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DLN: 93493319071756

OMB No 1545-0047

Open to Public

Department of the Treasury
Internal Revenue S

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

foundations)

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at <u>www IRS qov/foim990</u>

Inspection

			lendar year, or tax year begind C Name of organization	ning 01-01-2015 , and ending 12-31-20	15	D Emple	over id	entification number
	eck if app Idress ch		BOY SCOUTS OF AMERICA				57630	
	ame char	-	Doing business as				3/03	00
	ıtıal retur	rn	Daning Buomood de					
Fireturn/	nal 'termınat	ted	Number and street (or P O box i 1325 West Walnut Hill Lane	f mail is not delivered to street address) Room/si	uite	E Teleph		
<u>-</u>	ended re			L TYP		(972) 580-	-2000
Ap	plication	pending	City or town, state or province, c Irving, TX 750383008	ountry, and ZIP or foreign postal code		G Gross	receipts	s \$ 1,437,679,687
			F Name and address of prin	cıpal officer	H(a)	Is this a group	n retur	rn for
			Michael A Ashline 1325 West Walnut Hill Lane		` `	subordinates?		⊤ Yes 🔽
			Irving,TX 750383008		н(ы)	No Are all subord	linates	
r Ta	x-exemp	ot status	√ 501(c)(3)	◄ (insert no)	''(')	ıncluded?		l les l Mo
J W	ebsite:	▶ wwv	v Scouting org		ш(а)	·		t (see instructions)
					H(c)	Group exemp ar of formation 1		umber ► 1761 M State of legal domicile TX
K Forr	n of orga	anization	▼ Corporation Trust Asso	ociation Other >	— [[]	ar or ronniadon 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Protection legal dofficile 17
Pa	rt I	Sum	mary					
Governance	cor the	mmunity em in Sc	y organizations, and cooperati	Charter - The primary exempt purpose of ion with other agencies, the ability of boy atriotism, courage, self-reliance, and kin	s to do t	hings for them:	selves	and others, to train
<u> </u>	2 CI	heck th	ıs box ▶ ┌─ ıf the organızatıon	discontinued its operations or disposed	of more	than 25% of it	s net a	assets
							1 -	1
Activities &			-	rning body (Part VI, line 1a)			4	75 72
<u> </u>			· -	s of the governing body (Part VI, line 1b) n calendar year 2015 (Part V, line 2a)			5	4,056
⋖			• •	fnecessary)			6	924,308
	7a To	otal unr	elated business revenue from	Part VIII, column (C), line 12			7a	-1,232,216
	b Net	t unrela	ited business taxable income	from Form 990-T, line 34			7b	-1,492,989
						Prior Year		Current Year
	8	Contri	butions and grants (Part VIII	, line 1h)	I	112,225	,774	85,341,497
Q)		_	= ;	·	·		4 7 7	07.000.547
ēnuē.	9	_	ım service revenue (Part VIII	, line 2g)		71,051		87,999,547
Ravenue	9 10	Invest	nm service revenue (Part VIII ment income (Part VIII, colu	, line 2g)	-	71,051 34,560	,441	32,496,985
Ravenue	9	Invest Other	nm service revenue (Part VIII ment income (Part VIII, colu revenue (Part VIII, column (A	, line 2g)		71,051 34,560 34,763	,441	32,496,985 30,992,322
Ravenue	9 10 11 12	Invest Other Total r 12)	nm service revenue (Part VIII ment income (Part VIII, colu revenue (Part VIII, column (A revenue—add lines 8 through	, line 2g)	ne	71,051 34,560 34,763 252,600	,441 ,386 ,778	32,496,985 30,992,322 236,830,351
Revenue	9 10 11 12	Invest Other Total r 12)	am service revenue (Part VIII ament income (Part VIII, colu revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Pa	, line 2g)	ne	71,051 34,560 34,763	,441 ,386 ,778 ,315	32,496,985 30,992,322 236,830,351 2,553,985
Ravenue	9 10 11 12 13 14	Invest Other Total r 12) Grants Benefit	am service revenue (Part VIII) ament income (Part VIII, colu revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Pa ts paid to or for members (Pai	, line 2g)	ne	71,051 34,560 34,763 252,600 2,256	,441 ,386 ,778 ,315 0	32,496,985 30,992,322 236,830,351 2,553,985
	9 10 11 12	Invest Other Total r 12) Grants Benefit	am service revenue (Part VIII ament income (Part VIII, colur revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Parts paid to or for members (Parts, other compensation, employers)	, line 2g)	ne	71,051 34,560 34,763 252,600	,441 ,386 ,778 ,315 0	32,496,985 30,992,322 236,830,351 2,553,985
	9 10 11 12 13 14	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes	am service revenue (Part VIII colument income (Part VIII, colument income (Part VIII, colument) (Part VIII), column (Arevenue—add lines 8 through and similar amounts paid (Part paid to or for members (Part paid to compensation, employed)	, line 2g)	ne .	71,051 34,560 34,763 252,600 2,256	,441 ,386 ,778 ,315 0 ,715	32,496,985 30,992,322 236,830,351 2,553,985
Exp enses Ravenue	9 10 11 12 13 14 15 16a b	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total full	am service revenue (Part VIII ament income (Part VIII, colur revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Part is paid to or for members (Part is sional fundraising fees (Part is ndraising expenses (Part IX, column	, line 2g)		71,051 34,560 34,763 252,600 2,256 68,837	,441 ,386 ,778 ,315 0 ,715 ,938	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131
	9 10 11 12 13 14 15 16a b	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total full Other	am service revenue (Part VIII ament income (Part VIII, columerevenue (Part VIII, column (American amounts paid (Part services)) and similar amounts paid (Part services) and some amounts paid (Part services) and similar services (Part IX, column expenses (Part IX, column (Amounts)) and services (Part IX, column (Amounts)).	, line 2g)		71,051 34,560 34,763 252,600 2,256 68,837 158	,441 ,386 ,778 ,315 0 ,715 ,938	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131
	9 10 11 12 13 14 15 16a b	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e	am service revenue (Part VIII colument income (Part VIII, colum revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Parts paid to or for members (Parts, other compensation, employed) assignal fundraising fees (Part IX, column expenses (Part IX, column (A expenses Add lines 13–17 (remembers 14 (remembers 13–17 (remembers 14	nn (A), lines 3, 4, and 7d)		71,051 34,560 34,763 252,600 2,256 68,837 158	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241
Expenses	9 10 11 12 13 14 15 16a b	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e	am service revenue (Part VIII colument income (Part VIII, colum revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Parts paid to or for members (Parts, other compensation, employed) assignal fundraising fees (Part IX, column expenses (Part IX, column (A expenses Add lines 13–17 (remembers 14 (remembers 13–17 (remembers 14	, line 2g)		71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Reveni	im service revenue (Part VIII colument income (Part VIII, colument income (Part VIII, colument income (Part VIII, colument income) (Part VIII, column (Arevenue—add lines 8 through income inco	, line 2g)		71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Reveni	im service revenue (Part VIII ment income (Part VIII, columerevenue (Part VIII, column (Arevenue—add lines 8 through and similar amounts paid (Part paid to or for members (Part es, other compensation, employed) assigned fundraising fees (Part IX, column expenses (Part IX, column expenses (Part IX, column expenses Add lines 13–17 (rue less expenses Subtract linessets (Part X, line 16)	, line 2g)		71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 Ining of Current 1,357,246	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Reveni	im service revenue (Part VIII colument income (Part VIII, colum revenue (Part VIII, column (A revenue—add lines 8 through and similar amounts paid (Parts paid to or for members (Parts, other compensation, employed) and single expenses (Part IX, column expenses (Part IX, column (A expenses Add lines 13–17 (rue less expenses Subtract lines expenses (Part X, line 16)	nn (A), lines 3, 4, and 7d)		71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year
Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Revent Total a Total I Net as	im service revenue (Part VIII iment income (Part VIII, colum revenue (Part VIII, colum (A revenue—add lines 8 through is and similar amounts paid (Part is paid to or for members (Part is, other compensation, employed) is sional fundraising fees (Part IX, column expenses (Part IX, column (A rexpenses Add lines 13–17 (rue less expenses Subtract lines assets (Part X, line 16)	nn (A), lines 3, 4, and 7d)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 nning of Current 1,357,246 654,519 702,727	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696
Met Assets or Expenses Fund Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 **TIII r penalinowledgmer has	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Reveni Total a Total I Net as Signities of p ge and b s any kr	im service revenue (Part VIII column tement income (Part VIII, column (Part VIII), column texpended (Part IX), column texpenses (Part IX), column (Part IX), colum	nn (A), lines 3, 4, and 7d)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 ning of Current 1,357,246 654,519 702,727 hedules and st	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346 ,261	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696
Met Assets or Expenses fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 **TIII r penalinowledgmer has	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Revent Total a Total I Net as Sign ties of p ge and b s any kr	im service revenue (Part VIII column tement income (Part VIII, column (Part VIII, column (Part VIII), column tempers (Part IX), column tempers (Part IX), column tempers (Part IX), column (Part IX), co	n, line 2g)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 ning of Current 1,357,246 654,519 702,727 hedules and ster) is based or	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346 ,261	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696
Net Assets of Expenses Independent of Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 **TIII r penalinowledgmer has	Invest Other Total r Total s Salarie 5-10) Profes Total ful Other Total e Reveni Total a Signat Signat Michae Type	im service revenue (Part VIII column tement income (Part VIII, column (Part VIII), column texpended (Part IX), column texpenses (Part IX), column (Part IX), colum	nnn (A), lines 3, 4, and 7d)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 Ining of Current 1,357,246 654,519 702,727 hedules and steer) is based or	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346 ,261	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696 ents, and to the best of formation of which
Met Assets or Expenses Fund Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 1III rr penalinowledgurer has	Invest Other Total r 12) Grants Benefit Salarie 5-10) Profes Total ful Other Total e Reveni Total a Total I Net as Signi ge and b Signa Micha Type	im service revenue (Part VIII iment income (Part VIII, column revenue (Part VIII, column (Arevenue—add lines 8 through is and similar amounts paid (Part Spaid to or for members (Part is paid to or for members (Part is indraising expenses (Part IX, column expenses (Part IX, column expenses (Part IX, column expenses Add lines 13–17 (rule less expenses Subtract lines (Part X, line 16)	nnn (A), lines 3, 4, and 7d)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 Ining of Current 1,357,246 654,519 702,727 hedules and streen is based or continuate. Check fi self-employed	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346 ,261	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696 ents, and to the best of formation of which
Net Assets or Expenses Onder Manager of Expenses Onder Manager of Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 1III rr penalinowledgurer has	Invest Other Total r Total s Salaries 5-10) Profes Total ful Other Total a Reveni Total a Total I Net as Signa ties of p ge and t s any kr	im service revenue (Part VIII iment income (Part VIII, colum revenue (Part VIII, colum revenue—add lines 8 through is and similar amounts paid (Part Spaid to or for members (Part IX, column expenses (Part IX, column expenses (Part IX, column expenses (Part IX, column expenses Add lines 13–17 (rue less expenses Subtract lines (Part X, line 16)	nnn (A), lines 3, 4, and 7d)	Begin	71,051 34,560 34,763 252,600 2,256 68,837 158 171,722 242,975 9,625 Ining of Current 1,357,246 654,519 702,727 hedules and stately is based or 2016-11-11 Date Check ff	,441 ,386 ,778 ,315 0 ,715 ,938 ,573 ,541 ,237 Year ,607 ,346 ,261	32,496,985 30,992,322 236,830,351 2,553,985 0 70,244,718 186,131 182,115,407 255,100,241 -18,269,890 End of Year 1,329,793,787 664,628,091 665,165,696 ents, and to the best of formation of which

