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foundations)

DLN: 93493303010855 OMB No 1545-0047

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

Open to Public

THETTA	(cvenue e	7C1110C						Inspection
			endar year, or tax year beginning	g 01-01-2014 , and ending 12-	31-2014	1		
	ck if app		C Name of organization TEXAS SOUTHWEST COUNCIL INC				-	tification number
_	ress cha	_	BOY SCOUTS OF AMERICA			75-08	300617	
	ne chang		Doing business as					
Fina	al return	1	Number and street (or P O box if m	nail is not delivered to street address)	Room/suite	E Telepho	one numb	er
retu	ırn/term	ınated	104 VETERANS MEMORIAL DR			(325)	655-7	107
Am	ended re	eturn	City or town, state or province, cour	ntry, and ZIP or foreign postal code				
— App	lication p	pending	SAN ANGELO, TX 76903			G Gross r	eceipts \$	963,221
			F Name and address of prir	ncipal officer	H(a)	Is this a group	return 1	for
			DAVE BAUR 104 VETERANS MEMORIA	I DR		subordinates?		┌ Yes 🗸 No
			SAN ANGELO, TX 76903		Н(b)	Are all subordi	nates	┌ Yes ┌ No
						ıncluded?		
	•	t status		Insert no)	7	If "No," attach	a list (see instructions)
J W	ebsite:	► WW	W TEXASSOUTHWESTBSA OR	G	H(c)	Group exempt	ion num	ber 🟲
K Forn	n of orga	anızatıon	Corporation Trust Associatio	n	L Ye	ar of formation 19	35 M 9	State of legal domicile T
Pa	rt I	Sum	mary					
Activities & Governance	C B - - - 2 C	OURAC OYSCO	HINGS FOR THEMSELVES AN BE, SELF-RELIANCE, AND KINDUTS OF AMERICA IS box If the organization dispersion of the govern	DRED VIRTUES, USING THE M	posed of more	CH ARE NOW I	NCOM	MON USE BY THE
Ę	4 N	umber	of independent voting members	of the governing body (Part VI,	ıne 1b)		4	33
4	5 T	otal nur	nber of individuals employed in	calendar year 2014 (Part V , line	e 2a)		5	26
			nber of volunteers (estimate if n	• •			6	1,000
			elated business revenue from P	, , , , , , , , , , , , , , , , , , , ,			7a	(
	ри	et unre	ated business taxable income f	rom Form 990-1, line 34	· · · ·	Prior Year	7b 	Current Year
	8	Contril	outions and grants (Part VIII, li	ne 1 h)	—	352,	239	322,999
Jile	9		m service revenue (Part VIII, li	•		230,	227	204,022
Ravenue	10	Invest	ment income (Part VIII, columr	(A), lines 3, 4, and 7d)		125,	188	21,588
ш	11		revenue (Part VIII, column (A),		· ·	165,	538	172,786
	12		evenue—add lines 8 through 11	•		873,	292	721,395
	13		and sımılar amounts paıd (Part					(
	14	Benefit	s paid to or for members (Part I	X, column (A), line 4)				(
တ	15	Salarıe 5-10)	s, other compensation, employe	ee benefits (Part IX, column (A)	, lines	446,	353	440,633
Expenses	16a	=	sional fundraising fees (Part IX,	column (A), line 11e)				(
⊕ ⊕	b		ndraising expenses (Part IX, column (D					
Ш	17	Other	expenses (Part IX, column (A),	lines 11a-11d 11f-24e)		432,9	901	562,754
	18		xpenses Add lines 13-17 (mu			879,		1,003,387
	19		ue less expenses Subtract line			-6,	162	-281,992
or ces					Be	ginning of Curre	nt	End of Year
Sets San	20	Totala	ssets (Part X, line 16)			Year 2,087,0	552	1,811,121
Net Assets or Fund Balances	21		abilities (Part X, line 26)			105,		110,482
2 2 2 3 3	22		sets or fund balances Subtract			1,982,		1,700,639
Par	t II	Sign	ature Block				•	
my kr prepa Sign	rer has	e and be any kr	ture of officer					
Here	•		BAUR SCOUT EXECUTIVE or print name and title					
		,	nnt/Type preparer's name					
				Preparer's signature	Date	Check T if	PTIN	
Paid	ı	<u> </u>	ICHELE KEMP CPA	Preparer's signature MICHELE KEMP CPA	Date 2015-10-3	self-employed	P015127	
Paid Pre	l pare r	F		Preparer's signature MICHELE KEMP CPA		Check if self-employed Firm's EIN 2 Phone no (501	P015127 7-429062	8

LITTLE ROCK, AR 722094800

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

Use Only

Par		ement of Program Se af Schedule O contains a			II	
1	Briefly desci	ribe the organization's mis	sion			
SCO AME THE	UTS OF AMER RICA, THE SO MSELVES ANI	RICA, INC IN ACCORDA COUTING PROGRAM OF F D OTHERS, TRAINING TH	NCE WITH THE BY PROMOTING THE HEM IN SCOUTCR	'LAWS, AND RULES A ABILITY OF BOYS AN AFT, AND TEACHING	D BY THE CHARTER GRANTE ND REGULATIONS OF THE ND YOUNG MEN AND WOME THEM PATRIOTISM, COUR SE BY THE BOY SCOUTS OF	BOY SCOUTS OF N TO DO THINGS FOR AGE, SELF-RELIANCE,
2	the prior Forr	nization undertake any sigi m 990 or 990-EZ?			which were not listed on	
		cribe these new services o				
3	services? .	nization cease conducting,			nducts, any program	
_	•	cribe these changes on Sc				
4	expenses Se		c)(4) organizations	are required to report	ee largest program services, the amount of grants and allo	
4a	(Code) (Expenses \$	673,056	ıncludıng grants of \$) (Revenue \$	721,395)
	ACCORDANCE BOYS AND YOU	WITH THE BYLAWS, AND RULES JNG MEN AND WOMEN TO DO TH	AND REGULATIONS OF HINGS FOR THEMSELVE	THE BOY SCOUTS OF AMERS AND OTHERS, TRAINING	R GRANTED IT BY THE BOY SCOUTS RICA, THE SCOUTING PROGRAM OF THEM IN SCOUTCRAFT, AND TEACHI COMMON USE BY THE BOY SCOUTS	PROMOTING THE ABILITY OF ING THEM PATRIOTISM,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	Other progr	am services (Describe in S	Schedule O \			
-ru	(Expenses	•	including grants of	\$) (Revenue \$)
4e	· ·	 am service expenses ►	673,056		· · · · · ·	·

