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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 cal applicable	endar year, or tax year beginning C Name of organization NATIONAL 4-H COUNCIL	07-01-2013 , 2013, and ending 06-	-30-2014	D Emplo	yer ide	entification number		
☐ Add	dress c	hange				36-2	86220	6		
∏ Na	me cha	ange	Doing Business As							
Init	tıal retu	nm		all is not delivered to street address) Room/s	suite	E Teleph	one num	nber		
Те	rmınate	ed	7100 CONNECTICUT AVENUE			(301	961-2	2800		
┌ Am	ended	return	City or town, state or province, count	try, and ZIP or foreign postal code		(301	, 501-2	2000		
Гар	plicatio	n pending	CHEVY CHASE, MD 208154999			G Gross	receipts	\$ 43,569,797		
			F Name and address of princ	cipal officer	H(a)	Is this a group	returr	n for		
			JENNIFER SIRANGELO 7100 CONNECTICUT AVEN			subordinates?		Γ Yes Γ No		
			CHEVY CHASE, MD 208154		Н(Р)	Are all subord	ınatac	Γ Yes Γ No		
						included?	illates	j řesj No		
I Ta	x-exer	mpt status	▽ 501(c)(3) ┌ 501(c)() ◄ (ır	nsert no) 4947(a)(1) or 527		If "No," attacl	n a list	(see instructions)		
J W	ebsit	e:► WW	VW 4-H ORG		H(c)	Group exemp	tion nu	mber ►		
K For	m of or	rganızatıon	Corporation Trust Association	Other ►	L Yea	ar of formation 1	976 M	State of legal domicile OH		
Pa	rt I	Sum	ımary							
Activities & Governance		TO INC		Continued its operations or disposed						
S S			, .					1		
26				ng body (Part VI, line 1a)			3	30		
Œ	1		· -	f the governing body (Part VI, line 1	•		4	30		
₹				alendar year 2013 (Part V, line 2a)			5	221		
ĕ	1			ecessary)			6	70		
	1			ort VIII, column (C), line 12			7a 7b	165,226 -1,856		
	۳	Wet unite	Tuted business taxable meanie in	5 1, IIIC 5 1		Prior Year	1 /5	Current Year		
	8	Contri	butions and grants (Part VIII, lin	e1h)		22,919	044	21,791,119		
9	9		am service revenue (Part VIII, lin	·	7,088		10,905,034			
Revenu	10			(A), lines 3, 4, and 7d)		863		1,260,689		
æ	11		revenue (Part VIII, column (A), l		5,683		2,037,097			
	12			(must equal Part VIII, column (A), lı	ne					
			<u> </u>			36,554		35,993,939		
	13			(X, column (A), lines 1-3)		9,832,		10,479,901		
	14			(, column (A), line 4)			0	0		
\$	15	5-10)		e benefits (Part IX, column (A), lines		13,924	202	16,075,656		
Expenses	16a	Profes	ssional fundraising fees (Part IX, o	column (A), line 11e)			0	0		
홄	Ь	Total fu	ındraısıng expenses (Part IX, column (D),	, line 25) – 3,482,853						
ш	17	Other	expenses (Part IX, column (A), li	nes 11a-11d, 11f-24e)		15,556	504	14,314,640		
	18	Total e	expenses Add lines 13-17 (mus	t equal Part IX, column (A), line 25)		39,313	196	40,870,197		
	19	Reven	ue less expenses Subtract line 1	.8 from line 12		-2,758	805	-4,876,258		
Not Assets or Fund Balances					Beg	inning of Curre Year	ent	End of Year		
Sets sess	20	Total	assets (Part X, line 16)		<u> </u>	39,049	275	34,967,795		
AB dB	21					13,744		13,880,709		
25 25 25	22		ssets or fund balances Subtract I		-	25,304		21,087,086		
Pa	13.11		ature Block							
my k	nowle arer h	dge and las any kr	belief, it is true, correct, and com nowledge ature of officer	mined this return, including accompa plete Declaration of preparer (other						
	-		NIFER SIRANGELO PRESIDENT AND CEO e or print name and title							
		P	Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN			
Paid	d	<u> </u>	OYCE M UNDERWOOD			self-employed	•			
	pare		Firm's name F BDO USA LLP			Firm's EIN 🕨 1	.5-53815) - 		
	On		Firm's address 🟲 7101 WISCONSIN AVE S	UITE 800		Phone no (30	1) 654-4	900		

BETHESDA, MD 208144827

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

Par	t III			of Program S Iule O contains a				Part III			·
1	Brief	fly descri	be the c	rganızatıon's mıs	ssion						
SEE	SCHE	DULE O									
2				ındertake any sıg 990-EZ?				e year wh	nich were not list	ed on	┌ Yes ┌ No
	If"Y€	es," desc	ribe the	se new services	on Schedule O						
3	servi	ces? .		ease conducting se changes on S		cant ch	nanges in ho	w it condu	ıcts, any prograi	m 	┌ Yes ┌ No
4	Desc exper	rıbe the nses Se	organıza ctıon 50	tion's program s	ervice accompli (c)(4) organizat	ions are	e required to	report th			s measured by ations to others,
	(Cod	e) (Expenses \$	23,952,1	49 inc	luding grants o	f \$	10,479,901) (R	evenue \$	17,967)
	LOCA DEVE PROC U S , COLL CARI TIME CIVIC IMPO SUCC PROC MENT LEGA PART ENVII THRE TO U MEMI	AL GOVERN ELOPMENT GRAMS EM 4-H SERV A-BORATES ING ADULT ES MORE LI CALLY ACTI ORTANT RO CESS/HIGH GRAMS/EVI TORING PR CY AWARE TNERSHIP RONMENT RONMENT EE OF THE INDERSER\ BERS OF C	MENT AGE ORGANIZA POWER N ES EVERY WITH INI RELATION KELY TO (WE, AND LE IN GRO LIGHTS FE ENTS - W ROGRAM OS FEATU WITH DON AND THE NATION'S VED YOUT ONGRESS	ENCIES, FOUNDATION ATION, 4-H GROWS (EARLY SIX MILLION Y COUNTY AND PARIS DEPENDENT PROGRA ISHIP, HANDS-ON, S CONTRIBUTE TO THE TWO TIMES MORE LI DOWING 4-H AND YOU. OR FISCAL YEAR 201 ORLD'S LARGEST YOU REACHED/EMPOWER RED 4-H YOUTH IMF HORS (INCLUDING CO 4-H CAREER PATHW LARGEST YOUTH DE H - NEW AUDIENCES	NS AND PROFESSICE CONFIDENT YOUNG COUNG PEOPLE ACRED THROUGH A NET COMMONITIES, KELL-BUILDING PROFESSICE TO PARTICIPA (JULY 1, 2013-JULY 1, 2013-JUL	NAL ASSOPED NAL ASSOPED NAME OF THE WORK OF MILL DIECT, A TWO TIME 30, 2 EXPERIMENT OF THE NAME AND ASSOPED NAME OF THE NAME O	OCIATIONS, INC WHO ARE EMP UNITED STATE F 110 UNIVERS ION YOUTH IN ND A MEANING IES MORE LIKE EM (SCIENCE, DES A SIGNIFICE ENT, 4-H NATIC TATES - LARGE ATNERSHIPS, IN S (BOYS & GIR EACH ON CAPTI	CLUDING NA DWERED FO S THROUGH THES AND N TO COUNTR FUL LEADER LY TO MAKE TECHNOLO ANT FOCUS D DEVELOPN TO DEVELOPN TO MAKE TECHNOLO TO MAKE T	ATIONAL 4-H COUNC OR LIFE TODAY AND H EXPERIENCES THA MORE THAN 3000 LO LIES THE RESEARCH SHIP OPPORTUNITY E HEALTHIER CHOIC GY, ENGINEERING A ON FUNDRAISING A MENT/IMPLEMENTAT H SCIENCE DAY 4-H FUNDRAISING EVEN VELOPMENT IN SCIE AG INNOVATORS E COLLABORATION CA F AMERICA, YMCA A PECIFICALLY TARGE	IL AS THE NA' PREPARED FOI T DEVELOP COAL OFFICES 1-BACKED 4-H '- RESULTING ES, TWO TIME ND MATH) PRO ND MARKETIN ION OF THE FOI I MAPS AND AP IT, NATIONAL 4 NCE, HEALTHY KPERIENCE, MI LIED IMAGINE LID GIRLS, INC TING 4-H ALUM	
4b	(Cod	e) (Expenses \$	5,951,0)20 inc	luding grants o	f \$) (Re	venue \$	10,721,841)
	FACII INTEI	LITIES IN T RNATIONA	HE UNITE L COOPER	SEE SCHEDULE ONA D STATES AND CON	TINUES TO BE THE IDENT 4-H COUNTF	NATIONA Y-LED PI	L HOME FOR 4- ROGRAMS AROU	H IN THE U	INITED STATES AS V ORLD THE CENTER	VELL AS A BEAC	CATION AND CONFERENCE CON OF INDEPENDENT AL 4-H CONFERENCES AND
	(Cod	e) (Expenses \$	4,417,5	536 Inc	luding grants o	f ¢) /De	venue \$	2,074,977)
40	NATION NA	ONAL 4-H : CURRICUL LS, WITH (4-H NAME	UM TO M CONVENIE AND EMB	ERVICE - SEE SCHED EET THE NEEDS OF 4 NT ONLINE SHOPPIN	ULE ONATIONAL 4- I-H OFFICES, CLUB G AND EXPERT ADV OWS THE SAME DE	H SUPPLY S, AND F ICE AT 4 VOTION,	' SERVICE SIN AMILIES ALIKE -HMALL ORG 4	CE 1924, 4 TODAY, 4-I -H MEMBEF	-H SUPPLY HAS PRO H SUPPLY TAKES ITS RS SHOW THEIR PRI	VIDED HIGH-Q CUSTOMER-F DE EVERY DAY	Z,074,977) UALITY BRANDED PRODUCTS RIENDLY APPROACH TO NEW BY PURCHASING ITEMS WITH OF CUSTOMER SERVICE TO
4d		er progra penses \$		ces (Describe in	Schedule O) including grant	s of \$) (Revenue \$)
	Tota	al progra	m sen/ic	e expenses 🗠	34,320,7	705			•		
		p. og i a	10		2.,220,						