37,569,899

assistance with long range planning, member care services for professionals and volunteers and local council and regional support

including grants of \$

Field Operations - Support for 280 local councils, including but not limited to, administration of the Journey to Excellence program, business process assessments,

Human Resources and Training - Administration of human resources policies, including recruiting, placement, and training of professional employees, managing

Program Development and Delivery - Development of the program for over 1 8 million registered youth and over 924 thousand adult leaders, providing camping and outdoor literature, materials, and techniques, as well as engineering service, to local councils, managing the volunteer training programs of the Boy Scouts of America and handling all national program support in the areas of health and safety, activities, program evaluation, and low-income program, developing uniforms

14,156,417 including grants of \$

90,143,698 including grants of \$

and insignia and other program elements, operating the National Scouting Museum, operating four high-adventure bases and the national jamboree

4a

4b

4d

(Code

(Code

(Code

See Additional Data

Total program service expenses ▶

(Expenses \$

) (Expenses \$

) (Expenses \$

compensation and benefits programs, and monitoring employee relations

) (Expenses \$

79,617,461 including grants of \$

221,487,475

Other program services (Describe in Schedule O)

Page 2

Yes √No

3,195,097)

1,013,931)

59,477,024)

Form 990 (2015)

24,157,188)

106,935) (Revenue \$

136,070) (Revenue \$

3,067,718) (Revenue \$

17,580) (Revenue \$

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 👲	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	11 b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11 c		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 3	11 d	Yes	
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	11 f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	, , , , ,	14a	Yes	
b	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	Yes	
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	Yes	
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	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	Yes	
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
	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 th	ne organization report more than \$5,000 of grants or othe

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Yes 21

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part

Νo

Νo

Νo

Νo

Νo

Nο

Νo

Νo

Nο

Νo

Νo

Nο

Nο

Νo

Νo

er assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 😏 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

Yes

Yes

Yes

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2015)

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 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

