIZATION GRANTED FUNDS TO THE SUPPORTING ORGANIZATION.

4d

Other program services (Describe in Schedule O)

(Expenses \$ 870,147 including grants of \$ 123,641) (Revenue \$ 505,129)

4e

Total program service expenses

\$ 1,940,016

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	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? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> 	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? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8	Yes
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? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	Yes
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</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 U S ? <i>If "Yes," complete Schedule F, Part II and IV.</i> 	15	Yes
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 U S ? <i>If "Yes," complete Schedule F, Part III and IV.</i> 	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance		
Check if Schedule O contains a response to any question in this Part V ☐		
		YesNo
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1c
1a	25	
1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	23
b If at least one is reported on line 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 (see instructions).		2b
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a
b If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c
d If "Yes," indicate the number of Forms 8282 filed during the year		7d
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9 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?		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.		13a
b Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b
c Enter the aggregate amount of reserves on hand		13c
14a Did the organization receive any payments for indoor tanning services during the tax year?		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

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

Section B. Policies

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MT
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 made these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. 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.	THE ORGANIZATION 250 STATION DRIVE MISSOULA, MT 59801 (406) 542-1888

Part VII

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

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

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

- 1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, 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 neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT H HANSON SECRETARY	5.00	X		X				0	0	0
(2) TIMOTHY C BRADY TREASURER	5.00	X		X				0	0	0
(3) BEN B WALLACE PRESIDENT	5.00	X		X				0	0	0
(4) WILLIAM A DEMMER EXEC. V.P. - CONSERVATION	4.00	X		X				0	0	0
(5) DR. MANUEL J. CHEE OUTGOING DIRECTOR	3.00	X						0	0	0
(6) ELDON L BUCKNER V.P. - BIG GAME RECORDS	3.00	X		X				0	0	0
(7) MARC C MONDAVI V.P. - COMMUNICATIONS	3.00	X		X				0	0	0
(8) MORRISON STEVENS SR. EXEC. V.P. - ADMINISTRATION	4.00	X		X				0	0	0
(9) STEPHEN P MEALEY V.P. - CONSERVATION	3.00	X		X				0	0	0
(10) HOWARD P MONSOUR JR. DIRECTOR	1.00	X						0	0	0
(11) JAMES ARNOLD V.P. - ADMINISTRATION	3.00	X		X				0	0	0
(12) BEN B HOLLINGSWORTH JR. FOUNDATION PRESIDENT	3.00	X		X				0	0	0
(13) JAMES J SHINNERS DIRECTOR	1.00	X						0	0	0
(14) JAMES L CUMMINS DIRECTOR	3.00	X						0	0	0
(15) ANTHONY SCHOONEN CHIEF OF STAFF	40.00			X				110,338	0	6,000