art 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 (see instructions)? $^{f g}$	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		N o
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		N o
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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? 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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
1	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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? If "Yes," complete Schedule D, Part VII	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? If "Yes," complete Schedule D, Part VIII	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? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🗗	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)? If "Yes," complete Schedule D, Part X.	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	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? If "Yes," complete Schedule F, Parts I and IV	14b		No
L 5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
.7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L 8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
L 9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
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? <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? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

G	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 88		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
1	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			
	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	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	1. 105, to fine 50 of 55, and the organization metrorin 0000-1.	5c		
ı	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the average transfer was a series of the development of the average transfer to the series of th			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "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 or note to an	/ line in this Part VI

Se	ection A. Governing Body and Management								
			Yes	No					
1 a	Enter the number of voting members of the governing body at the end of the tax year								
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
b	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?	2	Yes						
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6		No					
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?	7a		No					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		No					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	ue Cod	e.)					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Reveni	ue Cod Yes	e.) No					
	Did the organization have local chapters, branches, or affiliates?	10a							
10a				No					
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No					
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No					
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No					
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No					
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No					
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No					
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No					
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No					
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No					
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No					

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, $\mathsf{MD}\,,\mathsf{MA}\,,\mathsf{MI}\,,\mathsf{MN}\,,\mathsf{MS}\,,\mathsf{NH}\,,\mathsf{NJ}\,,\mathsf{NM}\,,\mathsf{NY}\,,\mathsf{NC}\,,\mathsf{ND}\,,\mathsf{OH}\,,$ OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI
- 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 ▼ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 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

Form 990	(2013	
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г	a	ч	_	•

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

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

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

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

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

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	(B) A verage hours per week (list any hours	than o	one l both	box, an d	heck unless officer stee)	5	(D) Reportable compensation from the organization (W- 2/1099-MISC)		n compensation from related W- organizations (W		compens W- from t		
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC		related organizations	
1b	Sub-Total Total from continuation shee	 te to Dart VII S	ection		•			.						
c d	Total (add lines 1b and 1c) .							•		2,009,827		0		280,020
2	Total number of individuals (in \$100,000 of reportable comp						d abov	'e) w	ho receive	ed more th	ian			
3	Did the organization list any f	ormer officer du	ector o	r trus	tee	kev	emnlo	vee	or highes	t compen	sated employee		Yes	No
_	on line 1a? If "Yes," complete							•				3		No
4	For any individual listed on lin organization and related organ													
	ındıvıdual		•		•		• .	•				4	Yes	
5	Did any person listed on line 3 services rendered to the orga									janızatıon • • •	or individual for	5		No
Se	ection B. Independent Co	ontractors												
1	Complete this table for your fi compensation from the organi	ve highest comp											tay vear	
		(A)		4 (1011	101		Jaicila	a, ye	.a. chang		(B)	1	(C)
CAUS	E CONSULTING GROUP LLC 52 SALISB	Name and business URY ROAD NEWTON		8							Cription of Services TAIL CONSULTING	+	Comper	665,025
FIRST	PIC INC 2614 CHAPEL LAKE DRIVE G	AMBRILLS MD 21054								CONSULTIN	IG			545,849
	ST DINING SERVICES PO BOX 417632										/ICE CONTRACTOR NG CONSULTING	+		342,464
	RE CPA GROUP PLLC 7501 WISCONSI					2081	4			SERVICES				299,545
	NL CAPITAL INC 875 NORTH MICHIGAN Total number of Independent co					ed to	o thos	e list	ted above		NG CONSULTING	-		299,545
	\$100,000 of compensation from		_				- 11103	. .	45016	,				

Part V		Check if Schedi	ule O contains a respoi	nse or note to any lir	ne in this Part VIII			
	1a	Federated cam		,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ ई								
ran Om	b	Membership du	ies 1b					
o de Pare	С	Fundraising eve	ents 1c	561,500				
iiffs ar.	d	Related organiz	zations 1d					
S, E	e	Government grant	s (contributions) 1e	6,946,631				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	14,282,988				
혈	g	Noncash contribution	ons included in lines	35,930		İ	j	
Cont	h	•	s 1 a - 1 f		21,791,119			
				Business Code				
Шe	2a	NATL 4-H YOUTH (CONF CT	721000	9,413,053	9,247,827	165,226	
94. 64.	ь	REG FEES AND TU	JITIONS	900099	1,491,981	1,491,981	,	
ъ Н	c				, ,			
¥ *	d							
Program Serwce Revenue	e							
Jran	f	All other progra	am service revenue					
Š	g	Total Add lines	s 2a-2f		10,905,034			
	3		ome (including dividen					
		and other simil	aramounts)	•	542,853			542,853
	4		stment of tax-exempt bond	` . H	05.452			05.453
	5	Royalties	() D = -1	(v) Danasaal	86,462			86,462
	6a	Gross rents	(ı) Real 89,433	(II) Personal				
	ь	Less rental	0					
	_c	expenses Rental income	89,433					
		or (loss)	me or (loss)		89,433			89,433
	d	Net rental inco	(i) Securities	(II) O ther	07,433			07,433
	7a	Gross amount from sales of assets other	5,445,431	(ii) o chei				
	ь	than inventory Less cost or other basis and	4,727,595					
	c	sales expenses Gain or (loss)	717,836					
	d	Net gain or (los	ss)		717,836			717,836
ıne	8a	Gross income f events (not inc \$561						
Other Revenue			s reported on line 1c) ne 18 a	70,100				
‡	ь		penses b	283,875				
0	С		(loss) from fundraising	events 🛌	-213,775			-213,775
	9a		from gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo		4,639,365				
	ь	less costofa	oods sold b	2,564,388				
			(loss) from sales of inv		2,074,977	2,074,977		
		Miscellaneous		Business Code				
	11a							
	b							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	•				
	12	Total revenue.	See Instructions .	🕨	35 993 939	12 814 785	165 226	1 222 809

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) .マ Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 10,479,901 10,479,901 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 2,405,583 1,806,658 274,910 324,015 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 10,969,594 8,266,861 1,257,925 1,444,808 Pension plan accruals and contributions (include section 401(k) 696,617 523,178 79,609 93,830 and 403(b) employer contributions) 1,166,354 881,669 134,159 Other employee benefits 150,526 10 837,508 628,991 95,710 112,807 11 Fees for services (non-employees) 342,464 342,464 Management 295,559 81,266 214,293 Legal Accounting 428,855 343,883 84,972 Professional fundraising services See Part IV, line 17 Investment management fees 37,428 37,428 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 4,971,729 3,868,611 259,948 843,170 Schedule O) Advertising and promotion . . 1,117,063 1,096,459 1,004 12 19,600 13 Office expenses 2,119,367 1,797,268 223,987 98,112 14 Information technology . . 15 Royalties . 956,939 922,199 22,155 16 Occupancy 12,585 **17** 1,475,137 1,054,793 136,676 283,668 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . 707,385 584,513 104,500 18,372 20 10,235 10,235 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 1,317,433 1,187,787 56,203 73,443 23 154,944 115,882 39,062 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a CREDIT CARD/BANK FEES 255,928 19,565 229,503 6,860 IN-KIND OTHER 74,155 70,105 4,050 EMPLOYEE TRAINING 55,704 38,714 14,298 2,692 -5,685 d ALLOCATED EXP-GRANTS -5,685 e All other expenses Total functional expenses. Add lines 1 through 24e 34,320,705 25 40.870.197 3.066.639 3,482,853 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [if following SOP 98-2 (ASC 958-720)