Pai		ents Regarding Other IRS Schedule O contains a resp	_	-		V			_
	CHECK II	Schedule O contains a respi	onse of note to any line	111 11113	rait	<u>v</u>	· ·	Yes	No
1a	Enter the number	r reported in Box 3 of Form 1096	Enter -0 - If not applicable		1a	756			
b	Enter the number	r of Forms W-2G included in line	1a Enter -0 - ıf not applıcal	ble	1b	0			
c		cion comply with backup withhology) winnings to prize winners? .			vend	dors and reportable	1 c	Yes	
2a	Enter the number	r of employees reported on Form filed for the calendar year endin	W-3, Transmittal of Wage a g with or within the year cov	and	2a	4,056			
b	If at least one is	reported on line 2a, did the orga of lines 1a and 2a is greater than	nization file all required fed				2b	Yes	
3a	Did the organiza	tion have unrelated business gro	ss income of \$1,000 or mo	re during	the '	year [,]	3a	Yes	
	•	ed a Form 990-T for this year? <i>I</i>	. ,	•			3b	Yes	
4a		ng the calendar year, did the orga account in a foreign country (suc					4a	Yes	
b		ne name of the foreign country for filing requirements for FinCE		ıgn Bank	and	Financial Accounts			
5a	Was the organiz	ition a party to a prohibited tax s	helter transaction at any tii	me durın	g the	tax year?	5a		No
b	Did any taxable	party notify the organization that	it was or is a party to a pro	hibited t	ax sh	elter transaction?	5b		No
С	If "Yes," to line	5a or 5b, did the organization file	Form 8886-T?						
6a	Does the organi	ation have annual gross receipt:	s that are normally greater t	than \$10	00,00	0, and did the	5c 6a		No
b	-	cit any contributions that were n organization include with every s					_		
_		uctible?					6 b		
	Did the organiza	at may receive deductible contri tion receive a payment in excess d to the payor?	of \$75 made partly as a co	ontributi		d partly for goods and	7a	Yes	
b	If "Yes," did the	organization notify the donor of t	he value of the goods or ser	rvices pi	rovide	ed?	7 b	Yes	
С		ion sell, exchange, or otherwise					7 c		No
d	If "Yes," indicat	e the number of Forms 8282 filed	d during the year	. [7d				
e	Did the organiza	cion receive any funds, directly o	r indirectly, to pay premium	ns on a p	ersor	nal benefit contract?	7e		No
f	Did the organiza	tion, during the year, pay premiu	ms, directly or indirectly, or	n a perso	nal b	enefit contract?	7f		No
g	If the organization	n received a contribution of qua	lified intellectual property, o	did the oi	rganız	zation file Form 8899 as	7 g		
h	If the organization form 1098-C?	on received a contribution of cars	s, boats, airplanes, or other	vehicles	, dıd •	the organization file a	7h	Yes	
8		nizations maintaining donor advissed fund maintained by the spon		cess bus	sınes:	s holdings at any time	8		
9a	Did the sponsor	ng organization make any taxabl	e distributions under sectio	n 49667			9a		
b	Did the sponsor	ng organization make a distribut	ion to a donor, donor adviso	r, or rela	ited p	erson?	9b		
10	Section 501(c)(') organizations. Enter							
а	Initiation fees a	nd capital contributions included	on Part VIII, line 12	[10a				
b	Gross receipts, facilities	ncluded on Form 990, Part VIII	, line 12, for public use of cl	lub [10b				
11		2) organizations. Enter				ı			
		om members or shareholders .		.	11a				
b		om other sources (Do not net am due or received from them) .	ounts due or paid to other s	ources .	11b				
		1) non-exempt charitable trusts	_	1	ın lıe	eu of Form 1041?	12 a		
b	If "Yes," enter t year	ne amount of tax-exempt interes	t received or accrued during	g the	12b				
13	Section 501(c)(9) qualified nonprofit health ins	surance issuers.						
	addıtıonal ınform	on licensed to issue qualified he ation the organization must repo	rt on Schedule O	ı	ote. S	See the instructions for	13a		
	ın which the orga	t of reserves the organization is nization is licensed to issue qua		states • •	13b				
		t of reserves on hand		٠ . [13 c				
	-	cion receive any payments for inc led a Form 720 to report these p	<u>-</u>	-	•		14a 14b		No
			,	. Januaria	511 11	5 0			

orm 990	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 VI					
Part VI	For each "Yes" response to lines 2 through 7b below, and for a "No		,	8b, or	10b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI					
Section	n A. Governing Body and Management					
					Yes	1
1a Ente	er the number of voting members of the governing body at the end of the tax	1a		75		

	year	1a		75			
	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	1b		72			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?	sıness • •		uth any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co				3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	rior Form 990	was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	atıon's assets	7.	5		Νo
6	Did the organization have members or stockholders?				6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			t one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			kholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written active a by the following $% \left(1\right) =\left\{ 1\right\} =\left\{ $	ions ui	ndertaken durır	ng the			
а	The governing body?				8a	Yes	
	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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>				9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Ir	nternal Re	evenu	ue Cod	e.)
			,				
						Yes	No
.0a	Did the organization have local chapters, branches, or affiliates?			. [10 a	Yes Yes	No
.0a b	If "Yes," did the organization have written policies and procedures governing the acaffiliates, and branches to ensure their operations are consistent with the organization	ion's e	s of such chapt xempt purpose	ters,	10a 10b		No
.0a b	If "Yes," did the organization have written policies and procedures governing the ac	ion's e	s of such chapt xempt purpose	ters,		Yes	No
.0a b .1a	If "Yes," did the organization have written policies and procedures governing the acaffiliates, and branches to ensure their operations are consistent with the organization than the organization provided a complete copy of this Form 990 to all members of its	ion's e ts gov	s of such chapt xempt purpose erning body be	ters, es? fore filing	10b	Yes	
.0a b .1a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13	on's e ts gov · · Form 9	s of such chapt xempt purpose erning body be 	ters, es? fore filing	10b	Yes	
.0a b .1a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this form.	on's e ts gov · · Form 9	s of such chapt xempt purpose erning body be 	ters, es? fore filing	10b 11a	Yes	
.0a b .1a b .2a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annual	ion's e ts gov Form 9 	s of such chapt xempt purpose erning body be 	ters, es? fore filing 	10b 11a 12a	Yes Yes	
.0a b .1a b .2a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	ion's e ts gov Form 9 	s of such chapt xempt purpose erning body be 	ters, es? fore filing 	10b 11a 12a 12b	Yes Yes Yes	
.0a b .1a b .2a b	If "Yes," did the organization have written policies and procedures governing the accaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's e ts gov Form 9 Ily inte 	s of such chapt xempt purpose erning body be 190 rests that cou olicy? If "Yes,"	ters, es? fore filing 	10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes	
.0a b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this fold 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy?	on's e ts gov Form 9 Illy inte 	s of such chapt xempt purpose erning body be	ters, es? fore filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
.0a b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this fold 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 rev	on's ets gov Form 9 Hy inte h the p h the p riew arne deli	s of such chapt xempt purpose erning body be	ters, es? fore filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	
.0a b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this fold 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the	on's ets gov Form 9 Hy inte h the p h the p riew arne deli	s of such chapt xempt purpose erning body be	ters, es? fore filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
.0a b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this fold 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official	on's ets gov Form 9 Hy inte h the p h the p riew arne deli	s of such chapt xempt purpose erning body be	ters, es? fore filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
.0a b .1a b .2a b c .3 .4	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization.	on's ets gov Form 9 Ily inte n the p riew ar	s of such chapt xempt purpose erning body be seen that courses that cours olicy? If "Yes," and approval by beration and decrease.	ters, es? fore filing fore filing fore filing fore filing fore fore filing fore fore fore fore fore fore fore fore	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
.0a b .1a b .2a b c .3 .4 .5	If "Yes," did the organization have written policies and procedures governing the acc affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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.	on's e ts gov Form 9 Ily inte n the p riew ari or sim or sim tization e step	s of such chapt xempt purpose erning body be	ters, ess? fore filing Id give describe ecision? nt with a . s the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