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	110,338	0	6,000

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b	396,685				
	c	Fundraising events	1c					
	d	Related organizations	1d	430,809				
	e	Government grants (contributions)	1e	1,000				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	264,352				
	g	Noncash contributions included in lines 1a-1f \$ 18,500						
	h	Total. Add lines 1a-1f		1,092,846				
Program Service Revenue			Business Code					
	2a	ASSOCIATE SUBSCRIPTION	511190	280,607	206,317	74,290		
	b	MEMBERSHIP PROGRAMS	511190	167,678	167,678			
	c	RECORDS PROGRAM	511190	101,571	101,571			
	d	EDUCATION WORKSHOPS	900099	69,774	69,774			
	e	TV SHOW NET INCOME	515100	46,412		46,412		
	f	All other program service revenue		29,503	29,503			
	g	Total. Add lines 2a-2f		695,545				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		683			683	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		157,343			157,343	
	6a	Gross rents	(i) Real	(ii) Personal				
			52,072					
			62,171					
			-10,099					
	d	Net rental income or (loss)		-10,099		-10,099		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				134,800				
				6,544				
				128,256				
	d	Net gain or (loss)		128,256	128,256			
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	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	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a	331,632				
	b	Less cost of goods sold	b	156,695				
	c	Net income or (loss) from sales of inventory . .		174,937	174,937			
	Miscellaneous Revenue		Business Code					
11a	CONTRACT SERVICES	541200	73,440	73,440				
b	OIL AND GAS PAYMENTS	900099	41,000			41,000		
c	MISCELLANEOUS	900099	27,794			27,794		
d	All other revenue							
e	Total. Add lines 11a-11d		142,234					
12	Total revenue. See Instructions		2,381,745	951,476	110,603	226,820		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	123,641	123,641		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	8,458	8,458		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	6,726	6,726		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	116,338		116,338	
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	698,232	592,813	105,419	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	46,556	32,643	13,913	
9	Other employee benefits	127,062	98,080	28,982	
10	Payroll taxes	65,227	47,858	17,369	
11	Fees for services (non-employees)				
a	Management				
b	Legal	4,500	4,500		
c	Accounting	18,102		18,102	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	123,170	107,438	15,732	
12	Advertising and promotion	88,306	87,740	566	
13	Office expenses	191,376	129,326	62,050	
14	Information technology	26,216	6,404	19,812	
15	Royalties				
16	Occupancy	18,606	13,826	4,780	
17	Travel	74,679	70,366	4,313	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,155	16,155		
20	Interest	42,303	4,947	37,356	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	171,690	115,293	56,397	
23	Insurance	39,455	25,902	13,553	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	UBI TAXES	626	626		
b	CATERING & MEALS	162,905	162,905		
c	PRINTING/PUBLICATION/PH	132,553	132,553		
d	HOSTING, SPONSOR & PART	103,322	103,322		
e					
f	All other expenses	51,106	48,494	2,612	
25	Total functional expenses. Add lines 1 through 24f	2,457,310	1,940,016	517,294	0
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) 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)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				50,002	1	34,322
	2	Savings and temporary cash investments				113,753	2	185,584
	3	Pledges and grants receivable, net				52,118	3	95,227
	4	Accounts receivable, net				147,275	4	82,857
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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				182,466	8	234,363
	9	Prepaid expenses and deferred charges				25,505	9	50,010
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	6,468,346	4,166,166	10c	4,178,759	
	b	Less—accumulated depreciation	10b	2,289,587				
	11	Investments—publicly traded securities					11	
	12	Investments—other securities. See Part IV, line 11					12	
	13	Investments—program-related. See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11				384,425	15	183,963
	16	Total assets. Add lines 1 through 15 (must equal line 34)				5,121,710	16	5,045,085
Liabilities	17	Accounts payable and accrued expenses				327,268	17	231,743
	18	Grants payable					18	
	19	Deferred revenue				338,476	19	292,282
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties				45,299	23	92,568
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				772,339	25	803,558
	26	Total liabilities. Add lines 17 through 25				1,483,382	26	1,420,151
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				3,492,938	27	3,521,469
	28	Temporarily restricted net assets				145,390	28	103,465
	29	Permanently restricted net assets					29	
	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				3,638,328	33	3,624,934
	34	Total liabilities and net assets/fund balances				5,121,710	34	5,045,085

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,381,745
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,457,310
3	Revenue less expenses Subtract line 2 from line 1	3	-75,565
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,638,328
5	Other changes in net assets or fund balances (explain in Schedule O)	5	62,171
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,624,934

Part XII Financial Statements and Reporting

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

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization BOONE AND CROCKETT CLUB	Employer identification number 13-6400091
---	--

Part I Reason for Public Charity Status

(All organizations must complete this part.) See instructions

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions)					12	
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						