Form 990 (2013)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in thi	ıs Pa	ırt X		_	
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			4,345,565	1	3,098,675
	2	Savings and temporary cash investments			66,927	2	
	3	Pledges and grants receivable, net			4,012,147	3	7,529,191
	4	Accounts receivable, net			2,645,273	4	3,580,349
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	: II c	of			
ls	6	Loans and other receivables from other disqualified persons (as a 4958(f)(1)), persons described in section $4958(c)(3)(B)$, and co and sponsoring organizations of section $501(c)(9)$ voluntary emporganizations (see instructions) Complete Part II of Schedule L	outing employers		5		
Se	_					6	
Assets	7	Notes and loans receivable, net				7	
_	8	Inventories for sale or use			1,733,985	8	1,495,547
	9	Prepaid expenses and deferred charges	•		124,591	9	126,660
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	L0a	37,549,583			
	b	Less accumulated depreciation	LOb	28,587,499	8,970,235	10c	8,962,084
	11	Investments—publicly traded securities			15,914,229	11	8,880,227
	12	Investments—other securities See Part IV, line 11	1,205,530	12	1,295,062		
	13	Investments—program-related See Part IV, line 11	•	•		13	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11			30,793	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			39,049,275	16	34,967,795
	17	Accounts payable and accrued expenses			4,518,406	17	5,581,057
	18	Grants payable				18	
	19	Deferred revenue			1,560,966	19	1,130,551
	20	Tax-exempt bond liabilities				20	
ø	21	Escrow or custodial account liability Complete Part IV of Sched			21		
Liabilitie	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualifie		ustees,			
ab		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	675,000
	24	Unsecured notes and loans payable to unrelated third parties .				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part	X of		7.005.000	-	0.404.404
		D			7,665,288	25	6,494,101
	26	Total liabilities. Add lines 17 through 25			13,744,660	26	13,880,709
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	and	complete			
lan	27	Unrestricted net assets			11,224,754	27	6,790,756
Ba	28	Temporarily restricted net assets	•		13,844,464	28	14,060,933
nd	29	Permanently restricted net assets	•		235,397	29	235,397
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	e ►	┌─ and			
S.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
	32	Retained earnings, endowment, accumulated income, or other fun	nds			32	
Net	33	Total net assets or fund balances			25,304,615	33	21,087,086
~	34	Total liabilities and net assets/fund balances			39,049,275	34	34,967,795

	(2013)			Page 1.
Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI			
		T		
1	Total revenue (must equal Part VIII, column (A), line 12)		35,	993,93
2	Total expenses (must equal Part IX, column (A), line 25)		40,	870,19
3	Revenue less expenses Subtract line 2 from line 1		-4.3	876,25
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4			304,61
5	Net unrealized gains (losses) on investments	-		-
6	Donated services and use of facilities		Ι,.	207,51
7	Investment expenses			
8	Prior period adjustments			
	8	+		
9	Other changes in net assets or fund balances (explain in Schedule O) 9		-	548,78
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10		21,	087,08
Par	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. 🔽
			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed a separate basis, consolidated basis, or both	on		
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	☐ Separate basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant?	the 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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? 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	3b	Yes	

Software ID: Software Version:

EIN: 36-2862206

Name: NATIONAL 4-H COUNCIL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	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	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		_,,	related organizations	
ALISON LEWIS	50	x		X				0	0	0	
CHAIR OF BOARD OF TRUSTEES COLLEEN MCCREARY	50										
VICE CHAIR OF BOARD OF TRUSTEES		Х		Х				0	0	0	
EDWARD BECKWITH SECRETARY	50	×		х				0	0	0	
LANDEL HOBBS	50	×		х				0	0	0	
TREASURER JOHN AMAYA	50	ļ									
BOARD - PUBLIC CLASS		Х						0	0	0	
TIM AMERSON	50	х						0	0	0	
BOARD - PUBLIC CLASS MARTHA BERNADETT	50	×						0	0	0	
BOARD - PUBLIC CLASS JAMES C BOREL	50	^									
BOARD - PUBLIC CLASS		Х						0	0	0	
HOWARD W BUFFETT	50	x						0	0	О	
BOARD - PUBLIC CLASS JOSEPH B DZIALO	50	×						0	0	0	
BOARD - PUBLIC CLASS DAVID L EPSTEIN	50							•			
BOARD - PUBLIC CLASS		X						0	0	0	
DANIEL R GLICKMAN BOARD - PUBLIC CLASS	50	×						0	0	О	
LYNN O HENDERSON	50	х						0	0	0	
BOARD - PUBLIC CLASS LANCE A LAVERGNE	50								0		
BOARD - PUBLIC CLASS MARK MARTINO	50	×						0	0	0	
BOARD - PUBLIC CLASS	30	х						0	0	0	
KIP TOM	50	х						0	0	0	
BOARD - PUBLIC CLASS ELIZABETH A VARLEY	50	×						0	0	0	
BOARD - PUBLIC CLASS ANN VENEMAN	50										
BOARD - PUBLIC CLASS		Х						0	0	0	
CHARLOTTE EBERLEIN BOARD - EXTENSION & INSTITUTION	50	x						o	0	О	
DELBERT T FOSTER	50	X						0	0	0	
BOARD - EXTENSION & INSTITUTION E GORDON GEE	50										
BOARD - EXTENSION & INSTITUTION		Х						0	0	0	
JEFF GOODWIN BOARD - EXTENSION & INSTITUTION	50	×						0	0	0	
WILLIAM W HARE	50	х						0	0	0	
BOARD - EXTENSION & INSTITUTION JEFF W HOWARD	50										
BOARD - EXTENSION & INSTITUTION		Х						0	0	0	
CATHANN KRESS BOARD - EXTENSION & INSTITUTION	50	×						0	0	0	
	1				1	1	<u> </u>	ı		<u> </u>	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) (C) A verage hours per week (list any hours for related			(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				
	organizations below dotted line)	Individual trustae or clirector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	-,	-,,	related organizations
BEVERLY SPARKS	50	X						0	0	0
BOARD - EXTENSION & INSTITUTION								ŭ.		
CALEB CHENG	50	Х						0	0	0
YOUTH CLASS										
TESS HAMMOCK	50	х						0	0	0
YOUTH CLASS LAZARUS LYNCH	50									
YOUTH CLASS	50	х						0	0	0
ANDREA VESSEL	50							_		
YOUTH CLASS		Х						0	0	0
JENNIFER SIRANGELO	55 00			Х				318,252	0	55,336
COO TO 12/31,PRES&CEO FROM 1/1 DONALD T FLOYD JR	2 00									
	55 00			х				533,901	0	75,973
FORMER CEO CHRISTINA ALFORD	2 00									
EXECUTIVE VICE PRESIDENT	40 00					х		212,692	0	24,401
JOSEPH P ROCHE	40 00									
SVP, CHIEF FINANCIAL OFFICER	2 00					X		239,200	0	18,638
JILL BRAMBLE	40 00					l ,		244.050		27.050
SVP, CHIEF DEVELOPMENT OFFICER						Х		244,950	0	27,859
ANDREW FERRIN	40 00					х		237,171	0	38,356
SVP, CHIEF STRATEGY OFFICER PAUL J KOEHLER	45.00									
SVP, GENERAL MANAGER	45 00					х		223,661	0	39,457
SVI , GENERAL PIANAGER	J				<u> </u>	I .				

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As Filed Data -

DLN: 93493134071065

OMB No 1545-0047

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.

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

2013

Open to Public Inspection

Name of the organization NATIONAL 4-H COUNCIL Employer identification number

36-2862206

Pari	57	Reas	on for Pu	blic Charity Sta	tus (All or	nanization	ns must con	nlete this	nart) See		<u> </u>	
				te foundation becaus						n 3 a a caons	J	
1	_		· ·	on of churches, or a	· ·		= -	•	•			
2	<u></u>		-	in section 170(b)(1					(-)(-)(-)			
3	<u></u>			perative hospital se			•	on 170(b)(1)(A)(iii).			
4	, 			h organization operat	=					(1)(A)(iii).	Enter the	
•	•			ty, and state			a			(-/(/(/-		
5	\sqcap	Anorga	anızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	/ a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)							
6	\sqcap	A feder	al, state, or	local government or	governmen	tal unit des	cribed in sec	tion 170(b)	(1)(A)(v).			
7	下	An orga	anization the	at normally receives	a substanti	al part of its	s support from	n a governn	nental unit or	from the ger	neral publ	С
	_			on 170(b)(1)(A)(vi).	•	•						
8	<u> </u>		•	described in section			•	•				
9	l	_		at normally receives	-				•	-	-	SS
				rities related to its ex								
		•		oss investment inco				•		tax) from b	usinesses	5
	_			ganızatıon after June								
LO L1				ganized and operated ganized and operated								
e	Г	a Sy che	Type I	bes the type of supp b Type II c ox, I certify that the on managers and ot	Type II organization	I - Function is not con	nally integrat trolled direct	ed d F ly or indired	Type III - Noted that the Type III - Note that Type	more disqua	alified pers	ons
			1311 10u11uati 1 509(a)(2)	on managers and ou	ner than one	or more pu	ibliciy suppoi	teu organiz	ations descri	Jea III Sectio	JII 309(a)	(1)01
f			_	received a written de	etermination	from the I	RS that it is a	a Type I, Ty	pe II, or Type	III suppor	tıng orgar	ızatıo <u>n,</u>
			this box	2006 haa tha awaan	+		A	fu				J
g			rugust 17, 2 ig persons?	2006, has the organi	zation acce	pted any gr	it of Contribu	LIOII II OIII aii	iy of the			
				rectly or indirectly o	ontrols, eith	ner alone or	together wit	h persons d	escribed in (ii)	Yes	No
		and (III) below, the	governing body of th	e supported	lorganizatio	on?			11	g(i)	1
		(ii) A fa	amily memb	er of a person descri	bed in (i) ab	ove?				119	g(ii)	<u> </u>
			•	lled entity of a perso) above?				g(iii)	+
h		Provide	the followi	ng information about	the support	ed organiza	ition(s)					<u> </u>
				-		_						
su	ppor	1 1 7		organizat	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		the tion in ganized	mor	mount onetary	
olg	organizatio			(described on lines 1 - 9 above or IRC section (see					J S ?	Su _l	эрогс	
				instructions))	Yes	No	Yes	No	Yes	No		
									1			
[otal						1		1	1			