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? 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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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
е	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the 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
15	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
16	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? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? 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), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		1	
		28a		No
	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 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		No
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 $2 \cdot$	35b		
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? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	厂_
1.	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0 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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
h	If "Yes," enter the name of the foreign country			
ט	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		N.o.
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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		
	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		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O	contains a response or note to any line in this Part	VΙ													.[V
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Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its 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	Yes	
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	Yes	
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
-	ation B. Balliaine (This Continue B. requests information about noticing not required by the Internal B			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
<u> 5</u> e	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>le Cod</i> 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		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 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 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	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? 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 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	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

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 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.
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
- ►TEXAS SOUTHWEST COUNCIL INC
 - TEXAS SOUTHWEST COUNCIL INC
 - 104 VETERANS MEMORIAL DR 104 VETERANS MEMORIAL DR
 - SAN ANGELO, TX 76903 (325) 655-7107

Form 990 (2014)	
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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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

rt VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Tıtle	(B) A verage hours per week (list any hours	Posit more t perso and a	han d n is	ne l both	oox, an d	officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	┡┃		
c	Total from continuation sheets to Part VII, Section A	►		
d	Total (add lines 1b and 1c)	►	98,588	

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

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

Section	R 1	indar	ahda	nt Cor	ntractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

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

Part V	/##	Statement of Revenue				
		Check if Schedule O contains a response or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated campaigns 1a 70,796				312 32 .
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b				
Gra	c	Fundraising events 1c				
<u>\$</u>						
<u>i</u> ia <u>a</u>	d	Related organizations 1d				
ns,	e	Government grants (contributions) 1e				
i‡i er,	f	All other contributions, gifts, grants, and similar amounts not included above 252,203				
들	g	Noncash contributions included in lines				
ont nd	h	1a-1f \$ Total. Add lines 1a-1f	322,999			
<u> </u>	<u> </u>		,			
Ξe	2a	RENTAL OF LAND-GRAZING/HUNT 900099	101,338	101,338		
Program Serwce Revenue		SCOUTING CAMPING AND ACTIVITI	68,564	68,564		
o G	c	ROYALTY FROM OIL AND GAS	34,120	34,120		
: Y	d		31,120	31,120		
Ž,	e					
la l	f	All other program service revenue				
Š	g	Total. Add lines 2a-2f	204,022			
	3	Investment income (including dividends, interest,	204,022			
		and other similar amounts)	21,588			21,588
	4	Income from investment of tax-exempt bond proceeds				
	5	(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less rental				
	c	expenses Rental income				
	d	or (loss) Net rental income or (loss)				
		(ı) Securities (ıı) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	ь	Less cost or other basis and				
		sales expenses				
	d	Gain or (loss) Net gain or (loss)				
	8a	Gross income from fundraising				
<u>•</u>		events (not including				
Other Revenue		\$ of contributions reported on line 1c)				
ş.		See Part IV, line 18				
<u>.</u>	ь	a 326,317 Less direct expenses b 180,103				
¥	c	Net income or (loss) from fundraising events	146,214			
•	9a	Gross income from gaming activities				
		See Part IV, line 19				
	ь	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances . a 57,363				
	ь	a 57,363 Less cost of goods sold b 38,729				
		Net income or (loss) from sales of inventory	18,634	18,634		
		Miscellaneous Revenue Business Code				
		OTHER MISCELLANEOUS 900099 INCOME	7,938	7,938		
	b					
	c d	All other revenue				
	e	Total. Add lines 11a−11d				
	12	Total revenue. See Instructions	7,938			
	1		721,395	230,594		21,588

		Statement of Functional Expenses				
Section		1(c)(3) and $501(c)(4)$ organizations must complete all columns. All				
		Check if Schedule O contains a response or note to any line in this F	Part IX			<u></u>
		lude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		nts and other assistance to domestic organizations and estic governments See Part IV, line 21				
2		nts and other assistance to domestic				
3	gove	nts and other assistance to foreign organizations, foreign ernments, and foreign individuals See Part IV, lines 15 16				
4	Bene	efits paid to or for members				
5		npensation of current officers, directors, trustees, and employees				
6	(as c	npensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons cribed in section 4958(c)(3)(B)				
7	Othe	er salaries and wages	338,076	229,892	54,092	54,092
8		sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	15,350	10,438	2,456	2,456
9	Othe	er employee benefits	60,461	41,113	9,674	9,674
10	Payr	roll taxes	26,746	18,188	4,279	4,279
11	Fees	s for services (non-employees)				
а	Mana	agement				
b	Lega	al				
c	Acco	ounting				
d		bying				
e		essional fundraising services See Part IV, line 17				
f		estment management fees				
g	Othe	er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)	164,461	111,833	26,314	26,314
12		ertising and promotion	5,012	3,408	802	802
13		ce expenses	25,365	17,249	4,058	4,058
14	Infor	rmation technology			,	<u>, , , , , , , , , , , , , , , , , , , </u>
15		alties				
16	,	upancy	115,345	78,435	18,455	18,455
17		/el	82,518	56,112	13,203	13,203
18	Payr	ments of travel or entertainment expenses for any federal, e, or local public officials	,	23,222	23,212	
19	Conf	ferences, conventions, and meetings	31,700	21,556	5,072	5,072
20	Inte	rest	524	356	84	84
21	Payr	ments to affiliates	13,601		13,601	
22	Depr	reciation, depletion, and amortization	49,686	33,786	7,950	7,950
23	Insu	ırance	26,557	18,059	4,249	4,249
24	mısc	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds 10% ne 25, column (A) amount, list line 24e expenses on Schedule O)				
а		IER EXPENSE	26,289	17,877	4,206	4,206
ь	A WA	ARDS AND RECOGNITION	16,833	11,447	2,693	2,693
c		DEBT EXPENSE	4,863	3,307	778	778
d						
e	Allo	other expenses				
25		Il functional expenses. Add lines 1 through 24e	1,003,387	673,056	171,966	158,365
26	Joint repo educ	t costs. Complete this line only if the organization orted in column (B) joint costs from a combined cational campaign and fundraising solicitation. Check	=,-33,337	2.5,530	2,500	