AK , AL , AR , AZ , CA , CT , FL , GA , IL , IN , KY , MA , MD , MN , MS , NH , NJ , NM , NY , OK , OR , PA , PR , RI , SC , TN , UT , VA , WA , WI , WV

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

►Stephanie Phillips 1325 West Walnut Hill Lane Irving, TX 750383008 (972) 580-2300

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

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

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

1a Complete this table for all persons required to be listed 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	more than one box, unlocked person is both an office and a director/trustee						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	indradual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W-2/1099- MISC)	organization an related organizations
See Additional Data Table										

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

	(A) Name and Title		(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- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2,1033 1136)	related organizations
See Additional Data T	Гаble										
1b Sub-Total .							▶				
c Total from o	continuation sheet	•					. ▶				
d Total (add I	ines 1b and 1c).						>		6,100,253	0	2,036,390

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		No
on line 1a? If "Yes," complete Schedule J for such individual				
	ındıvıdual	4	Yes	
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		Nο

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that recompensation from the organization. Report compensation for the calendar year ending		
(A) Name and business address	(B) Description of services	(C) Compensation
WELD LLC	Website development	1,449,564
PO BOX 601 FAYETTEVILLE, WV 25840		
ONLINE COMMUNITY SERVICES LLC	Project Management	4,160,800
413 OAK HILL DRIVE ALTAMONTE SPRINGS, FL 32701		
Steptoe & Johnson PLLC	Attorney	999,548
PO Box 247 Brdgeport, WV 26330		
Ogletree Deakins Nash Smoak & Stewart PC	Attorney	859,347
PO Box 89 Columbia, SC 29202		
PricewaterhouseCoopers LLP	Audit/Tax Services	815,802
PO Box 952282 Dallas, TX 75395		
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Form 99	0 (20	015)						Page S
Part V	/##1	Statement o	f Revenue					
		Check If Sched	ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 28	1a	Federated cam	paigns 1a	370,580				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ies 1b	66,852,103				
<u>ات</u> ورز	С	Fundraising ev	ents 1c	72,378				
fts. ⊏ A	d	Related organiz	zations 1d	2,095,723				
i5 i <u>F</u>	e	Government grant		0				
Sin		_		15,950,713				
Contributions, Gifts, and Other Similar A	f	similar amounts no						
를	g	Noncash contributi 1a-1f \$	ons included in lines	1,648,787				
e de	h	Total. Add line:	s 1a-1f		85,341,497			
<u> </u>				Business Code				
돌	2a		ses in NM, MN, FL, and	900099	37,338,175	37,179,187	158,988	
۱. ۲۰۸۰	Ь	WV Local Council Asses	ssments	900099	24,156,788	24,156,788	0	
ıń CΣ	c	-	and National Eagle	900099	9,142,570	9,142,570	0	
Ž.	_	Scout Association						
Program Service Revenue	d	Regional and Profe	essional Training	900099	4,209,028	4,209,028	0	(
Jran	e f	All other progra	am service revenue		12.152.006	12.152.006	0	
₽	'				13,152,986	13,152,986	0	
	g		s 2a-2f		87,999,547			
	3		ome (including dividen ar amounts)		14,468,806	0	-38,071	14,506,87
	4	Income from inves	stment of tax-exempt bond	proceeds >	0	0	0	
	5	Royalties .		•	2,051,315	0	0	2,051,31
	6a	Gross rents	(i) Real 30,542	(II) Personal 0				
	Ь	Less rental expenses	0	0				
	С	Rental income or (loss)	30,542	0				
	d	Net rental inco	me or (loss)	· · · · · · · · · · · · · · · · · · ·	30,542	0	0	30,54
	7-	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	1,082,803,096	1,954,594				
	b	Less cost or other basis and	1,064,620,639	2,108,872				
	_	sales expenses Gain or (loss)	18,182,457	-154,278				
	d		L	-134,270	18,028,179	0	0	18,028,179
		Gross income f	•		, ,			, ,
Other Revenue		—	s reported on line 1c)					
Re		223 i dici v , III	a a	163,278				
ē	b	Less direct ex	penses b	120,233				
∌	С		(loss) from fundraising	events ▶	43,045		0	43,045
	9a		rom gaming activities ne 19 a					
	b		penses b					
	С	Net income or	(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo		161,898,100				
	ь	Less cost of g	oods sold b	133,999,592				
	С	-	(loss) from sales of ınv		27,898,508	0	-1,353,133	29,251,64
		Miscellaneou		Business Code				
	11a	High Adventure Revenue	e Bases - Other	900099	598,089	0	0	598,089
	ь	Other Regional	Revenues	900099	110,260	0	0	110,260
	С	National Eagle	Scout Association	900099	260,563	0	0	260,563
		- Other						
	d	All other reven	ue		0	0	0	- 1
	e	Total. Add lines	s 11a-11d		968,912			
	12	Total revenue.	See Instructions .	•	236,830,351	87,840,559	-1,232,216	64,880,51