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 15,962,494 16,856,981 20,305,790 22,919,044 21,791,119 97,835,428 not include any "unusual grants ") 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 15,962,494 16,856,981 20,305,790 22,919,044 21,791,119 97,835,428 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 24,673,833 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 73,161,595 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (a) 2009 (f) Total beginning in) 🟲 16,856,981 20,305,790 22,919,044 21,791,119 Amounts from line 4 15,962,494 97,835,428 Gross income from interest, dividends, payments received on securities loans, rents, royalties 604,050 455,852 477,492 545,754 718,748 2,801,896 and income from similar sources Net income from unrelated business activities, whether or 14,399 13,073 4,512 31,984 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 100,669,308 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 77,366,945 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 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 72 680 % Public support percentage for 2012 Schedule A, Part II, line 14 15 65 950 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).									
	Facts And Circumstances Test									
Retu	Return Reference Explanation									
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493134071065

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

nai Revenue Service	actions is at www.irs.gov/rorm.sso.		Inspection
ame of the organization ATIONAL 4-H COUNCIL		Employer identifi	cation number
Organizations Maintaining Donor A organization answered "Yes" to Form 99		36-2862206 Funds or Accoun	ts. Complete if the
organization answered Tes to Form 5.	(a) Donor advised funds	(b) Funds and	d other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-	onor advised	┌ Yes ┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit?			□ Yes □ No
Int II Conservation Easements. Complete	if the organization answered "Yes"	to Form 990 Part	, , , , , , , , , , , , , , , , , , , ,
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat	organization (check all that apply) on or education) Preservation of a Preservation of a	an historically importa a certified historic stri	nt land area ucture
Complete lines 2a through 2d if the organization hel easement on the last day of the tax year	d a qualified conservation contribution ii	n the form of a conserv	ation
		Held at ti	ne End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easements	s	2b	
Number of conservation easements on a certified his	storic structure included in (a)	2c	
Number of conservation easements included in (c) a historic structure listed in the National Register	acquired after 8/17/06, and not on a	2d	
Number of conservation easements modified, transfer the tax year ▶	erred, released, extinguished, or termina	ited by the organizatio	n durıng
Number of states where property subject to conserv	ration easement is located ►		
Does the organization have a written policy regardin enforcement of the conservation easements it holds	ig the periodic monitoring, inspection, ha		nd Yes No
Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation eas	ements during the yea	r
Amount of expenses incurred in monitoring, inspecti	ing, and enforcing conservation easemen	nts during the year	
Does each conservation easement reported on line and section 170(h)(4)(B)(II)?	2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(ı)	┌ Yes ┌ No
In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financ		
rt IIII Organizations Maintaining Collection Complete if the organization answered		, or Other Simila	r Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnot	5 116 (ASC 958), not to report in its rev sets held for public exhibition, education	n, or research in furthe	
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	5 116 (ASC 958), to report in its revenu sets held for public exhibition, education	e statement and balar	
(i) Revenues included in Form 990, Part VIII, line 1	1	► \$_	
(ii) Assets included in Form 990, Part X			
If the organization received or held works of art, hist following amounts required to be reported under SFA		for financial gain, pro	
Revenues included in Form 990, Part VIII, line 1		► \$	
Assets included in Form 990 . Part X		▶ - ⊄	

Part	Organizations Maintaining Co	llections of Art, H	listori	ical Tre	easures, o	^r Othe	r Similar Ass	ets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check	any of th	e following th	at are a	significant use o	of its
а	Public exhibition	C	:	Loan o	r exchange pı	ograms	5	
b	Scholarly research	•	• F	Other				
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain h	how the	y further	the organiza	ion's e	xempt purpose ın	
5	During the year, did the organization solicit							
Do	assets to be sold to raise funds rather than t	· · · · · · · · · · · · · · · · · · ·						Yes No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					erea 1	res to Form 99	,,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?					assets		Yes No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing	table				
							Amo	ount
С	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 Fo	orm 990, Part X, line 2	17				ı	Yes No
ь	If "Yes," explain the arrangement in Part XII							<u> </u>
Pa	rt V Endowment Funds. Complete							-Nour years back
1a	Beginning of year balance	(a)Current year 10,552,674	(b) Prior	,491,201	9,646	_	7,788,249	e) Four years back 7,198,114
b	Contributions	82,235		86,627	•	,415	669,556	35,285
c	Net investment earnings, gains, and losses							
لم		1,343,425	1	,009,060	-55	,051	1,398,255	803,120
d	Grants or scholarships Other expenditures for facilities					+	+	
е	and programs	3,411,555		34,214	227	,821	209,402	248,270
f	Administrative expenses							
g	End of year balance	8,566,779	10	,552,674	9,491	,201	9,646,658	7,788,249
2	Provide the estimated percentage of the cur	rent year end balance ((lıne 1g	, column	(a)) held as			
а	Board designated or quasi-endowment ►	73 120 %						
b	Permanent endowment ► 2 750 %							
c	Temporarily restricted endowment ► 24	140 %						
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%						
3a	Are there endowment funds not in the posse	ssion of the organization	on that	are held	and administ	ered for	the	
	organization by (i) unrelated organizations						3a(i)	Yes No
	(ii) related organizations						3a(ii	
ь	If "Yes" to 3a(II), are the related organization		n Sche	dule R?			3b	
4	Describe in Part XIII the intended uses of the	ne organızatıon's endov	vment f	unds				
Par	t VI Land, Buildings, and Equipme		orgar	nızatıon	answered '	∕es' to	Form 990, Par	t IV, line
	11a. See Form 990, Part X, line Description of property	10.) Cost or o			(c) Accumulated depreciation	(d) Book value
10			-			300,000		200 000
	Suldings		\vdash		24	,633,397		300,000 6,764,994
	Leasehold improvements				24	,000,001	17,000,403	0,704,994
	Equipment				12	,616,186	10,719,096	1,897,090
	Other					. ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,
	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X, c	olumn (B), line 1	0(c).)			8,962,084
		·					Schedule D	(Form 990) 2013

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. C	omplete if the organizatio	n answered 'Yes' to Fo	orm 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	aluation
(a) Description of Investment	DOOK Value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	n anawarad 'V as' to Farm 00	O Down IV June 11 d Coo	Form 000 Bort V line 15
Part IX Other Assets. Complete if the organization (a) Description		o, Partiv, line 11d See	(b) Book value
-	(5)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization		to Form 990 Part IV	ing 11g or 11f Coo
Form 990, Part X, line 25.	amzadon answered Tes		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
AGENCY FUNDS	725,454		
ACCRUED POST RETIREMENT BENEFIT LIAB	2,782,936		
UNFUNDED PENSION LIABILITY	2,985,711		
Total. (Column (h) must equal Form 990 Part Y col (B) line 25 1	6 404 101		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	6,494,101		

CIIC	Marc D (1 01111 330) 2013				raye 🖚
Par	t XI Reconciliation of Revenue per Audited Financial State the organization answered 'Yes' to Form 990, Part IV, line 1		nts With Revenue p	er R	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements			1	41,331,560
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	1,207,517		
b	Donated services and use of facilities	2b	38,225		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)...............	2d	1,564,919		
e	·	٠		2e	2,810,661
3	Subtract line 2e from line 1			3	38,520,899
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	37,428		
ь	Other (Describe in Part XIII)	4b	-2,564,388		
С	Add lines 4a and 4b			4c	-2,526,960
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)		5	35,993,939
Par	Reconciliation of Expenses per Audited Financial Sta if the organization answered 'Yes' to Form 990, Part IV, line			per	Return. Complete
1	Total expenses and losses per audited financial statements			1	45,806,662
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	38,225		
b	Prior year adjustments	2b		1	
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	4,935,668		
e	Add lines 2a through 2d			2e	4,973,893
3	Subtract line 2e from line 1			3	40,832,769
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	37,428		
b	Other (Describe in Part XIII)	4b	,	1	
С	Add lines 4a and 4b	<u> </u>		4c	37,428
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	40,870,197
					· · · · · ·

Part XIII Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4	ENDOWMENT FUNDS ARE INTENDED TO BE USED FOR EDUCATIONAL PROGRAM ACTIVITIES
PART X, LINE 2	COUNCIL FOLLOWS THE PROVISIONS OF FASB ASC 740 UNDER ASC 740, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS COUNCIL HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO ADDITIONALLY, COUNCIL HAS FILED INTERNAL REVENUE SERVICE FORM 990 AND FORM 990-T TAX RETURNS, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHERE IT IS REQUIRED COUNCIL BELIEVES THAT IT IS NO LONGER SUBJECT TO US FEDERAL, STATE AND LOCAL, OR NON-US INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS PRIOR TO 2010 FOR THE YEARS ENDED JUNE 30, 2014 AND 2013, NO INTEREST OR PENALTIES WERE RECORDED OR INCLUDED IN THE CONSOLIDATED STATEMENTS OF ACTIVITIES RELATED TO UNCERTAIN TAX POSITIONS
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSES 283,875 NAMED FUND SPENDING -7,821 REVENUE OF AFFILIATES 1,829,834 POSTRETIREMENT MEDICAL COSTS 17,089 PENSION RELATED CHANGES OTHER THEN NET PERIOD PENSION COSTS 769,128 AFFILIATE INCOME - ELIMINATION ENTRIES - 1,327,186
PART XI, LINE 4B - OTHER ADJUSTMENTS	COST OF GOODS SOLD -2,564,388
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 2,564,388 FUNDRAISING EXPENSES 283,875 EXPENSES OF AFFILIATES 2,087,405