Form 990 (2014)

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in t	thıs P	art X				
						(A)		(B)
						Beginning of year		End of year
	1	Cash-non-interest-bearing		•		41,030	1	14,646
	2	Savings and temporary cash investments	•	•	•		2	
	3	Pledges and grants receivable, net		•	•	139,725	3	53,468
	4	Accounts receivable, net				6,978	4	10,514
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II	of			5	
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and $6000000000000000000000000000000000000$	contr mploy	butin	g employers		6	
88	7	Notes and loans receivable, net					7	
⋖	8	Inventories for sale or use				45,965	8	33,939
	9	Prepaid expenses and deferred charges				6,860	9	8,363
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1		2,305,128	·		·
	Ь	Less accumulated depreciation	10	ь	1,373,597	835,644	10c	931,531
	11	Investments—publicly traded securities	-			965,628	11	712,158
	12	Investments—other securities See Part IV, line 11					12	-
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11			_	45,822	15	46,502
	16	Total assets. Add lines 1 through 15 (must equal line 34) .				2,087,652	16	1,811,121
	17	Accounts payable and accrued expenses				63,738	17	75,230
	18	Grants payable					18	
	19	Deferred revenue				7,725	19	6,995
	20	Tax-exempt bond liabilities				,	20	<u> </u>
	21	Escrow or custodial account liability Complete Part IV of Sche					21	
Liabilities	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualif						
æ		persons Complete Part II of Schedule L			•		22	
	23	Secured mortgages and notes payable to unrelated third partie	s.			11,207	23	3,818
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Pa	rt X c			22,351	25	24,439
	26	Total liabilities. Add lines 17 through 25				105.021	26	110,482
		Organizations that follow SFAS 117 (ASC 958), check here				,		<u> </u>
ěs		lines 27 through 29, and lines 33 and 34.	,					
ä	27	Unrestricted net assets				1,243,566	27	1,114,148
8 8	28	Temporarily restricted net assets				537,947	28	385,373
₹	29	Permanently restricted net assets				201,118	29	201,118
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🕨	-	ind			
9	30	Capital stock or trust principal, or current funds					30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund					31	
As	32	Retained earnings, endowment, accumulated income, or other f	funds				32	
Net	33	Total net assets or fund balances				1,982,631	33	1,700,639
~	34	Total liabilities and net assets/fund balances				2,087,652	34	1,811,121
-							F	orm 990 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				r
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7	721,395
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,0	003,387
3	Revenue less expenses Subtract line 2 from line 1	3			281,992
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			982,631
5	Net unrealized gains (losses) on investments	5			702,031
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,7	700,639
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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 review a separate basis, consolidated basis, or both	wed o	n		
	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 sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
За	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?	ie	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: **Software Version:**

EIN: 75-0800617

Name: TEXAS SOUTHWEST COUNCIL INC BOY SCOUTS OF AMERICA

Part	(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more the perso and a	ion (d nan o n is b	ne b oth ctor/	ox, u an of trus	nless ficer tee)		(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
COLUMN C		below	ndividual trustee or director	Institutional Trustee	Жісеі	(e) emplojee	highest compensated amployee	-ormer			
SCOUTE PERCENT	` '		x						98,588	0	0
MADE PARTICIPATION				_				_	,		
12 MMSC DOOR			×		Х				0	0	0
COMPANDED COMP		1 00									
CEAN PRINCE CONTINUE 100			Х		Х				0	0	0
PRESIDENT		1 00									
WO F MARKET			X		Х				0	0	0
WF OF MARKET (S) JAMES NUFFMAN (10) CO CONTROLLES (10) CONTROLLES (10) CO CONTROLLES (10) MARCIOLES (10)	(4) JOHN FLINT		.,		.,					_	-
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Ye OF FINANC	VP OF DEVELO										
(9) NICHAEL LENKE			×		х				0	0	0
V O MEMBER X		1.00									
OS SCOTTER SCOTT			×		Х				0	0	0
VO OF PROPER		1 00									
CO MARCHE SHARP 100			×		Х				0	0	0
VP OF OPERAT		1 00									
CAL COUNSE CAL			X		Х				0	0	0
LEGAL COUNSE	` '		v		v				0	0	0
Name			^						· ·	0	0
BOARD MEMBER	` '		l x						0	0	0
SOARD MEMBER	BOARD MEMBER										
Color Colo	` '		×						0	0	0
DOARD MEMBER X		1.00									
100			×						0	0	0
X		1 00									
Color Colo			Х						0	0	0
BOARD MEMBER 1 00		1 00								_	
X			×						0	0	0
BOARD MEMBER	` '		v						0	0	0
Name	BOARD MEMBER		^						0	0	0
BOARD MEMBER			l x						0	0	0
SOARD MEMBER	BOARD MEMBER								_		
COO JOHN MAYER			×						0	0	0
Name		1.00									
(21) MICHAEL MCSHAN 1 00 X 0 0 0 BOARD MEMBER 1 00 X X 0 0 0 (22) STEVEN MOYNIHAN 1 00 X X 0 0 0 AM DISTRICT 1 00 X 0 0 0 (23) DEAN PARET 1 00 X 0 0 0 BOARD MEMBER 0 0 0 0 0 (24) JOHN WESTON 1 00 X 0 0 0			х						0	0	0
X		1 00									
(22) STEVEN MOYNIHAN 1 00 X X X 0 0 0 AM DISTRICT 1 00 X 0 0 0 0 (23) DEAN PARET 1 00 X 0 0 0 0 BOARD MEMBER 1 00 X 0 0 0 0 (24) JOHN WESTON 1 00 X 0 0 0			×						0	0	0
AM DISTRICT (23) DEAN PARET		1 00									
X 0 0 0 BOARD MEMBER			×		×				0	0	0
BOARD MEMBER 1 00 X 0 0 0 (24) JOHN WESTON 1 00 X 0 0 0 0	, ,		v							^	2
x 0 0			x	L		L		L	0	0	0
	• •								0		0
			_ ^								