Section C. Computation of Public Support Percentage			
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2011. 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% support test—2010. 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—2011. 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—2010. 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 a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	917,432	739,879	967,392	1,084,728	1,092,846	4,802,277
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	446,836	323,828	1,106,064	1,087,799	1,114,715	4,079,242
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,364,268	1,063,707	2,073,456	2,172,527	2,207,561	8,881,519
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	101,384	117,439	75,453	42,852	42,001	379,129
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	83,132			101,638	97,894	282,664
c Add lines 7a and 7b	184,516	117,439	75,453	144,490	139,895	661,793
8 Public Support (Subtract line 7c from line 6)						8,219,726

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	1,364,268	1,063,707	2,073,456	2,172,527	2,207,561	8,881,519
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	145,158	485,505	236,310	186,916	251,098	1,304,987
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	145,158	485,505	236,310	186,916	251,098	1,304,987
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	66,031	72,725	68,870	78,899		286,525
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	355,907					355,907
13 Total support (Add lines 9, 10c, 11 and 12.)	1,931,364	1,621,937	2,378,636	2,438,342	2,458,659	10,828,938
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	☐					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	75.910 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	64.670 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	12.050 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	15.060 %
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	☐	

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
BOONE AND CROCKETT CLUB

Employer identification number
13-6400091

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 for any other purpose conferring 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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of a certified historic structure

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, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

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

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
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				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

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

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

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,726,323		1,726,323
b Buildings		3,481,232	1,433,562	2,047,670
c Leasehold improvements				
d Equipment		356,881	267,681	89,200
e Other		903,910	588,344	315,566
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				4,178,759

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
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10

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
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments	2a
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV)	2d
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV)	4b
c	Add lines 4a and 4b	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE BOONE AND CROCKETT CLUB COLLECTS TROPHIES, BOOKS, FIREARMS, WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS THAT ARE RELATED TO THE CLUB'S HISTORY AND GOALS THE CLUB'S COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION, AND RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FOR FINANCIAL GAIN COLLECTIONS ARE VALUABLE ASSETS OF THE CLUB AND ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED THE CLUB DOES NOT INCLUDE EITHER THE COST OR THE VALUE OF ITS COLLECTIONS IN THE STATEMENT OF FINANCIAL POSITION, NOR DOES IT RECOGNIZE GIFTS OF COLLECTION ITEMS AS REVENUES IN THE STATEMENT OF ACTIVITIES SINCE ITEMS ACQUIRED FOR COLLECTIONS BY PURCHASE ARE NOT CAPITALIZED, THE COST OF THOSE ACQUISITIONS IS REPORTED AS DECREASES IN THE APPROPRIATE CLASS OF NET ASSETS IN THE STATEMENT OF ACTIVITIES

Part II

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

Use Part V if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	STUDY OF DIFFERENTIATING COUES' WHITETAIL DEER FROM OTHER WHITETAILS	6,726	CHECK			

2

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

3

Enter total number of other organizations or entities ☐

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

Part V

Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 GRANTEE RECEIVES 50% OF THE GRANT UP-FRONT AND IS THEN REQUIRED TO SEND THE ORGANIZATION A MID-TERM REPORT BEFORE RECEIVING THE NEXT 25% AND THE FINAL REPORT BEFORE RECEIVING THE FINAL 25% REPORTS CONTAIN INFORMATION ON HOW THE GRANT MONEY WAS SPENT AND THE RESULTS OF THE RESEARCH

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
BOONE AND CROCKETT CLUB

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
13-6400091

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☒ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ☐

(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
(1) BOONE AND CROCKETT CLUB FOUNDATION250 STATION DRIVE MISSOULA,MT 59801		501(C)(3)	123,641				ASSIST WITH OPERATIONAL COSTS OF THE FOUNDATION

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

1

3

Enter total number of other organizations listed in the line 1 table

1

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
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
(1) STUDY OF PROVISION OF WATER ON HABITAT USE AND MOVEMENT PATTERNS OF MULE DEER	1	6,300		CASH PAYMENTS	