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493134071065

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

about Schedule G (Form 990 or 990-FZ) and its instructions is at www.irs.gov/form990

Open to Public Inspection

Name of the organization NATIONAL 4-H COUNCIL		(1			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Employer iden	tification number
NATIONAL 4-H COUNCIL						36-2862206	
Part I Fundraising Acti Form 990-EZ filers				on answered "Yes" part.	to Form	1 990, Part IV	, line 17.
1 Indicate whether the organi	zatıon raısed funds 1	through a	ny of the f	following activities Che	eck all th	nat apply	
a Mail solicitations			e	Solicitation of nor	n-govern	ment grants	
b Internet and email solic	ıtatıons		f	☐ Solicitation of gov	/ernment	t grants	
c Phone solicitations d In-person solicitations			g	Special fundraisin	ig events	5	
2a Did the organization have a or key employees listed in F							Г _{Yes} Г _{No}
b If "Yes," list the ten highest to be compensated at least			fundraise	rs) pursuant to agreem	ents und	der which the fui	ndraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or r	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1	1	Yes	No				
_							
2							
3							
4							
5							
6							
7							
8							
9							
10							
			.				
3 List all states in which the oregistration or licensing	rganızatıon ıs regist	tered or lı	censed to	solicit contributions o	r has be	en notified it is	exempt from

		more than \$15,000 of fundr events with gross receipts g				TOS I UNG OD. EISC				
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
			(event type)	(event type)	(total number)	(c) (c)				
E E	1	Gross receipts	631,600			631,600				
Revenue	2	Less Contributions	561,500)		561,500				
<u>~</u>	3	Gross income (line 1 minus line 2)	70,100)		70,100				
	4	Cash prizes								
မွာ	5	Noncash prizes								
Expenses	6	Rent/facility costs	159,999)		159,999				
ă	7	Food and beverages .								
Direct	8	Entertainment								
ឨ	9	Other direct expenses .	123,876	;		123,876				
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(283,875)				
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)		-213,775				
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep					
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
<u>~</u>	1	Gross revenue								
ses	2	Cash prizes								
Expenses	3	Non-cash prizes								
Rect E	4	Rent/facility costs								
물	5	Other direct expenses								
	6	Volunteer labor			☐ Yes % ☐ No					
	7	Direct expense summary Add line	s 2 through 5 ın column (d)						
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)						
9 a b	Ist	ter the state(s) in which the organiza the organization licensed to operate 'No," explain	gaming activities in eac	h of these states?		「Yes 「No				
10a b	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?									

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	E mployee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u>I</u>	<u> </u>		rm 990 or 990-	7) 2012

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DLN: 93493134071065

OMB No 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Inspection

Employer identification number

NATIONAL 4-H COUNCIL 36-2862206 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes ☐ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section valuation non-cash assistance grant cash orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table

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

Schedule I (Form 990) 2013

100

Schedule I	(Form 990) 2013
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
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 ACCEPTED THROUGH AN ONLINE GRANT
	MANAGEMENT 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 MONITORING
	BEGINS WITH A DESCRIPTION OF UNALLOWABLE COSTS IN THE REQUEST FOR PROPOSALS ISSUED FOR A GRANT OPPORTUNITY BY A
	TEAM OF 2-3 PEOPLE SUBMITTED BUDGETS ARE REVIEWED, AND UNCLEAR ITEMS ARE QUESTIONED AND CLARIFIED BEFORE EITHER
	FINAL APPROVAL OR REJECTION ONCE APPROVED, A CONTRACT WITH GRANTEE IS PREPARED OUTLINING THE DELIVERABLES,
	TIMELINE, REPORTING SCHEDULE, AND RECOGNITION EXPECTED THE CONTRACT IS SIGNED BY COUNCIL AND GRANTEE 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

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) A mount 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
4-H FOUNDATION OF NEW HAMPSHIR MOILES HOUSE 180 MAIN STREET DURHAM,NH 03824	23-7083796	501 (C)(3)	6,301				EDUCATIONAL

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALABAMA 4-H CLUB FOUNDATION INC 226 DUNCAN HALL AUBURN UNIVERSITY,AL 36849	63-0457929	501 (C)(3)	15,209				EDUCATIONAL		

form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALABAMA A&M UNIVERSITY 4900 MERIDIAN STREET PO BOX 967 NORMAL,AL 35762	63-6001097	STATE OF ALABAMA	109,481				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALCORN STATE UNIVERSITY 1000 ASU DRIVE 285 LORMAN,MS 39096	64-0538010	STATE OF MISSISSIPPI	85,000				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF PUBLIC & LAND-GRANT 1307 NEW YORK AVE NW SUITE 500 WASHINGTON, DC 20005	53-0183246	501 (C)(3)	91,250				EDUCATIONAL

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
AUBURN UNIVERSITY 208 M WHITE SMITH HALL AUBURN,AL 38649	63-6000724	501 (C)(3)	10,500				EDUCATIONAL	

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
BIG BROTHERS & BIG SISTERS OF 450 EAST JOHN CARPENTER FREEWAY SUIT 100 IRVING,TX 75062	23-1365190	501 (C)(3)	9,000				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BOYS & GIRLS CLUBS OF AMERICA RESOURCE DEV NATIONAL HEADQUARTERS 1275 PEACH TREE ST NE ATLANTA,GA 30309	13-5562976	501 (C)(3)	9,000				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CALIFORNIA 4-H FOUNDATION PO BOX 73673 DAVIS,CA 95617	23-7327765	501 (C)(3)	23,057				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CLEMSON UNIVERSITY 210 BARRE HALL CLEMSON,SC 29634	57-6000254	STATE OF S C	281,293				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COLORADO STATE UNIVERSITY ROOM 108 JOHNSON HALL - SP FORT COLLINS,CO 80523		STATE OF COLORADO	,				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CORNELL UNIVERSITY 750 CASCADILLA STREET ITHACA,NY 14851	15-0532082	501 (C)(3)	267,540				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DELAWARE STATE UNIVERSITY 1200 N DUPONT HWY DOVER, DE 19901	20-1372435	501 (C)(3)	35,000				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FLORIDA 4-H CLUB FOUNDATION 3103 MCCARTY HALL PO BOX 110225 GAINESVILLE,FL 32611	59-1000186	501 (C)(3)	144,540				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FORT VALLEY STATE UNIVERSITY 1005 STATE UNIV DR POB 4061 FORT VALLEY GA, GA 31030	23-7281905	501 (C)(3)	41,336				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GEORGIA 4-H FOUNDATION 306 HOKE SMITH ANNEX ATHENS, GA 30602	58-0832988	501 (C)(3)	285,939				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GIRLS INCORPORATED 441 W MICHIGAN ST INDIANAPOLIS,IN 46202	13-1915124	501 (C)(3)	9,000				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HAWAII 4-H FOUNDATION 213 GILMORE HALL 3050 MAILE WAY HONOLULU, HI 968222231	23-7043787	501 (C)(3)	17,774				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ILLINOIS 4-H FOUNDATION 106 TAFT HOUSE 1401 SOUTH MARYLAND DRIVE URBANA,IL 61801	37-6006007	501 (C)(3)	14,863				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INDIANA 4-H FOUNDATION 615 W STATE STREET WEST LAFAYETTE,IN 479071152	35-1097611	501 (C)(3)	20,200				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
IOWA STATE UNIVERSITY 1138 PEARSON HALL AMES,IA 50011	42-6004224	STATE OF IOWA	52,830				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JOHNSON COUNTY EXTENSION 3109 OLD HIGHWAY 218 S IOWA CITY,IA 52246	42-6004224	STATE OF IOWA	72,020				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KANSAS 4-H FOUNDATION 201 UMBERGER HALL MANHATTAN, KS 66506	48-0623884	501 (C)(3)	7,706				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KANSAS STATE UNIVERSITY 201 UMBERGER MANHATTAN,KS 66506	48-0667209	STATE OF KANSAS	121,498				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KENTUCKY 4-H FOUNDATION 209 SCOVELL HALL LEXINGTON, KY 405060064	23-7437297	501 (C)(3)	104,063				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KENTUCKY STATE UNIVERSITY 400 EAST MAIN STREET FRANKFORT, KY 406012355	61-1099712	STATE OF KENTUCKY	84,124				EDUCATIONAL			

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOUISIANA 4-H FOUNDATION INC PO BOX 25100 BATON ROUGE,LA 70894	72-1367519	501 (C)(3)	15,520				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) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LOUISIANA STATE UNIVERSITY 204 THOMAS BOYD HALL BATON ROUGE,LA 70803	72-1367519	STATE OF LOUISIANA	194,910				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount 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 FOUNDATION INC 8020 GREENMEAD DRIVE COLLEGE PARK,MD 20740	52-6056016	501 (C)(3)	262,477				EDUCATIONAL		