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	Posit more th persoi and a	ion (d nan o n is b	ne bo	ox, u an of	ınless fficer	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	2/1099-MISC) 2/1099-MISC) Formula Proper Control		organization and related organizations			
(26) ZACK UPTON	1 00	х					0	0	0
BOARD MEMBER							-	-	
(1) KEN BUCHANAN TREASURER	1 00	х		х			0	0	0
(2) MICHELE DODD BOARD MEMBER	1 00	Х					0	0	0
(3) CONNIE GONZALEZ BOARD MEMBER	1 00	х					0	0	0
(4) WAYNE GRAHAM BOARD MEMBER	1 00	х					0	0	0
(5) VIC HILDERBRAN WG DISTRICT	1 00	х		х			0	0	0
(6) DAVID KEMP PB DISTRICT	1 00	х		Х			0	0	0
(7) HEATH LANGE OA REPRESENT	1 00	х					0	0	0

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As Filed Data -

DLN: 93493303010855

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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

Open to Public Inspection

Employer identification number Name of the organization TEXAS SOUTHWEST COUNCIL INC. BOY SCOUTS OF AMERICA 75-0800617 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organization instructions	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

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.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2	014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	357,391	917,077	568,597	503,172		345,993	2,692,230
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				145,577		553,582	699,159
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	357,391	917,077	568,597	648,749		899,575	3,391,389
_	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							
8 	Add lines 7a and 7b Public support (Subtract line 7c from line 6)							3,391,389
	ction B. Total Support							
							I	
Cale	ndar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014		(f) Total
	in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20		(f) Total
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) 2010 357,391 285,799	(b) 2011 917,077 149,846	(c) 2012 568,597 168,629	(d) 2013 648,749 273,938	(e) 20	899,575 55,708	(f) Total 3,391,389
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 income (less section 511 taxes) from businesses acquired after	357,391	917,077	568,597	648,749	(e) 20	899,575	3,391,389
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)	357,391	917,077	568,597	648,749	(e) 20	899,575	3,391,389
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 business activities not included in line 10b, whether or not the	357,391 285,799	917,077 149,846	568,597 168,629	648,749 273,938	(e) 20	899,575 55,708	3,391,389 933,920
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 business activities not included	357,391 285,799	917,077 149,846	568,597 168,629	648,749 273,938	(e) 20	899,575 55,708	3,391,389 933,920
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 VI) Total support. (Add lines 9, 10c,	357,391 285,799 285,799	917,077 149,846 149,846	568,597 168,629 168,629	273,938 273,938 273,938	(e) 20	55,708	3,391,389 933,920 933,920
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 VI)	357,391 285,799 285,799 7,632 650,822	917,077 149,846 149,846 11,080	168,629 10,986 748,212	273,938 273,938 273,938 28,380 951,067		\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	933,920 933,920 933,920 66,016
9 10a b c 11 12	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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	357,391 285,799 285,799 7,632 650,822 for the organization	917,077 149,846 149,846 11,080 1,078,003 on's first, second,	168,629 168,629 10,986 748,212 third, fourth, or f	273,938 273,938 273,938 28,380 951,067		\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	3,391,389 933,920 933,920 66,016 4,391,325 3) organization,
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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub	357,391 285,799 285,799 7,632 650,822 for the organization	917,077 149,846 149,846 11,080 1,078,003 on's first, second,	168,629 168,629 10,986 748,212 third, fourth, or f	273,938 273,938 273,938 28,380 951,067		\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	3,391,389 933,920 933,920 66,016 4,391,325 3) organization,
9 10a b c 11 12 13 14 Se	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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	357,391 285,799 285,799 7,632 650,822 for the organization	917,077 149,846 149,846 11,080 1,078,003 on's first, second,	168,629 168,629 10,986 748,212 third, fourth, or f	273,938 273,938 273,938 28,380 951,067	section	\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	3,391,389 933,920 933,920 66,016 4,391,325 8) organization,
9 10a b c 11 12 13 14 Se 15 16 Se	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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage from 201 ection D. Computation of Inve	285,799 285,799 7,632 650,822 for the organization (line 8, column (3 Schedule A, Palestment Inco	11,080 1,078,003 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	168,629 168,629 10,986 748,212 third, fourth, or f	273,938 273,938 273,938 28,380 951,067 Ifth tax year as a	section	\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	3,391,389 933,920 933,920 66,016 4,391,325 3) organization, 77 230 %
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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage from 2014 Ection D. Computation of Inve	7,632 650,822 for the organization (line 8, column (.3 Schedule A, Palestment Inco 2014 (line 10 c, column to c, c, column to c,	11,080 1,078,003 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	168,629 168,629 10,986 748,212 third, fourth, or f 13, column (f)) Je Dy line 13, column	273,938 273,938 273,938 28,380 951,067 Ifth tax year as a	section	\$99,575 \$55,708 \$55,708 \$7,938 \$963,221	3,391,389 933,920 933,920 66,016 4,391,325 3) organization, 77 230 %
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	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 VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage from 201 ection D. Computation of Inve	7,632 650,822 for the organization (line 8, column (.3 Schedule A, Pastment Inco 2014 (line 10 c, co	11,080 1,078,003 1,078,003 on's first, second, ercentage f) divided by line art III, line 15 me Percentag olumn (f) divided by A, Part III, line 1	168,629 168,629 10,986 748,212 third, fourth, or f 13, column (f)) 1e by line 13, column	273,938 273,938 273,938 28,380 951,067 Ifth tax year as a	15 16 17 18	55,708 55,708 7,938 963,221 501(c)(3	3,391,389 933,920 933,920 66,016 4,391,325 3) organization,

b 33 1/3% support tests—2013. 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)					
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2				
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1				
S	ection D. All Type III Supporting Organizations					
			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.					
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b				
3						
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 A mounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	anızatıons		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
PART III, LINE 12	OTHER 66,016

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493303010855

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.