Part IV

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization BOONE AND CROCKETT CLUB	Employer identification number 13-6400091
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE BOONE & CROCKETT CLUB HAS FIVE CLASSES OF MEMBERS REGULAR MEMBERS, JUNIOR MEMBERS, PROFESSIONAL MEMBERS, EMERITUS MEMBERS, AND HONORARY LIFE MEMBERS ONLY REGULAR AND HONORARY LIFE MEMBERS CAN VOTE THE NUMBER OF REGULAR MEMBERS IS LIMITED TO 100 AND THE NUMBER OF JUNIOR MEMBERS IS LIMITED TO 10 AT ANY GIVEN TIME A JUNIOR MEMBER MAY SERVE AS A MEMBER OR CHAIR OF A COMMITTEE AND MAY VOTE ON THAT COMMITTEE
	FORM 990, PART VI, SECTION A, LINE 7A	AT-LARGE DIRECTORS ARE ELECTED BY A MAJORITY OF THE VOTING MEMBERS PRESENT AT THE ANNUAL MEETING OF THE CLUB
	FORM 990, PART VI, SECTION B, LINE 11	A FIRST LEVEL OF REVIEW IS COMPLETED BY THE CONTROLLER AND THE CHIEF OF STAFF WHO THEN SEND THE FORM ON TO THE TREASURER AND BUDGET & FINANCE COMMITTEE CHAIR WITH CONFIRMATIONTHE RETURN WAS REVIEWED AND (A) NO ERRORS WERE FOUND OR (B) ALL FOUND ERRORS HAVE BEEN CORRECTED THE SECOND LEVEL OF REVIEW IS COMPLETED BY THE TREASURER AND BUDGET & FINANCE COMMITTEE THESE PARTIES WILL REVIEW AND CONFIRM THAT (A) NO ERRORS WERE FOUND OR (B) ALL FOUND ERRORS HAVE BEEN CORRECTED ANY OFFICER OF THE ORGANIZATION IS AUTHORIZED TO SIGN THE RETURNS AFTER APPROVAL BY SIGNING, THE RETURNS WILL BE SENT BACK TO THE CONTROLLER, WHO WILL THEN SEND COPIES TO THE BOD THE RETURNS WILL BE MAILED OR SUBMITTED ELECTRONICALLY BY THE CONTROLLER BY THE DUE DATE THE CHIEF OF STAFF WILL CONFIRM THE DATE THEY WERE SUBMITTED ALL TAX RETURNS WILL BE PROVIDED TO THE BOD BEFORE THE DUE DATE FOR REVIEW
	FORM 990, PART VI, SECTION B, LINE 12C	IN ALL INSTANCES WHERE THE CLUB'S BUSINESS OR POLICY DECISIONS CAN RESULT IN DIRECT OR INDIRECT FINANCIAL OR PERSONAL BENEFIT TO A BOARD DIRECTOR, THE ACTIONS UNDER CONSIDERATION MUST BE REVIEWED IN LIGHT OF FULL DISCLOSURE BY INDEPENDENT DIRECTORS
	FORM 990, PART VI, SECTION B, LINE 15	THE CLUB'S COMPENSATION COMMITTEE, WHICH IS CHAIRED BY THE CLUB PRESIDENT, NEGOTIATES THE CONTRACT FOR THE CHIEF OF STAFF BY REVIEWING THE PREVIOUS CONTRACT AND REVIEWING SALARY LEVELS OF LIKE ORGANIZATIONS
	FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S 1023, 990, AND 990-T ARE ALL AVAILABLE UPON REQUEST
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE ALL AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	DIRECT RENT EXPENSES RECORDED ON PART IX 62,171 TOTAL TO FORM 990, PART XI, LINE 5 62,171

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
BOONE AND CROCKETT CLUB

Employer identification number
13-6400091

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) BOONE AND CROCKETT CLUB FOUNDATION INC 250 STATION DRIVE MISSOULA, MT 59801	SUPPORT BOONE AND CROCKETT CLUB THROUGH MANAGING FUNDRAISING FUNCTION	MT	501(C)(3)	LINE 11A, I			No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