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,059,226	1,059,226		
2	Grants and other assistance to domestic individuals See Part IV, line 22	932,711	932,711		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	562,048	562,048		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	4,810,994	2,683,396	1,144,988	982,610
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	51,463,989	39,992,931	9,595,634	1,875,424
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,089,442	3,177,927	762,490	149,025
9	Other employee benefits	4,206,271	3,814,997	315,431	75,843
10	Payroll taxes	5 674 000	4 400 044		206 772
		5,674,022	4,409,311	1,057,941	206,770
11	Fees for services (non-employees)	0			-
a	Management	-	425 270	0	47.200
b	Legal	472,659	425,270 288,834	433,861	47,389
c d	Accounting	723,984 240,128	200,034	240,128	1,289
e e	Professional fundraising services See Part IV, line 17	186,131		240,128	186,131
f	Investment management fees	1,869,407		1,869,407	100,131
, g	Other (If line 11g amount exceeds 10% of line 25, column (A)	1,009,407		1,009,407	
9	amount, list line 11g expenses on Schedule O)	10,431,186	9,511,451	0	919,735
12	Advertising and promotion	2,785,435	2,750,466		34,969
13	Office expenses	4,603,031	4,055,728	95,476	451,827
14	Information technology	4,184,878	4,159,108	0	25,770
15	Royalties				
16	Occupancy	14,078,537	13,248,516	185,810	644,211
17	Travel	5,069,600	3,508,087	1,032,342	529,171
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	30,480,400	29,688,272	8,300	783,828
20	Interest	8,076,821		8,076,821	
21	Payments to affiliates	16,791,436	16,791,436		0
22	Depreciation, depletion, and amortization	6,603,778	5,412,395	1,025,386	165,997
23	Insurance	37,461,046	37,459,882	0	1,164
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Other Expenses	7,752,852	7,149,221	21,221	582,410
b	Taxes, Permits, and Licenses	298,397	260,715	37,682	0
c	Insurance Claims	28,574,765	28,574,765	0	0
d	Professional Dues and Membership	1,617,067	1,570,782	44,841	1,444
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	255,100,241	221,487,475	25,947,759	7,665,007
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form	990 (2	2015)				Page 11
Par	t X	Balance Sheet				
		Check if Schedule O contains a response or note to ar	ny line in this Part X	1		
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		18,767,298	1	7,755,529
	2	Savings and temporary cash investments		23,600,187	2	36,920,628
	3	Pledges and grants receivable, net		68,739,767	3	61,937,612
	4	Accounts receivable, net		3,236,633	4	10,218,512
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated & II of	officers, directors,			
		Schedule L		0	5	
Assets	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 49 contributing employers and sponsoring organizations voluntary employees' beneficiary organizations (see Part II of Schedule L	58(c)(3)(B), and of section 501(c)(9)		6	
AS.	,	Notes and leans recovable not			7	
	8	Notes and loans receivable, net		60,007,672	8	65,337,483
	9	Inventories for sale or use		11,389,171	9	16,360,893
	-	Prepaid expenses and deferred charges	 I I	11,309,171	9	10,300,693
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 227,540,240			
	ь	Less accumulated depreciation	10b 126,448,020	89,656,379	10 c	101,092,220
	11	Investments—publicly traded securities		391,945,383	11	393,799,549
	12	Investments—other securities See Part IV, line 11		383,965,771	12	327,893,489
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		305,938,346	15	308,477,872
	16	Total assets.Add lines 1 through 15 (must equal line	34)	1,357,246,607	16	1,329,793,787
	17	Accounts payable and accrued expenses		188,255,388	17	190,776,541
	18	Grants payable			18	
	19	Deferred revenue		42,799,707	19	43,313,325
	20	Tax-exempt bond liabilities		260,914,560	20	209,488,035
	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21	
lities	22	Loans and other payables to current and former office key employees, highest compensated employees, an	· · · · · · · · · · · · · · · · · · ·			
Liabilit		persons Complete Part II of Schedule L			22	
Ĭ	23	Secured mortgages and notes payable to unrelated th	!	17,000,000	23	61,000,000
	24	Unsecured notes and loans payable to unrelated third	•		24	
	25	Other liabilities (including federal income tax, payabl and other liabilities not included on lines 17-24) Complete Part X of Schedule D	,	145,549,691	25	160,050,190
	36	Total liabilities. Add lines 17 through 25		654,519,346	26	664,628,091
S	26	Organizations that follow SFAS 117 (ASC 958), checl		034,313,340	20	004,020,031
nce		complete lines 27 through 29, and lines 33 and 34.		500 000 040		E27.0E0.400
Fund Balance	27	Unrestricted net assets		582,660,946	27	537,259,488
<u>~</u>	28	Temporarily restricted net assets		63,272,414	28	73,163,210
ĭ	29	Permanently restricted net assets		56,793,901	29	54,742,998
正 正		Organizations that do not follow SFAS 117 (ASC 958 complete lines 30 through 34.), check here ► and			
ssets or	30	Capital stock or trust principal, or current funds .			30	
et	31	Paid-in or capital surplus, or land, building or equipm			31	
Š	32	Retained earnings endowment accumulated income			32	

33

34

Total net assets or fund balances . .

Total liabilities and net assets/fund balances

665,165,696

1,329,793,787

702,727,261

1,357,246,607

33

34

236,830,351

255,100,241

-18,269,890

702,727,261

-19,372,654

665,165,696

No

Νo

Nο

Form 990 (2015)

80,979

Reconcilliation of Net Assets

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

Total revenue (must equal Part VIII, column (A), line 12)

Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . Net unrealized gains (losses) on investments

Donated services and use of facilities .

Investment expenses . Prior period adjustments .

Other changes in net assets or fund balances (explain in Schedule O) .

column (B))

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990 Cash ✓ Accrual COther

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

a separate basis, consolidated basis, or both Separate basis Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

basis, consolidated basis, or both

Separate basis

Schedule O

Single Audit Act and OMB Circular A-133?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate ✓ Consolidated basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Both consolidated and separate basis

Both consolidated and separate basis

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10

2b

2c

3a

3b

2a

Yes

Yes

Yes

Additional Data

(Code

Software ID: 15000352

Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

11,220) (Revenue \$

400)

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

) (Expenses \$

				for print and broadcast media, ai amily In addition, protection and	
(Code) (Expenses \$	64,074,806	including grants of \$	6,360) (Revenue \$	24,156,788)
Scouting Programs	s Insurance Costs Born for N	ational and Loc	cal Councils - The National	Council subsidized the group me	dıcal, dental, and
life insurance prog	rams for its employees and re	tirees In addit	tion, the National Council s	ubsidized a general liability insur-	ance program
primarily for the be	enefit of local councils				

14,076,572 including grants of \$

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 1.466.083

) (Expenses \$

(Code

Scouting Programs World Bureau Fees - The registration fee that Boy Scouts of America annually pays the World Organization of the Scouting Movement (WOSM) is based on an established fee of registered uniformed adult and youth members. This registration fee

including grants of \$

0)(Revenue \$

supports international enrichment programs for the youth and adult membership. These programs include World Jamborees, National Association encampments, international training programs and conferences, program related magazines, brochures and pamphlets

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

Compensated Employees, and Inde	pendent Co	ntrac	TOF	5				i	i	i
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
Glenn Adams	1									
Natl Exec Board Member	0	Х						0	0	0
Jeanne Donlevy Arnold	1							_		
Natl Exec Board Member (May-Dec 2015)	0	X						0	0	0
David L Beck Natl Exec Board Member (Jan-May 2015)	0	x						0	0	0
Donald D Belcher Natl Exec Board Member	1 0	×						0	0	0
David Biegler Natl Exec Board Member	1 0	×						0	0	0
Dr David L Briscoe Natl Exec Board Member	0	×						0	0	0
B Howard Bulloch Natl Exec Board Member	1 0	×						0	0	0