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

Open to Public

lame of the organization EXAS SOUTHWEST COUNCIL INCO OY SCOUTS OF AMERICA	;	<u></u>		yer identifica	tion number	
Part I Organization	ns Maintaining Donor Adv	vised Funds or Other Similar I		Accounts	. Complete	e if the
organization c	mswered res to rorm 550	(a) Donor advised funds	(b) Funds and o	ther accour	nts
Total number at end of	year		-			
Aggregate value of con	tributions to (during year)					
Aggregate value of gra						
Aggregate value at end	of year					
		ors in writing that the assets held in do ganization's exclusive legal control?	onor advise	d	┌ Yes	┌ No
	e purposes and not for the benef	onor advisors in writing that grant func it of the donor or donor advisor, or for		ourpose	┌ Yes	┌ No
	·	the organization answered "Yes"	to Form	990 Part IV	<u> </u>	•
Preservation of lan Protection of nature Preservation of ope	en space		a certified h	nistoric struct	cure	
easement on the last d	ay of the tax year					
				Held at the	End of the	Year
Total number of conse			2a			
Total acreage restricte	ed by conservation easements		2b			
Number of conservatio	n easements on a certified histo	oric structure included in (a)	2c			
	n easements included in (c) acq d in the National Register	uired after 8/17/06, and not on a	2d			
Number of conservation the tax year ►	n easements modified, transferr 	ed, released, extinguished, or termina	ted by the	organızatıon (during	
Number of states wher	e property subject to conservati	ion easement is located ►				
	have a written policy regarding t servation easements it holds?	the periodic monitoring, inspection, ha	ndling of vi	olations, and	┌ Yes	┌ No
Staff and volunteer hou	ırs devoted to monitoring, inspe	cting, and enforcing conservation easo	ements dur	ing the year		
A mount of expenses in	curred in monitoring, inspecting	, and enforcing conservation easemer	nts during t	he year		
Does each conservation and section 170(h)(4)		d) above satisfy the requirements of se	ection 170	(h)(4)(B)(ı)	☐ Yes	┌ No
balance sheet, and inc		nservation easements in its revenue a e footnote to the organization's financi ents				
		s of Art, Historical Treasures es" to Form 990, Part IV, line 8.	, or Othe	r Similar <i>I</i>	Assets.	
works of art, historical	treasures, or other similar asse	16 (ASC 958), not to report in its rev ts held for public exhibition, education o its financial statements that describ	n, or resear	ch ın furthera		c
works of art, historical		16 (ASC 958), to report in its revenue ts held for public exhibition, education e items				с
(i) Revenue included i	n Form 990, Part VIII, line 1			► \$		
(ii) Assets included in	Form 990 Part X					
If the organization rece	eived or held works of art, histor	ical treasures, or other similar assets 116 (ASC 958) relating to these item				
Revenue included in Fo	orm 990, Part VIII, line 1			► \$		
Assets included in For	m 990 Bart V			b. #		

If "Yes," explain the arrangement in Part XIII and complete the following table Amount Id	Part	Organizations Maintaining Co	<u>llections of Art,</u>	His	tori	<u>cal Tre</u>	<u>easu</u>	<u>res, or Oth</u>	er S	<u>Similar Asse</u>	ts (co	ntınued)
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pert XII	3		on, and other record	s, ch	necka	any of th	ne foll	owing that are	ası	gnıficant use of	ıts	
Previde a description of future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Very Type Type Type Type Type Type Type Typ	а	Public exhibition		d	Γ	Loan o	rexcl	nange progran	ns			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to make funds rether than to be maintained as part of the organization answered "Yes" to Form 990. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an angenization and part XIII and complete the following table 1b If "Yes," explain the arrangement in Part XIII and complete the following table 1c Beginning balance 2d Additions during the year 1e	b	Scholarly research		е	\sqcap	Other						
Part XII Source the veer, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization scollection? Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part XIII the included on amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table If "Yes," explain the arrangement in Part XIII and complete the following table Beginning balance It c Amount Amount It c It c Amount It c Amount It c Amount It c Amount It c It c Amount It c It c Amount It c Amount It c It c It c It c Amount It c It	c	Preservation for future generations										
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year 1a Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? yes No. 1b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII to Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. In Part XIII. Check here if the explanation has been provided in Part XIII. Check here if the explanation has been provided in Part XIII. Check here if the explanation has been provided in Part XIII. Check here if the explanation has been provided in Part XIII. Che	4		llections and explai	n hov	w the	y further	the o	rganızatıon's	exen	mpt purpose in		
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, fusice, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? III and complete the following table C	5								ımıla			
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is its the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Fir'ves, explain the arrangement in Part XIII and complete the following table	Dor								"Voc	•		l No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization that are held and administered for the organization by Interpretation answered Endowment E	Pal							i aliswereu	165	to Follil 990	',	
C Beginning balance	1a	Is the organization an agent, trustee, custod						or other asset	s not		Yes	┌ No
C Beginning balance C	b	If "Yes," explain the arrangement in Part XII	I and complete the f	ollov	ving t	able						
Additions during the year Ending balance Ending ba										Amou	ınt	
Distributions during the year Ite If If If If If If If I	С	Beginning balance						10	:			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Note 1 (i) Programs (ii) related organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) Poserty (iii) Radio (iii) Poserty (iiii) Radio (iiii) Poserty (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	d	Additions during the year						10	4			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization that are held and administered for the organization so in the possession of the organization that are held and administered for the organization by If Yes To 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) No Description of property (a) Cost or other basis (iversiment) (b) Cost or other basis (iversiment) (b) Cost or other basis (iversiment) (c) Accumulated (d) Book value of Equipment (c) Accumulated (d) Equipment (d) Equipment (e) Equipment	е	Distributions during the year										
Description of property Description of	f	Ending balance						11	:			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	2a	Did the organization include an amount on Fo	rm 990, Part X, line	21,	for es	scrow or	custo	odial account	lıabıl	lity?	Yes	┌ No
Calcurent year Calc	b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has b	een p	rovided in Pai	t XI	II		Γ
1a Beginning of year balance 990,527 1,013,567 Image: contraction of the contraction of the contraction of property 1,013,567 Image: contraction of property 1,013,569 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,589 1,013,513,513,513,513,513,513,513,513,513,5	Pai	rt V Endowment Funds. Complete		ans	were							
b Contributions			` ' '	(b			b (c) ⊺	wo years back	(d) Th	ree years back (e)Four ye	ears back
d Grants or scholarships	_				1							
13,679	b		9,300			100						
e Other expenditures for facilities and programs	С	Net investment earnings, gains, and losses	-13,679			79,203						
and programs	d	Grants or scholarships										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ 56 000 % Permanent endowment ▶ 5 000 % C Temporarily restricted endowment ▶ 39 000 % The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	e		·			-						
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 56 000 % b Permanent endowment ▶ 5 000 % c Temporarily restricted endowment ▶ 39 000 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	f	Administrative expenses	-162,205			-84,665						
a Board designated or quasi-endowment ▶ 56 000 % b Permanent endowment ▶ 5 000 % c Temporarily restricted endowment ▶ 39 000 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	g	End of year balance	705,575			990,527						
b Permanent endowment 5 000 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations Yes No (ii) related organizations 3a(ii) No b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Conductor of the complete of	2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g,	column	(a)) l	neld as				
C Temporarily restricted endowment ▶ 39 000 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	а	Board designated or quasi-endowment ►	56 000 %									
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	b	Permanent endowment ► 5 000 %										
Yes No.	c	remporarily restricted endowment										
(i) unrelated organizations	3a	Are there endowment funds not in the posses	ssion of the organiza	tion t	that a	are held	and a	dmınıstered f	or the	e		
(ii) related organizations		-								l	-	No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book va		•			•						Yes	N o
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Description of property (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) 1a Land	h	· ·							•	-	<u> </u>	INU
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) (e) Description of property (f) Description of property (g) Cost or other basis (other) (h) Book value basis (other) (h) Cost or other basis (other) (h) Book value basis (other) (h) Cost or other basis (other) (h) Book value basis (other) (h) Cost or other basis (other) (h) Book value basis (other) (h) Cost or other basis (other) (h) Cost			•							<u> </u>	l	
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land	Par	t VI Land, Buildings, and Equipme	nt. Complete if the				ansv	vered 'Yes' t	o Fo	orm 990, Part	IV, lır	ne
1a Land			LO.		1 /2) Cost or	othor	(h)Cost or oth	ar T	(a) Assumulated	(d) Da	ok ualua
b Buildings 1,693,637 1,153,730 539,9 c Leasehold improvements 273,693 219,867 53,8 e Other 131,589 131,589		Description of property									(a) 80	ook value
c Leasehold improvements	1a	_and						206,2	09			206,209
d Equipment 273,693 219,867 53,8 e Other 131,589 131,5	Ь	Buildings		•				1,693,6	37	1,153,730		539,907
e Other	c l	_easehold improvements										
	d i	Equipment						273,6	93	219,867		53,826
				•				·	89			131,589
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colu	ımn (l	B), line 1	0(c).)					931,531