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

Part V

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

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

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

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Sale of assets to related organization(s)

g Purchase of assets from related organization(s)

h Exchange of assets with related organization(s)

i Lease of facilities, equipment, or other assets to related organization(s)

j Lease of facilities, equipment, or other assets from related organization(s)

k Performance of services or membership or fundraising solicitations for related organization(s)

l Performance of services or membership or fundraising solicitations by related organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n Sharing of paid employees with related organization(s)

o Reimbursement paid to related organization(s) for expenses

p Reimbursement paid by related organization(s) for expenses

q Other transfer of cash or property to related organization(s)

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

No

No

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	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) BOONE AND CROCKETT CLUB FOUNDATION INC	C	430,809	CASH PAYMENTS
(2) BOONE AND CROCKETT CLUB FOUNDATION INC	E	729,917	OUTSTANDING BALANCE
(3) BOONE AND CROCKETT CLUB FOUNDATION INC	P	73,440	CASH PAYMENTS
(4) BOONE AND CROCKETT CLUB FOUNDATION INC	L	296,973	FUNDRAISING EXPENSES PER 990
(5) BOONE AND CROCKETT CLUB FOUNDATION INC	B	123,641	NET PRESENT VALUE OF CONTRIBUTION
(6)			

Schedule R (Form 990) 2011

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
------------	------------------	-------------	--

Additional Data

Software ID:
Software Version:
EIN: 13-6400091
Name: BOONE AND CROCKETT CLUB

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services
(Code) (Expenses \$ 245,235 including grants of \$) (Revenue \$ 167,678) MEMBERSHIP PROGRAM - PROVIDES EDUCATION OF MEMBERS AND ENSURES THE ORGANIZATION'S OBJECTIVES ARE FULFILLED DURING THE YEAR THE CLUB SERVED 10 HONORARY LIFE MEMBERS, 97 REGULAR MEMBERS, 1 JUNIOR MEMBER, 134 PROFESSIONAL MEMBERS, AND 30 EMERITUS MEMBERS
(Code) (Expenses \$ 247,485 including grants of \$) (Revenue \$ 206,317) ASSOCIATES PROGRAM - PROVIDES SERVICES TO ASSOCIATES TO PROMOTE HUNTER ETHICS AND CONSERVATION THROUGH EDUCATION AND DEMONSTRATIONS DURING THE CURRENT YEAR THE CLUB HAD 7,218 ASSOCIATES AND 803 LIFETIME ASSOCIATES

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code)	(Expenses \$ 191,615	including grants of \$	(Revenue \$ 131,134)
THEODORE ROOSEVELT MEMORIAL RANCH - EXPLORES WAYS WILDLIFE & LIVESTOCK CAN SAFELY & PROFITABLY SHARE LANDS & REDUCE COMPETING FORCES WITHOUT REDUCING THEIR NUMBERS THE RANCH SUPPORTED 219 ANGUS MOTHER COWS, IMPLEMENTED NOXIOUS WEED CONTROL EFFORTS, AND HAD NEARLY 100 HUNTERS PURSUE DIFFERENT SPECIES FOR CONSERVATION EFFORTS INCLUDING YOUTH AND NON-YOUTH HUNTERS			
(Code)	(Expenses \$ 62,171	including grants of \$	(Revenue \$ 0)
THE BUILDING TENANT PROGRAM PROVIDES OFFICE SPACE IN THE CLUB'S HEADQUARTERS BUILDING FOR THE UNIVERSITY OF MONTANA			

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services				
(Code	) (Expenses \$	123,641	including grants of \$	123,641) (Revenue \$
TO ASSIST WITH THE OPERATION OF THE BOONE AND CROCKETT CLUB FOUNDATION, THE ORGANIZATION GRANTED FUNDS TO THE SUPPORTING ORGANIZATION				