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MASSACHUSETTS 4-H FOUNDATION 400 MAIN STREET MALPOLE,MA 02081	04-2303708	501 (C)(3)	23,011				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MICHIGAN 4-H FOUNDATION 14901 4H DRIVE TUSTIN,MI 49688	38-1539997	501 (C)(3)	223,970				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MICHIGAN STATE UNIVERSITY 446 WEST CIRCLE DRIVE ROOM 106 AGRICULTURE HALL LANSING,MI 488242612	38-6005984	STATE OF MICHIGAN	168,918				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MINNESOTA 4-H FOUNDATION 270 - B MCNAMARA ALUMI CENTER 200 MINNEAPOLIS,MN 55455		501 (C)(3)	22,880				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MISSISSIPPI STATE UNIVERSITY PO DRAWER 5227 MISSISSIPPI STATE, MS 39762	06-7589752	STATE OF MISSISSIPPI	107,486				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MISSOURI 4-H FOUNDATION 819 CLARK HALL COLUMBIA,MO 65211	43-6044367	501 (C)(3)	21,087				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MONTANA STATE UNIVERSITY 309 MONTANA HALL PO BOX 172470 BOZEMAN, MT 59717	81-6010045	STATE OF MONTANA	/				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW MEXICO STATE UNIVERSITY P O BOX 30002 LAS CRUCES,NM 88003	85-6000401	501 (C)(3)	11,224				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW YORK STATE 4-H FOUNDATION 248 GRANT AVE SUITE II- A AUBURN,NY 13021	14-6021395	501 (C)(3)	212,636				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTH CAROLINA 4-H DEVELOPMENT FUND 120 PATTERSON HALL / BOX 7645 RALEIGH,NC 27695	56-6049505	501 (C)(3)	39,185				EDUCATIONAL			

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 UNIVERSITY 1601 E MARKET ST GREENSBORO,NC 27411	56-6000007	STATE OF NO CAROLINA	27,044				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 STATE UNIVERSITY 512 BRICKHAVEN DRIVE BOX 7606 RALEIGH,NC 27695	56-6049304	STATE OF NO CAROLINA	,				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 DAKOTA STATE UNIVERSITY 1340 ADMINISTRATION AVENUE FARGO,ND 58102	23-7120898	STATE OF NO DAKOTA	107,444				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OHIO 4-H YOUTH DEVELOPMENT 2201 FRED TAYLOR DRIVE COLUMBUS,OH 43210	31-1145986	STATE OF OHIO	22,578				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OHIO STATE UNIVERSITY 1480 W LANE AVE COLUMBUS,OH 43210	31-6401599	STATE OF OHIO	213,850				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OKLAHOMA 4-H FOUNDATION INC 205 4-H YOUTH DEVELOPMENT STILLWATER,OK 74078	73-6109761	501 (C)(3)	55,799				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OKLAHOMA STATE UNIVERSITY 205 4-H YOUTH DEVELOPMENT STILLWATER,OK 74078	73-6109761	STATE OF OKLAHOMA	325,662				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OREGON 4-H FOUNDATION 119 BALLARD EXTENSION HALL OSU CORVALLIS,OR 97331	93-0711337	501 (C)(3)	33,033				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OREGON STATE UNIVERSITY PO BOX 1086 CORVALLIS,OR 973391086	48-1278540	STATE OF OREGON	132,426				EDUCATIONAL			

Form 990,Schedule I, Pa	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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PRAIRIE VIEW A & M UNIVERSITY PO BOX 667 PRAIRIE VIEW,TX 77446	74-6001078	STATE OF TEXAS	71,500				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PURDUE UNIVERSITY 401 S GRANT STREET WEST LAFAYETTE,IN 47907	35-6002041	501 (C)(3)	94,956				EDUCATIONAL		

Form 990,Schedule 1, Pa	orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RHODE ISLAND 4-H CLUB FOUNDATI 75 PECKHAM FARM KINGSTON,RI 02881	05-6016234	501 (C)(3)	25,226				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
RUTGERS THE STATE UNIV OF NEW JERSEY ASB III-2ND RL-3 RUTGERS PLAZA-L LIPOV NEW BRUNSWICK, NJ 08901	23-7318742	STATE OF NEW JERSEY	111,438				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SOMERSET COUNTY 4-H ASSOCIATIO 310 MILLTOWN RD BRIDGEWATER,NJ 08807	22-6064597	501 (C)(3)	9,414				EDUCATIONAL		

Form 990,Schedule I, Pa	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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOUTH DAKOTA STATE UNIVERSITY SDSU WEST RIVER AGRICULTURAL CENTER 1905 PLAZA BOULEVARD RAPID CITY,SD 57702	46-0273801	STATE OF SO DAKOTA	68,345				EDUCATIONAL			

Form 990,Schedule I, Pa	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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SOUTHERN UNIVERSITY AND A&M COLLEGE PO BOX 10010 BATON ROUGE,LA 70813	72-6000817	501 (C)(3)	82,421				EDUCATIONAL			

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TENNESSEE 4-H CLUB FOUNDATION 2621 MORGAN CIRCLE KNOXVILLE,TN 37996	62-6047753	501 (C)(3)	47,985				EDUCATIONAL		

Form 990,Schedule 1, Pa	-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TENNESSEE STATE UNIVERSITY 3500 JOHN MERRITT BOULEVARD NASHVILLE,TN 37209	62-0786119	STATE OF TENNESSEE	,				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS 4-H YOUTH FOUNDATION INC PO BOX 11020 COLLEGE STATION,TX 77842	74-6091147	501 (C)(3)	128,066				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS AGRILIFE EXT SERVICE TAMUS 2147 CONTRACTS GRANTS COLLEGE STATION,TX 77843	74-6000541	STATE OF TEXAS	158,885				EDUCATIONAL		

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 CURATORS OF THE UNIV OF MISSOURI PO BOX 807012 KANSAS CITY, MO 64180	43-6003859	501 (C)(3)	217,558				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 PENNSYLVANIA STATE UNIVERSITY THE PENN STATE CONFERENCE CENTER HOTEL ROOM 78 UNIVERSITY PARK, PA 16802	02-4600376	STATE - PENNSYLVANIA	207,472				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA 1 SHIELDS AVE DAVIS,CA 95616	94-6036494	STATE OF CALIFORNIA	55,719				EDUCATIONAL		

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TUSKEGEE UNIVERSITY ROOM 100 CAMPBELL HALL TUSKEGEE INSTITUTE,AL 36088	63-0288878	501 (C)(3)	23,008				EDUCATIONAL		

Form 990,Schedule I, Pa	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) A mount of cash grant	(e) A mount 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 ALASKA PO BOX 755120 FAIRBANKS,AK 99775	23-7394620	501 (C)(3)	127,198				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) A mount of cash grant	(e) A mount 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 ARIZONA 888 N EUCLID AVE RM 502F TUCSON,AZ 85721	86-6004791	STATE OF ARIZONA	109,296				EDUCATIONAL		

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 ARKANSAS PO BOX 391 LITTLE ROCK,AR 72203	71-6060767	STATE OF ARKANSAS	113,136				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF CALIFORNIA P O BOX 989062 WEST SACRAMENTO,CA 95798	94-3067788	501 (C)(3)	64,693				EDUCATIONAL		

-orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 CONNECTICUT 843 UNIVERSITY DRIVE TORRINGTON,CT 06790	06-0772160	STATE OF CONNECTICUT	114,108				EDUCATIONAL		

Form 990,Schedule 1, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF DELAWARE OFFICE OF THE VP FOR FINANCE ADMIN ROOM 220 NEWARK, DE 19716	51-6000297	STATE OF DELAWARE	264,651				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF FLORIDA 3103 MCCARTY HALL B GAINESVILLE,FL 32611	59-1000186	STATE OF FLORIDA	257,976				EDUCATIONAL		

form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 HAWAII 2440 CAMPUS ROAD BOX 368 HONOLULU,HI 96822	99-6000394	STATE OF HAWAII	7,500				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF IDAHO 701 W COLLEGE AVE SAINT MARIES,ID 83861	82-6000281	STATE OF IDAHO	125,319				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF ILLINOIS UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN STREET URBANA,IL 61801	37-6006007	STATE OF ILLINOIS	497,514				EDUCATIONAL			

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 KENTUCKY RESEARCH 301 PETERSON SERVICE BUILDING LEXINGTON,KY 40506	61-6033693	501 (C)(3)	14,127				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) A mount of cash grant	(e) A mount 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 MAINE 107 MAINE AVENUE BANGOR,ME 04401	01-6000769	501 (C)(3)	204,110				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) A mount 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 MASSACHUSETTS 100 VENTURE WAY STE 201 HADLEY,MA 01035	04-3167352	STATE OF MASSACHUSET	43,758				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) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MINNESOTA NW PO BOX 1450 MINNEAPOLIS, MN 55485	41-6042488	501 (C)(3)	96,901				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) A mount of cash grant	(e) A mount 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 MISSOURI 1000 W NIFONG BUILDING 7 SUITE 300 COLUMBIA,MO 65211	43-6003859	501 (C)(3)	43,121				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NEBRASKA 312 N 14TH STREET ALEXANDER WEST LINCOLN,NE 68588	47-0049123	STATE OF NEBRASKA	234,128				EDUCATIONAL			