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (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.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
T-1-1 (C-1) (h) (F 000 P-+ V (/P) (42)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990	Part IV line 11d See Form 990 Part X line 15
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizat (a) Des	ion answered 'Yes' to Form 990	, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organization	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizate (a) Des	cription	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	cription 2 15.)	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	cription 2 15.)	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate (a) Des	cription 2 15.)	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability	e 15.) ganızatıon answered 'Yes' to Form 990	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	e 15.) ganızatıon answered 'Yes' to Form 990 (b) Book value	(b) Book value

Par	t XI Reconciliation of Revenue per Aud the organization answered 'Yes' to For			ts With Re	evenue	per Retu	rn Complete ıf
1	Total revenue, gains, and other support per audite				•	1	721,395
2	Amounts included on line 1 but not on Form 990,	Part VIII, line 12					
а	Net unrealized gains (losses) on investments .		2a				
b	Donated services and use of facilities	[2b			1	
C	Recoveries of prior year grants	[2c			1	
d	Other (Describe in Part XIII)	[2d]	
е	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1					3	721,395
4	Amounts included on Form 990, Part VIII, line 12	2, but not on line 1					
а	Investment expenses not included on Form 990,	Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)	[4b			<u> </u>	
С	Add lines 4a and 4b					4c	
5	Total revenue Add lines 3 and 4c. (This must equ					5	721,395
Part	Reconciliation of Expenses per Au if the organization answered 'Yes' to Fo			nts With E	xpense	s per Re	turn. Complete
1	Total expenses and losses per audited financial s					1	1,003,387
2	A mounts included on line 1 but not on Form 990,	Part IX, line 25					
а	Donated services and use of facilities		2a				
b	Prior year adjustments		2b			1	
c	Otherlosses		2c			1	
d	Other (Describe in Part XIII)		2d			1	
е	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1					3	1,003,387
4	Amounts included on Form 990, Part IX, line 25, l	but not on line 1:					
а	Investment expenses not included on Form 990, I	Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)		4b				
c	Add lines 4a and 4b					4c	
5	Total expenses Add lines 3 and 4c. (This must eq	ıual Form 990, Part I, line	18)			5	1,003,387
Part	t XIII Supplemental Information						
Part	vide the descriptions required for Part II, lines 3, 5, a V, line 4, Part X, line 2, Part XI, lines 2d and 4b, ar rmation						ny additional
	Return Reference	Explanation					
			•	-			

5 cm c da la 5 (1 cm 5 5 5) 2 5 2 5		r age S	
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
l			
-			

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493303010855

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

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.