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Richard L Burdick Natl Exec Board Member

Harriss A Butler III Natl Exec Board Member

Natl Exec Board Member (May-Dec 2015)

Ray Capp

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

Compensated Employees, and Inde	pendent Co	ntrac	:tor	S						
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unles d	ore t ss pe offi direct	han erso cer tor/t	not one n is and trus	tee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	e employee	Highest compensated employee	Former			and related organizations
Dennis H Chookaszian Natl Exec Board Member	1 0	x						0	0	0
Keith A Clark Natl Exec Board Member	0	х						0	0	0
D Kent Clayburn Natl Exec Board Member	0	x						0	0	0
Ronald O Coleman Natl Exec Board Member	1 0	×						0	0	C
Philip M Condit Natl Exec Board Member	1 0	×						0	0	C
William F Cronk Natl Exec Board Member	0	x						0	0	С
John C Cushman III	1									

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Natl Exec Board Member (May-Dec 2015)

Natl Exec Board Member

Charles Dahlquist

R Michael Daniel Natl Exec Board Member

Ralph de la Vega Natl Exec Board Member

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

(A) Name and Title	(B) Average hours per week (list any hours for related	m unles	ore t ss pe	han erso cer tor/t	not one n is and trus			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)		organization and related organizations
Douglas H Dittrick Natl Exec Board Member	0	×						0	0	0
John R Donnell Jr Natl Exec Board Member	0	×						0	0	0
L B Eckelkamp]r Natl Exec Board Member	0	×						0	0	0
Craig Fenneman Natl Exec Board Member	0	×						0	0	0
E Gordon Gee Natl Exec Board Member (Oct-Dec 2015)	0	×						0	0	0
Larry M Gibson Natl Exec Board Member (May-Dec 2015)	0	×						0	0	0
T Michael Goodrich Natl Exec Board Member	0	×						0	0	0
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John Gottschalk

Bradley E Haddock Natl Exec Board Member

Michael D Harris Esq Natl Exec Board Member

Natl Exec Board Member

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti ss pe	han ersoi icer	not one n is and		.	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
J Brett Harvey	1	×						0	0	
Natl Exec Board Member	0				'	'	!			
Jeffrey R Holland	1	x					<u> </u>		0	
Natl Exec Board Member (May-Dec 2015)	0	^		'	'		!	0		ĺ
Raymond E Johns	1									
Natl Exec Board Member	0	X		'	'		!	0	U	ĺ
Robert J LaFortune	1									
Natl Exec Board Member	0	X		'	'		!	0	0	°
Francis R McAllister	1				\vdash		H			
Natl Exec Board Member	0	X			'	'	!	0	0	٥
Judy R McReynolds	1	\vdash		\vdash	\vdash	\vdash	H			
Natl Exec Board Member	0	X					!	0	0	٥
Ronald K Migita	1	$\vdash \vdash \vdash$			 	 	├┤			
		x			'		!	0	0	
Natl Exec Board Member	0	1 '	1 '		1 '	1 '	'			1

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Douglas B Mitchell

Thomas S Monson Natl Exec Board Member

Jose F Nino

Natl Exec Board Member

Natl Exec Board Member

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	5				,		
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti ss pe	than ersor icer a	not one on is and		,	(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
Stephen W Owen Natl Exec Board Member (May-Dec 2015)	1 0	х						0	0	0
Bruce D Parker Natl Exec Board Member	1 0	x						0	0	C
Aubrey B Patterson Natl Exec Board Member	0	x						0	0	C
Frank R Ramırez Natl Exec Board Member	0	x						0	0	(
Hugh Redd Natl Exec Board Member	0	x						0	0	(
Robert H Reynolds Natl Exec Board Member	0	x						0	0	(
Roy S Roberts	1	x						0	0	(

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Natl Exec Board Member

Natl Exec Board Member

Natl Exec Board Member (May-Dec 2015)

James D Rogers Natl Exec Board Member

Alison K Schuler

Jim Ryffel

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

Compensated Employees, and Inde	pendent Co	ntrac	tor	5													
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than ersor icer a	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the							
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	organization and related organizations							
Marshall M Sloane	1						<u> </u>										
Natl Exec Board Member (Jan - May 2015)	0	X		L'	L'	<u> </u>	<u></u>	0	0	U							
Charles H Smith	1	×		Ĺ'		Γ '	['	0	0								
Natl Exec Board Member	0	^		'		'	'	"		1							
Wesley J Smith Natl Exec Board Member (May-Dec 2015)	1 0	х						0	0	C							
Scott Sorrels	1								!								
Natl Exec Board Member	0	X		'		'	'	0	0	C							
	1			\Box	\Box	\vdash	\Box		!								
Natl Exec Board Member	0	X		'		'	'	0	oļ								
Bradley D Tilden	1			\Box	\Box	\vdash	\vdash	† · · · · · · · · · · · · · · · · · · ·	†								
Natl Exec Board Member	0	×		'		'	'	0	0								
Rex W Tillerson	1			\Box	\Box	\vdash	\square										
Natl Exec Board Member	0	X		'		'	'	0	0								

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C Travis Traylor Jr

Steven E Weekes Natl Exec Board Member

Gary E Wendlandt Natl Exec Board Member

Natl Exec Board Member (Jan-May 2015)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (B) (D) (E) (A) (C)

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)		and related organizations
Bnan Williams Natl Exec Board Member	0	×						0	0	0
James S Wilson Natl Exec Board Member	0	x						0	0	0
Rosemary M Wixom Natl Exec Board Member	0	×						0	0	0
R Ray Wood Natl Exec Board Member (Jan-May 2015)	0	×						0	0	0
Wayne Brock Secretary / Chief Scout Executive (Jan - Sept 2015)	40	×		×				1,061,595	0	283,710
R Thomas Buffenbarger Assistant Treasurer (Jan-May 2015) and Natl Exec Board Member	0	×		×				0	0	0
Joe Crafton Vice President-Supply and Natl Exec Board Member	1 0	x		х				0	0	0
To all D. Franck		1		1 -	1	1		1	I	

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Jack D Furst

Exec Board Member

Aubrey B Harwell Jr

President and Natl Exec Board Member

Robert M Gates

Member

Vice President-General Services (Jan-May 2015) and Natl

Vice President (Jan-May 2015) and Natl Exec Board

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

Compensated Employees, and Inde					Tu	stee	5, r	tey Employed	es, nigilest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unles	sition iore t ss pe	(C) than ersoi	not one on is and		,	(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
Lyle R Knight Vice President-Human Resources (Jan-May 2015) and Natl Exec Board Member	1 0	x		x				0	0	C
Joseph P Landy Vice President-Operations and Natl Exec Board Member	1 0	х		x				0	0	C
Drayton McLane Jr Vice President (Jan-May 2015) and Natl Exec Board Member	1 0	x		x				0	0	C
Arthur F Oppenheimer Vice President-Human Resources (May-Dec 2015) and Natl Exec Board Member	1 0	×		×				0	0	C
R Doyle Parnsh Vice President-General Services (May-Dec 2015) and Natl Exec Board Member	1 0	×		x				0	0	C
Tico A Perez National Commissioner and Natl Exec Board Member	1 0	×		x				0	0	
Wayne M Perry	1									