Form 990, Schedule 1, Part 11, 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) A mount 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 NEBRASKA COOPERATIVE 3835 HOLDRIDGE STREET LINCOLN,NE 68503	47-0049123	STATE OF NEBRASKA	10,545				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount 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 NEVADA ROSE HALL ROOM 204 MAIL STOP 325 RENO,NV 89557	88-6000024	STATE OF NEVADA	143,351				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 NEW HAMPSHIR 180 MAIN STREET DURHAM,NH 03824	02-6000937	STATE- NEW HAMPSHIRE	,				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) A mount of cash grant	(e) A mount 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 PUERTO RICO AGRI JARDIN BOTANICO SUR SAN JUAN,PR 00926	66-0433761	TERRI OF PUERTO RICO	17,500				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) A mount of cash grant	(e) A mount 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 RHODE ISLAND 75 LOWER COLLEGE ROAD KINGSTON,RI 02881	22-3011455	501 (C)(3)	39,844				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF TENNESSEE 205 MORGAN HALL 2621 MORGAN CIRCLE KNOXVILLE,TN 37996	62-6047753	STATE OF TENNESSEE	222,348				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount 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 THE DISTRICT OF COLUMBIA 4200 CONN AVE BLDG 52 SUITE 322 WASHINGTON, DC 20008	53-6001131	DISTRICT OF COLUMBIA	43,355				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 THE VIRGIN ISLAND RR-01 BOX 10000 KINGSHILL 850 VI	68-0432514	501 (C)(3)	55,000				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) A mount of cash grant	(e) A mount 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 VERMONT & STATE 85 S PROSPECT ROOM 222 BURLINGTON,VT 05405		STATE OF VERMONT	92,442				EDUCATIONAL	

Form 990,Schedule 1, Part 11, 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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF WISCONSIN 432 NORTH LAKE STREET RM 104 MADISON,WI 53706	39-1805963	STATE OF WISCONSIN	155,205				EDUCATIONAL		

Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 WYOMING 1000 E UNIVERSITY AVENUE DEPARTMENT 3314 LARAMIE,WY 82071	83-6000331	STATE OF WYOMING	23,785				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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UTAH STATE UNIVERSITY 5049 OLD MAIN HILL LOGAN,UT 84322	87-6000528	STATE OF UTAH	105,719				EDUCATIONAL		

Form 990,Schedule I, Pai	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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VIRGINIA POLYTECHNIC INSTITUTE 1880 PRATT DRIVE SUITE 2006 BLACKSBURG,VA 24060	54-6001805	STATE OF VIRGINIA	421,872				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VIRGINIA TECH FOUNDATION 304 LITTON REEVES HALL 0306 BLACKSBURG,VA 24061	54-0721690	501 (C)(3)	35,528				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WASHINGTON STATE 4-H FOUNDATION 7612 PIONEER WAY E PUYALLUP, WA 983714998	91-6055395	STATE OF WASHINGTON	447,182				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WASHINGTON STATE UNIVERSITY 14204 SALMON CREEK AVE VANCOUVER, WA 98686	91-1075542	STATE OF WASHINGTON	/				EDUCATIONAL		

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount 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 STATE UNIVERSITY PO BOX 1000 INSTITUTE,WV 25112	55-0708567	STATE OF W VIRGINIA	/				EDUCATIONAL		

Form 990,Schedule I, Pai	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) A mount of cash grant	(e) A mount 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 FOUND ONE WATERFRONT PLACE 7TH FLOOR MORGANTOWN, WV 26507	55-6017181	501 (C)(3)	114,141				EDUCATIONAL		

Form 990,Schedule I, Pai	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) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST VIRGINIA UNIVERSITY RESEARCH 886 CHESTNUT RIDGE ROAD ROOM 202 MORGANTOWN,WV 26506	55-0665758	STATE OF W VIRGINIA	,				EDUCATIONAL		

Form 990,Schedule 1, Pa	Form 990, Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WISCONSIN 4-H FOUNDATION THE PLY CENTER 702 LONGDON ST MADISON,WI 53706	39-0914868	501 (C)(3)	17,565				EDUCATIONAL		

Form 990,Schedule 1, Pa	orm 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
YMCA OF THE USA 101 N WACKER DR SUITE 1600 CHICAGO,IL 60606	36-3258696	501 (C)(3)	12,000				EDUCATIONAL		

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DLN: 93493134071065

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Compensation Information

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

Open to Public Inspection

Name of the organization NATIONAL 4-H COUNCIL

Employer identification number

			36-2862206			
Pa	rt I Questions Regarding Compensation	n				
					Yes	No
la	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec		- · · · · · · · · · · · · · · · · · · ·		,,	
	directors, trustees, officers, filefamily the CLO/LXet	cutive D	rector, regarding the items checked in line 1a.	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all the used by a related organization to establish compens	nat apply				
	✓ Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant	ᅜ	Compensation survey or study			
	Form 990 of other organizations	I✓	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	[, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	it?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr					
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
3	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in in Part III	n Regula	itions section 53 4958-4(a)(3)? If "Yes," describe			
				8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	۱ ۵		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
(1)JENNIFER SIRANGELO COOTO 12/31,PRES&CEO FROM 1/1	(i) (ii)	318,252 0	0	0	46,730 0	8,606 0	373,588 0	0
(2)DONALD T FLOYD JR FORMER CEO	(i) (ii)	533,901 0	0 	0	56,356 0	19,617 0	609,874 0	0
(3)CHRISTINA ALFORD EXECUTIVE VICE PRESIDENT	(i) (ii)	212,692	0	0	24,008	393 0	237,093	0
(4)JOSEPH P ROCHE SVP, CHIEF FINANCIAL OFFICER	(i) (ii)	239,200	0	0	9,568	9,070 0	257,838 0	0
(5)JILL BRAMBLE SVP, CHIEF DEVELOPMENT OFFICER	(i) (ii)	244,950 0	0	0	27,298 0	561 0	272,809 0	0
(6)ANDREW FERRIN SVP, CHIEF STRATEGY OFFICER	(i) (ii)		0	0	26,987 0	11,369 0	275,527 0	0
(7)PAUL J KOEHLER SVP, GENERAL MANAGER	(i) (ii)	223,661	0	0	31,946 0	7,511 0	263,118 0	0

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	FIRST CLASS TRAVEL PRIMARILY ASSOCIATED WITH LONG HAUL INTERNATIONAL TRAVEL IN SUPPORT OF THE GLOBAL CLOVER NETWORK, OR SCHEDULE REQUIREMENTS IN DOMESTIC TRAVEL LUNCH AND DINNER CLUB FOR RECOGNITION OF ASSOCIATES AND BUSINESS MEETINGS
	DONALD T FLOYD, JR AND JENNIFER L SIRANGELO BOTH PARTICIPATED IN A SECTION 457 PLAN SPONSORED BY NATIONAL 4-H COUNCIL CONTRIBUTIONS OF \$17,000 AND \$18,154, RESPECTIVELY, WERE MADE TO THE PLAN BY NATIONAL 4-H COUNCIL FOR THE YEAR ENDED DECEMBER 31, 2013 NATIONAL 4-H 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

Schedule J (Form 990) 2013

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DLN: 93493134071065

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the or NATIONAL 4-H CC								Employ	yer ident	tificatio	on numbe	er
									62206			
					3) and section						4.0.1	
	piete if the org ie of disqualifie				o, Part IV, line n disqualified		r Form 990-EZ, Part V, line 40b ription of transaction (d) Cor					
1 (a) ivan	ic of disqualific	su person		n and organi		(6) 503	сприоп	or tru	nsaction	' F	Yes	No
												-
												•
												-
												_
												-
2 Enterthe	amount of tax	incurred by o	rganization	managers or	disqualified pe	rsons durina t	he vea	r unde	rsection			-
					· · ·		. ie year		> \$	'' <u> </u>		
3 Enter the	amount of tax,	ıf any, on lın	e 2, above, r	eımbursed b	y the organizat	ion			▶ \$			
		, _										
	ans to and				5. 990-EZ, Part ∨	/ line 38a or	Form 9	90 P	art IV li	ine 26	orifthe	
					line 5, 6, or 22		1 01111 3	50,1	arciv, n	ille 20,	or ir the	
(a) Name of	(b)	(c)	(d) Loan		(e)Original	(f)Balance	(g) In		(h)		(i)Wr	
ınterested person	Relationship with	Purpose o	of or from the organization		principal amount	due	defaul	t?	A pprov	/ed	agreer	nent?
person	organization		or gamizati	011	dilloune				board			
									or	++002		
			То	From	-		Yes	No	Yes	No	Yes	No
			1	110111			1		1.00	"	1	1
											_	
											_	
											_	
		<u> </u>							1		\neg	
otal	ante or Acc		enefittina	Intereste	d Persons.							
					Form 990, P	art IV, line 2	27.					
(a) Name of I			shıp between		nt of assistanc	e (d) Typ	e of ass	ıstan	:e (e) Purpo	se of ass	sistanc
perso	n i		erson and the	2								
		organı	Zation									
						_ _						