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

Open to Public Inspection

EXAS SOUTHWEST COUNCIL INC OY SCOUTS OF AMERICA			75-0800617	
Fundraising Activities. Complete filers are not required to complete		on answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ
Indicate whether the organization raised fund Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or oral agor key employees listed in Form 990, Part V If "Yes," list the ten highest paid individuals to be compensated at least \$5,000 by the or	e f g greement with any ind II) or entity in conne or entities (fundraise	Solicitation of nor Solicitation of gov Special fundraisin Ividual (including office ction with professional f	regovernment grants rernment grants g events rs, directors, trustees fundraising services?	Г Yes Г No ndraiser is
(i) Name and address of individual or entity (fundraiser)	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1	Yes No			
2				
3				
4				
5				
6				
7				
8				
9				
1.0				
List all states in which the organization is regregistration or licensing	. gıstered or lıcensed t	o solicit contributions o	r has been notified it is	exempt from

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut	on answered "Yes" to lons and gross income	Form 990, Part IV, li on Form 990-EZ, lir	ne 18, or reported nes 1 and 6b. List
			(a) Event #1 SALE OF POPCORN (event type)	(b) Event #2 SPECIAL EVENTS (event type)	(c) O ther events (total number)	(d) Total events (add col (a) through col (c))
⊕_3	1	Gross receipts	201,895			326,317
Revenue	2	Less Contributions	,	,		,
æ 	3	Gross income (line 1 minus line 2)	201,895	124,422		326,317
	4	Cash prizes				
"	5	Noncash prizes				
nse	6	Rent/facility costs				
Expenses	7	Food and beverages .				
Direct	8	Entertainment				
출	9	Other direct expenses .	124,248	55,855		180,103
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(180,103)
	11	Net income summary Subtract lii				146,214
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or rep	
Revenue	1	\$15,000 on Form 990-EZ, lir	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	2	Cash prizes				
Expenses		Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes %	
		Direct expense summary Add lines Net gaming income summary Subt				
9 a b	Ent Is t	ter the state(s) in which the organiza the organization licensed to conduct No," explain	ation conducts gaming ac gaming activities in eac	tivitiesh of these states?		
10a b		re any of the organization's gaming l Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?	

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity		
	formed to administer charitable gaming	,,		Г _{Yes} Г	— No
13	Indicate the percentage of gaming acti		1 1	, , , ,	
а	The organization's facility		13a		%
b	An outside facility				%
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records		
	Name ▶				
	Address ►				
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming		
154				┌ Yes 「	– _{No}
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the		
c	If "Yes," enter name and address of the third party				
	Name ►				
	Address 🏲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation 🕨 \$		······		
	Description of services provided				
	Director/officer	_ Employee	☐ Independent contractor		
17	Mandatory distributions				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?				
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent				
	ın the organization's own exempt activi		·		
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr		
	Return Reference		Explanation		

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493303010855

OMB No 1545-0047

2014

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Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
TEXAS SOUTHWEST COUNCIL INC
BOY SCOUTS OF AMERICA

Employer identification number
75-0800617

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	THE COUNCIL IS DEVOTED TO PROMOTING, WITHIN THE TERRITORY COVERED BY THE CHARTER GRANTED IT BY THE BOY SCOUTS OF AMERICA, INC. IN ACCORDANCE WITH THE BY LAWS, AND RULES AND REGULATIONS OF THE BOY SCOUTS OF AMERICA, THE SCOUTING PROGRAM OF PROMOTING THE ABILITY OF BOYS AND YOUNG MEN AND WOMEN TO DO THINGS FOR THEMSELVES AND OTHERS, TRAINING THEM IN SCOUTCRAFT, AND TEACHING THEM PATRIOTISM, COURAGE, SELF-RELIANCE, AND KINDRED VIRTUES, USING THE METHODS WHICH ARE NOW IN COMMON USE BY THE BOY SCOUTS OF AMERICA

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7A	REGULAR MEMBERS OF THE EXECUTIVE BOARD SHALL BE ELECTED AT THE ANNUAL MEETING OF THE LOCAL COUNCIL, SHALL TAKE OFFICE IMMEDIATELY FOLLOWING SUCH MEETING, AND SHALL CONTINUE IN OFFICE UNTIL THE CONCLUSION OF THE NEXT SUCCEEDING ANNUAL MEETING OF THE LOCAL COUNCIL AND UNTIL THEIR RESPECTIVE SUCCESSORS ARE ELECTED AND QUALIFY CHAIRMEN OF THE COMMITTEES OF THE EXECUTIVE BOARD TAKE OFFICE AS MEMBERS OF THE EXECUTIVE BOARD UPON THEIR BEING APPOINTED BY THE PRESIDENT AND APPROVED BY THE EXECUTIVE BOARD DISTRICT CHAIRMEN TAKE OFFICE AS MEMBERS OF THE EXECUTIVE BOARD UPON THEIR BEING APPROVED BY THE EXECUTIVE BOARD ANY VACANCY ON THE EXECUTIVE BOARD OF THE LOCAL COUNCIL MAY BE FILLED BY THE EXECUTIVE BOARD, AND THE PERSON SO ELECTED SHALL HOLD OFFICE FOR THE UNEXPIRED PERIOD OF THE TERM OF OFFICE NOMINATIONS TO FILL VACANCIES SHALL BE MADE BY THE NOMINATING COMMITTEE A MEMBER OF THE EXECUTIVE BOARD MAY BE REMOVED UPON 30 DAYS WRITTEN NOTICE TO THE MEMBERS OF THE EXECUTIVE BOARD AND BY AN AFFIRMATIVE VOTE OF TWO-THIRDS OF THE ENTIRE MEMBERSHIP OF THE BOARD

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7B	THE EXECUTIVE BOARD SHALL MEET AT SUCH TIME AND PLACE AS THE EXECUTIVE BOARD MAY DIRECT AND IN ANY EVENT AT LEAST FOUR TIMES ANNUALLY INCLUDING AN ORGANIZATIONAL MEETING AS SOON AS PRACTICABLE FOLLOWING THE ANNUAL MEETING OF THE LOCAL COUNCIL IT SHALL BE THE GENERAL PRACTICE OF THE EXECUTIVE BOARD TO MEET MONTHLY SPECIAL MEETINGS OF THE EXECUTIVE BOARD MAY BE CALLED BY THE EXECUTIVE COMMITTEE OF THE EXECUTIVE BOARD OR BY THE PRESIDENT AND SHALL BE CALLED WITHIN 30 DAYS UPON THE WRITTEN REQUEST OF AT LEAST ONE THIRD OF THE MEMBERS OF THE EXECUTIVE BOARD (WHICH REQUEST SHALL SPECIFY THE PURPOSE OF SUCH SPECIAL MEETING) A NOTICE OF EACH MEETING OF THE EXECUTIVE BOARD SHALL BE PROVIDED TO EACH MEMBER AT LEAST 5 DAYS IN ADVANCE OF THE MEETING ONE THIRD OF THE MEMBERS OF THE EXECUTIVE BOARD SHALL CONSTITUTE A QUORUM FOR ALL PURPOSES UNLESS OTHERWISE REQUIRED BY LAW, THE ARTICLES OF INCORPORATION OR THESE BY LAWS, ALL QUESTIONS PRESENTED TO A MEETING OF THE EXECUTIVE BOARD AT WHICH A QUORUM IS PRESENT SHALL BE DECIDED BY A MAJORITY OF THOSE ACTUALLY VOTING