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Past President and Natl Exec Board Member

Vice President-Development and Natl Exec Board

Vice President (Jan - May 2015) and Natl Exec Board

International Commissioner and Natl Exec Board Member

Matthew K Rose

Roger M Schrimp

Member Nathan Rosenberg

Member

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

833

90,362

171,348

138,015

162,816

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105,752

439,582

413,790

253,016

372,366

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Compensated Employees, and Inde	pendent Co	ntrac	ctor	s				•	Ī	-
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Randall L Stephenson	1									
President Elect & VP-Regional Presidents and Natl Exec Board Member	0	Х		Х				0	0	0
David L Steward	1									
Vice President-Information Delivery and Natl Exec Board Member	0	X		X				0	0	0
Michael B Surbaugh	40									
Secretary / Chief Scout Executive (Oct-Dec 2015)	11	Х		×				364,922	0	169,154
James S Turley	1									
Treasurer and Vice President-Finance and Natl Exec Board Member	0	X		X				0	0	0
David M Weekley	1									
Vice President-Marketing and Natl Exec Board Member	0	X		×				0	0	0
Steven McGowan	40							105 750		

0 40

40

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..... Assistant Secretary & General Counsel (Oct-Dec 2015)

Michael A Ashline

Deputy Chief Scout Executive

Director, Office of Philanthropy

CFO

Gary Butler

Perry Cochell

Bradley Farmer

ACSE Development

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (4)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	unles	ore tl ss pe	than ersoi icer tor/t	not one on is and trust	e Highest compensat	, a Forme	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		\bigsqcup	<u>'</u>	<u> </u>	⊥'	Ě					
John Green	40		1 '		$ _{x} $	'		331,810	0	77,182	
Group Director - Outdoor Adventures	0	<u> </u>	<u> </u>	<u> </u>		'		331,010	<u> </u>	,,,102	
J D McCarthy	40							301,042	0	00.726	
Group Director - Summit	0		'		×	'		301,042	l "	90,738	
Steve Medlicott Group Director - Marketing	40				х			221,175	0	99,958	
Ponce Duran	0 40	\vdash		 	\vdash	 '	\vdash				
Regional Director	0				'	×		307,250	0	161,492	
Tom Fitzgibbon ACSE Council Support	40					x		684,729	0	90,117	

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0 40

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553,082

338,114

352,028

Tom Harrington

Regional Director

Regional Director

Don McChesney

Regional Director

Al Lambert

190,297

163,340

147,028

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493319071756 OMB No 1545-004

SCHEDULE A (Form 990 or 990EZ)

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.

Open to Public Inspection

Employer identification number

22-1576300

Treasury Internal Revenue Service Name of the organization BOY SCOUTS OF AMERICA

Department of the

Part I

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

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 (Form 990 or 990-EZ)) 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 Seesection 509(a)(2). (Complete Part III) 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.

g Provide the following information about the supported organization(s)										
(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization Iisted in your governing document?		(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)				
			Yes	No						
Total										

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its

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

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally

supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.

(see instructions) You must complete Part IV, Sections A and D, and Part V.

integrated, or Type III non-functionally integrated supporting organization

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 66,527,879 58,896,016 61,242,241 86,432,929 77,632,390 350,731,455 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 66,527,879 58,896,016 61,242,241 86,432,929 77,632,390 350,731,455 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 23.493.831 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5

from line 4							327,237,624
Section B. Total Support	•	•	•	•			
Calendar year (or fiscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 20	15	(f) Total
7 Amounts from line 4	66,527,879	58,896,016	61,242,241	86,432,929	77	,632,390	350,731,455
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	16,850,496	18,322,499	20,215,992	20,745,765	16	,839,237	92,973,989
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)	507,585	3,467,135	972,481	906,987		968,912	6,823,100
11 Total support. Add lines 7 through 10							450,528,544
12 Gross receipts from related activit	ies, etc (see inst	ructions)			12		1,160,089,888
13 First five years.If the Form 990 is check this box and stop here			, ,	•		- `—`	3) organization,

16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

b 33 1/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Section C. Computation of Public Support Percentage

Public support percentage for 2014 Schedule A, Part II, line 14

15

supported organization

instructions

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2015

14

72 634 %

66 749 %

▶▽

▶□

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.)

Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
•	iscal year beginning in)	(4)2011	(5)2012	(6)2010	(4)2011	(0)2010	(1)10ta1
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
-	merchandise sold or services						
	performed, or facilities furnished						
	in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support				1		I
	Calendar year			1	I	I	
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
C	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is f	or the organization	n's first second	thurd fourth or	fifth tay year ac a	section 501/c	V3) organization
14	•	or the organization	on s mist, second	, tillia, louitii, oi	ilitii tax yeal as a	1 5600001 501(0)(3) organization, ▶ □
	check this box and stop here	lia Cunnant D					
	ction C. Computation of Pub						
15	Public support percentage for 2015	(line 8, column	(f) divided by line	: 13, column (f))		15	
16	Public support percentage from 201	l 4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for				nn (f))	14-1	
	· · · · · · · · · · · · · · · · · · ·	•		•	···· (1 <i>))</i>	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	1 /		18	
19a	33 1/3% support tests—2015. If the	organization did	not check the bo	ox on line 14, and	l line 15 is more t	than 33 1/3%, a	ind line 17 is not
	more than 33 1/3%, check this box	and stop here. T	he organization q	ualıfıes as a publ	icly supported or	ganızatıon	▶┌
b	33 1/3% support tests—2014. If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 3	3 1/3% and line
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiz	ation 🕨 🗍
20	Private foundation. If the organizati	on did not check	a box on line 14	. 19a. or 19b. ch	eck this box and	see instruction	s ▶⊤ˈ

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, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		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	2		
	509(a)(1) or (2)			<u> </u>
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
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?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")?			l
	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?	4b		
	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			
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) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
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	5b		
c	the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	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? If "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 .	9 c		
0a	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)	10 b		
1	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?	11 a		
	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	11 c		

Part IV	Supporting	Organizations	(continued

I GIC IV		аррог	9	Oi guilleu	LIOIIS	(continue	ч,
Section	n R	Tyne	T Si	innorting	Orga	nization	_

			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		

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			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 contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			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)	2		
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		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

- 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

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	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	
	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	Parent of Supported Organizations Answer (a) and (b) below.		