	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between interested person and the organization (c) A mount of transaction organization (d) Description of transaction organization (e) Ye				
Complete if the organization	on answered "Yes" on I	Form 990, Part IV, lin	<u>ie 28a, 28b, or 28c.</u>		
(a) Name of interested person	between interested person and the	` '	(d) Description of transaction	(e) Sh of organiz reven	f zatıon'
				Yes	No
(1) EDWARD J BECKWITH ESQ	BUSINESS		BECKWITH, WHO IS AN OFFICER OF NATIONAL 4-H COUNCIL, ALSO WORKS AT THE LAW FIRM BAKER & HOSTETLER LLP, AN INDEPENDENT CONTRACTOR, WHICH PROVIDES A FULL RANGE OF LEGAL SERVICES FOR THE ORGANIZATION ALL FEES ARE REVIEWED AND APPROVED BY THE CEO MONTHLY AND ALL LEGAL SERVICES PROVIDED ARE REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE OF		No
(2)					No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493134071065

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization NATIONAL 4-H COUNCIL

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

					36-2	2862206			
Pa	rt I Types of Property								
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported or Form 990, Part VIII line 1g	۱	(e Method of a noncash contri		_	ınts
	Art—Works of art				+				
	Art—Historical treasures .				\dashv				
_	Art—Fractional interests				_				
	Books and publications				\dashv				
	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
	Intellectual property				\bot				
	Securities—Publicly traded .								
LO	Securities—Closely held stock .								
1	Securities—Partnership, LLC, or trust interests								
L 2	Securities—Miscellaneous								
L3	Qualified conservation contribution—Historic								
.4	structures				+				
. 5	Real estate—Residential .				\neg				
. 6	Real estate—Commercial				\top				
.7	Real estate—Other				一				
18	Collectibles				\top				
9	Food inventory				\neg				
20	Drugs and medical supplies .								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
	Other►(PAIGN MATE)	Х	3	32,9	30 F	MV			
	Other►(1PUTERS)	Х	1	3,0	00 F	MV			
27	Other ►()								
28	Other ▶ ()								
29	Number of Forms 8283 received by the for which the organization completed \mathbf{F}				29				
								Yes	No
30a	During the year, did the organization	receive by	contribution any property r	eported in Part I, lines	1 th	rough 28, that			
	ıt must hold for at least three years fi	rom the date	e of the initial contribution,	, and which is not requi	red t	o be used			
	for exempt purposes for the entire ho	ldıng period	?				30a		Νo
b	If "Yes," describe the arrangement in	Part II							
31	Does the organization have a gift acc					i	31	Yes	
32a	Does the organization hire or use this contributions?		related organizations to s	olicit, process, or sell	nonc •	ash • •	32a		No
b	If "Yes," describe in Part II								
33	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a) ıs	checked,			

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.										
Return Reference	Explanation									
	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN (B)									

Schedule M (Form 990) (2013)

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DLN: 93493134071065

OMB No 1545-0047

2013

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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.

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

Name of the organization NATIONAL 4-H COUNCIL Employer identification number

36-2862206

990 Schedule O, Supplemental In	Explanation
FORM 990, PART III, LINE 1	
FORM 990, PART III, LINE 4B	NATIONAL 4-H CENTER-DESCRIPTION OF PROGRAM SERVICE (CONTINUED) NATIONAL 4-H YOUTH CONFERE NCE CENTER HOSTS MORE THAN 30,000 YOUTH EACH YEAR ON ITS 12-ACRE WASHINGTON, DC METRO CAMP US WHILE THEY TOUR THE CITY'S HISTORIC LANDMARKS, ATTEND CONFERENCES AND LEADERSHIP PROGRA MS, AND EXPERIENCE THE BEST OF OUR NATION'S CAPITAL EVERY YOUNG PERSON, VOLUNTEER LEADER, OR PROFESSIONAL WHO HAS VISITED NATIONAL 4-H YOUTH CONFERENCE CENTER OVER THE YEARS HAS L EFT WITH SOMETHING TO INSPIRE THEM - SOME NEW POINT OF VIEW, SOME NEW IDEA TO TAKE HOME T HAT'S THE INGREDIENT THAT HAS KEPT THE EXPERIENCE OF CENTER FRESH AND EXCITING FOR MORE TH AN 50 YEARS
FORM 990, PART VI, SECTION A, LINE 2	TWO BOARD MEMBERS, JIM BOREL AND LYNN HENDERSON, HAVE A FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11	ALL TRUSTEES ARE FURNISHED AN ELECTRONIC DRAFT COPY OF FORM 990 AND ARE GIVEN TIME TO CONF IRM THEIR REVIEW OF THE DOCUMENT ALL OF THEIR COMMENTS AND SUGGESTIONS ARE RESOLVED PRIOR TO FILING THE FORM 990
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY WITH CURRENT EMPLOYEES ALL NEW ASSOC IATES ARE REQUIRED TO REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY UPON EMPLOYMENT
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING THE COMPENSATION OF DONALD T FLOYD, JR AND JENNIFER L SIRAN GELO INCLUDES THE FOLLOWING -COMPENSATION SURVEY AND STUDY -INDEPENDENT COMPENSATION CONS ULTANT -REVIEW OF FORM 990 FOR OTHER ORGANIZATIONS -USE OF A COMPENSATION COMMITTEE -APPRO VAL BY THE BOARD OF TRUSTEES -WRITTEN EMPLOYMENT CONTRACT THE PROCESS FOR DETERMINING THE COMPENSATION OF THE SENIOR LEADERSHIP TEAM INCLUDES THE FOLLOWING - COMPENSATION SURVEY AN D STUDY -INDEPENDENT COMPENSATION CONSULTANT -REVIEW OF FORM 990 FOR OTHER ORGANIZATIONS
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS UPON REQUEST CONFLICT OF INTEREST POLICY UPON REQUEST FINANCIAL STAT EMENTS ANNUAL REPORT IS AVAILABLE ON A PUBLIC WEBSITE AND BY REQUEST
FORM 990, PART IX, LINE 11G	CONTRACTED SERVICES PROGRAM SERVICE EXPENSES 3,820,122 MANAGEMENT AND GENERAL EXPENSES 2 47,472 FUNDRAISING EXPENSES 837,825 TOTAL EXPENSES 4,905,419 OTHER PROFESSIONAL FEES P ROGRAM SERVICE EXPENSES 48,489 MANAGEMENT AND GENERAL EXPENSES 12,476 FUNDRAISING EXPENS ES 5,345 TOTAL EXPENSES 66,310
FORM 990, PART XI, LINE 9	PENSION RELATED CHANGES OTHER THAN NET PERIOD PENSION COSTS 769,128 POSTRETIREMENT MEDICA L COSTS 17,089 NAMED FUND SPENDING -7,821 NET REVENUE OF AFFILIATES -1,327,184
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 PAR T OF CONSOLIDATED FINANCIAL STATEMENTS IT DOES NOT RECEIVE SEPARATE AUDITED FINANCIAL STA TEMENTS

DLN: 93493134071065

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization NATIONAL 4-H COUNCIL

Employer identification number

36-2862206

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

or more related tax-exempt organizations during the	ne 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		5) 512(b) ntrolled ıty?
						Yes	No
(1) NATIONAL 4-H ACTIVITIES FOUNDATION 7100 CONNECTICUT AVE CHEVY CHASE, MD 208154999	ACCOUNTING AND ADMINISTRATIVE NEEDS OF NATIONALLY OPERATED 4-H INITIATIVES	ОН	501(C)(3)	LINE 11A, I	N/A		No
52-2292245]
(2) GLOBAL CLOVER NETWORK INC	INCREASE GLOBAL 4-H POSITIVE YOUTH DEVELOPMENT	ОН	501(C)(3)	LINE 11A, I			No
7100 CONNECTICUT AVE CHEVY CHASE, MD 208154999 52-2292242	DEVELOPMENT				N/A		
(3) NATIONAL 4-H CONGRESS FOUNDATION 7100 CONNECTICUT AVE	OPERATES AND PROVIDES ASSISTANCE WITH THE NATIONAL 4-H CONGRESS	ОН	501(C)(3)	LINE 11A, I	N/A		No
CHEVY CHASE, MD 208154999 45-2572008							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	<u>. </u>	Cat No 50135	5Y		Schedule R (Form	990) 20	 013

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	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		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	eral or aging	(k) Percentag ownersh
					314)			Yes	No]	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end- year ssets		(h) ercentage ownership	x managing partner? Yes No	!	
					1				_				No
					_	+			_				+

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related o	organizations lis	ted in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
b	Gift, grant, or capital contribution to related organization(s)				1b		No		
C	Gift, grant, or capital contribution from related organization(s)				1c		No		
d	Loans or loan guarantees to or for related organization(s)				1d		No		
е	Loans or loan guarantees by related organization(s)				1e		No		
f	Dividends from related organization(s)				1f		No		
g	Sale of assets to related organization(s)				1 g		No		
h	Purchase of assets from related organization(s)				1h		No		
i	i Exchange of assets with related organization(s)								
j	j Lease of facilities, equipment, or other assets to related organization(s)								
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		No		
m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10		No		
р	Reimbursement paid to related organization(s) for expenses				1 p		No		
q	Reimbursement paid by related organization(s) for expenses				1q		No		
r	O ther transfer of cash or property to related organization(s)				1r		No		
s	Other transfer of cash or property from related organization(s)				1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin (a)		(c)	(d)					
	Name of related organization	(b) Transaction type (a-s)	Amount involved	Method of determining amo	unt in	volved			
									

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

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013