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE TAX FORM 990 IS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM AND PROVIDED TO THE EXECUTIVE BOARD FOR REVIEW AND APPROVAL THE RETURN IS THEN PRESENTED TO THE ENTIRE COUNCIL FOR FINAL APPROVAL PRIOR TO FILING

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	EMPLOYEES OF THE COUNCIL OR MEMBERS OF THEIR IMMEDIATE FAMILIES SHALL NOT HAVE ANY INTEREST, DIRECT OR INDIRECT, IN ANY OTHER BUSINESS WHICH IN ANY DEGREE CONFLICTS WITH THE EMPLOYEES PRIMARY OBLIGATIONS TO THE COUNCIL. IN THIS REGARD, EMPLOYEES OR MEMBERS OF THEIR IMMEDIATE FAMILIES SHOULD NOT POSSESS A SIGNIFICANT FINANCIAL INTEREST IN, OR RECEIVE REMUNERATION FROM, ANY BUSINESS THAT DOES, OR SEEKS TO DO, BUSINESS WITH THE COUNCIL. IN ADDITION, EMPLOYEES SHOULD NOT CONDUCT BUSINESS ON BEHALF OF THE COUNCIL WITH MEMBERS OF THEIR IMMEDIATE FAMILY, OR AN ASSOCIATION WHICH COULD BE CONSTRUED AS SIGNIFICANT IN TERMS OF POTENTIAL CONFLICT OF INTEREST EMPLOYEES OR MEMBERS OF THEIR IMMEDIATE FAMILY SHOULD NOT DO BUSINESS WITH OTHER EMPLOYEES OF THE COUNCIL ON THE BASIS OF THEIR MUTUAL ASSOCIATION WITH THE COUNCIL ANY EMPLOYEE WHO BELIEVES THAT HIS OR HER PERSONAL ACTIONS OR INTERESTS, OR THE ACTIONS OF OTHERS, MAY VIOLATE THIS POLICY MUST DISCUSS THE MATTER WITH THE SCOUT EXECUTIVE OR COUNCIL PRESIDENT ANY EMPLOYEE WHOSE ACTIONS OR INTERESTS VIOLATE THIS POLICY MAY BE SUBJECT TO IMMEDIATE TERMINATION, IF SUCH IS DETERMINED TO BE IN THE BEST INTEREST OF THE COUNCIL. IT IS THE RESPONSIBILITY OF EVERY EMPLOYEE OF THE COUNCIL TO BE AWARE OF AND TO OBSERVE THESE STANDARDS ACCORDINGLY, AN EMPLOYEE STATEMENT WILL BE DELIVERED TO EACH EMPLOYEE ANNUALLY. EACH EMPLOYEE IS ASKED TO SIGN AND RETURN THE EMPLOYEE STATEMENT TO THE COUNCIL DESIGNEE EMPLOYEE STATEMENTS WILL BE HELD IN COMPLETE CONFIDENCE EXCEPT WHEN NECESSARY TO CONDUCT AN INVESTIGATION.

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	INCREASES IN COMPENSATION FOR THE EXECUTIVE SCOUT EXECUTIVE AND ALL OTHER KEY EMPLOYEES ARE SUBJECT TO APPROVAL BY THE COUNCIL

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	INCREASES IN COMPENSATION FOR THE EXECUTIVE SCOUT EXECUTIVE AND ALL OTHER KEY EMPLOYEES ARE SUBJECT TO APPROVAL BY THE COUNCIL

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	DOCUMENTS ARE NOT OPENLY MADE AVAILABLE TO THE PUBLIC BUT MAY BE OBTAINED THROUGH WRITTEN REQUEST IN ACCORDANCE WITH COUNCIL GUIDELINES

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES 111,833 26,314 26,314

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2014

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.

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

Name of the organization TEXAS SOUTHWEST COUNCIL INC BOY SCOUTS OF AMERICA

Employer identification number 75-0800617

Part I Identification of Disregarded Entities Complete	Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total ıncome	(e) End-of-year assets	(f) Direct controlling entity							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section	ntrolled
						Yes	No
(1) BOY SCOUTS OF AMERICA INC BOY SCOUTS OF AMERICA INC1325 W WALNUT HILL 1325 W WALNUT HILL IRVING, TX 75038 22-1576300	SCOUTING	TX	501C3	7	N/A		No

Yes No

Yes

No

(a) Name, address, and EIN of related organization (b) Primary activity I Legal domicile (state or foreign country) (state or foreign countr	Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.												
		Name, address, and EIN of	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-		Share of end-of-year	Disproprtionate allocations?	Code V-UBI amount in box 20 of Schedule K-1	managing	(k) Percentage ownership		

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

No

No

No

No

No

No No

Yes

1m Yes

1n

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1r

ched	dule R (Form 990) 2014		Рa	ge 3
Pai	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed 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)	1 c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
				l
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	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No

k	Lease of facilities.	, equipment, o	r other assets	from related	organization(s)

- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BOY SCOUTS OF AMERICA INC BOY SCOUTS OF AMERICA INC	L	13,601	CASH PAID

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

Name, address, and EIN of entity Name, address, and ent	[·								
514)			Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under	50 orga	all partners section 01(c)(3)	Share of total	Share of end-of-year	Disproprtiona		Code V-UBI amount in box 20 of Schedule K-1	General or managing		Percentage
				514)	Yes	No	1		Yes	No	ı İ	Yes	No	
					لـــــــــا				163					ļ

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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