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Ĺ	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	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		
,	Other expenses (see instructions)	7		
;	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b -	A verage monthly cash balances	1c		
C C	Fair market value of other non-exempt-use assets	1d		
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	10		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Mınımum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable A mount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (c	ontinued)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomp	olish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru			
·	ic tions		
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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a .			
b c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			_
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
		Schodulo A	/Form 990 or 990-F7) /2015

Facts And Circumstances Test
 o. Also complete this pare for any additional information. (See hist decions).
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, 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Eight unusual grants totaling \$7,709,107 were made in 2015 Schedule A, Part II, Line 1

Other miscellaneous income Schedule A, Part II, Line 10 Schedule A (Form 990 or 990-EZ) 2015

DLN: 93493319071756

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	me of the organization SCOUTS OF AMERICA				Employer ide	entification number
					22-157630	
Par	t I-A Complete if the o	rganization is exempt under	section 501(c) or is a	section 52	27 organization.
1	Provide a description of the o	rganızatıon's dırect and ındırect politic	cal campaign act	vities in Par	t IV	
2	Political expenditures				•	\$
3	V olunteer hours					
Par	t I-B Complete if the o	rganization is exempt under	section 501(c	:)(3).		
1	•	se tax incurred by the organization un			•	\$
2	Enter the amount of any excis	se tax incurred by organization manag	ers under sectior	14955	>	\$
3	If the organization incurred a	section 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?					⊤Yes
b	If "Yes," describe in Part IV					·
Par	t I-C Complete if the o	rganization is exempt under	section 501(d	c), except	section 5	501(c)(3).
1	Enter the amount directly exp	ended by the filing organization for se	ction 527 exemp	t function ac	tivities 🕨	\$
2	Enter the amount of the filing exempt function activities	organization's funds contributed to ot	her organizations	for section	527 ▶	\$
3	Total exempt function expend	litures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line	17b ►	\$
4	Did the filing organization file	Form 1120-POL for this year?				Yes No
5	organization made payments amount of political contribution	and employer identification number (E For each organization listed, enter th ons received that were promptly and d a political action committee (PAC) If	e amount paid fro irectly delivered	m the filing o to a separat	organization's e political org	's funds Also enter the ganization, such as a
	(a) Name	(b) Address	(c) EIN	filing or	unt paid from ganization's one, enter -0	contributions received
2						
3						
4						
5						
6						
For F	aperwork Reduction Act Notice.	see the instructions for Form 990 or 990	- EZ .	at No. 500849	Schedule C	C /Form 000 or 000-F7) 201

Not over \$500,000

Over \$17,000,000

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A	expenses, and share of excess lobbying expenditures)	d group member's nam	e, address, EIN,
В	Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots	o	_
b	lobbying) Total lobbying expenditures to influence a legislative body (direct lobbying)	240,128	
c	Total lobbying expenditures (add lines 1a and 1b)	240,128	
d	Other exempt purpose expenditures	385,276,635	

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:

20% of the amount on line 1e

The lobbying nontaxable amount is:

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Yes

233.698

250,000

☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
 2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000

180.000

250,000

240,100

250,000

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Tot
2- Lahhung partauahla amaunt	1 000 000	1 000 000	1 000 000	1 000 000	4.0

Lobbying ceiling amount

240,128

250,000

Schedule C (Form 990 or 990-EZ) 2015

385,516,763 1,000,000

250,000

6,000,000

893.926

1,000,000

1,500,000

Return Reference

	filed Form 5768 (election under section 501(h)).		-1	/1-	`
or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	<u>(b</u>	
ctiv	ity	Yes	No	A mou	ınt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	163			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
ar	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	01 (c)(5), c	or secti	on
			_	Yes	<u> </u>
L	Were substantially all (90% or more) dues received nondeductible by members?		-	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	_
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
	Dues, assessments and similar amounts from members	1			
1	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).	_	I		
	Current year	2 a			
2 a	·	2a 2b			
a b	Current year Carryover from last year Total	2b 2c			
a b c	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b			
1 2 a b c 3	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	2b 2c 3			
2 a b c	Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2b 2c			

Explanation

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

SCHEDULE D

Supplemental Financial Statements

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

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

OMB No 1545-0047

DLN: 93493319071756

Department of the Treasury

(Form 990)

► Attach to Form 990.

Inspection Internal Revenue Service **Employer identification number** Name of the organization BOY SCOUTS OF AMERICA 22-1576300 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the A mount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(I) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining (continued)	g Collections of	Art, Hi	istorica	al Tre	easures, or	Other Similar A	ssets
3		the organization's acquisition, acc ction items (check all that apply)	cession, and other re	ecords, o	check an	y of the	e following that	are a significant us	e of its
а	✓	Public exhibition		d		Loan o	r exchange pro	grams	
b	_	Scholarly research		е	Г	O ther			
c	~	Preservation for future generations	i						
4	Provi Part)	de a description of the organization	n's collections and ex	xplaın ho	ow they f	urther	the organizatio	n's exempt purpose	: In
5		g the year, did the organization sol							s √ No
Pai	rt IV	Escrow and Custodial Arr Complete if the organization Part X, line 21.		n Form	1 990, P	art IV	, line 9, or re	ported an amour	nt on Form 990,
1a		e organization an agent, trustee, cu ded on Form 990, Part X?	ıstodıan or other ınte	ermediar	y for con	itributi	ons or other as	sets not	s No
b	If'	'Yes," explain the arrangement in I	Part XIII and comple	ete the fo	ollowing	table		Am	ount
c	Ве	ginning balance					10	:	
d	Αd	ditions during the year					10	i	
е		stributions during the year					16	2	
f		ding balance					11	:	
2 a		ne organization include an amount	on Form 990, Part X	, line 21	, for esc	row or	custodial acco	unt liability? Ye	s No
ь		es," explain the arrangement in Par							
Pa	rt V	Endowment Funds. Compl						(d)Three years back	
	Regir	nning of year balance	(a)Current year 256,278,087		or year 272,426,02		243,714,804	280,080,716	(e)Four years back 285,870,684
b	•	· · · · · · · · · · · · · · · · · · ·	516,596		435,41		655,415	2,357,938	645,067
	•		310,330		433,41		033,413	2,337,330	043,007
С	losse	nvestment earnings, gains, and es	-9,594,314		9,571,74	.2	34,568,882	29,679,521	-5,483,574
d	Grant •	ts or scholarships	938,480		25,182,90	4	569,126	0	702,937
е		r expenditures for facilities rrograms 	30,327,913			0	0	66,923,349	211,359
f	A dmı	nistrative expenses	1,523,189		972,18	6	1,513,392	1,480,022	326,648
g	End o	of year balance	214,410,787	Ž	256,278,08	8	276,856,583	243,714,804	279,791,233
2	Provi	de the estimated percentage of the	,	ılance (l	ıne 1g, c	olumn	(a)) held as		
а	Board	l designated or quasi-endowment l	71 52 %						
b	Perm	anent endowment ► 25 72 %							
c		orarily restricted endowment > percentages on lines 2a, 2b, and 2c	2 76 % c should equal 100%						
3a		here endowment funds not in the police lization by	ossession of the orga	anızatıor	n that are	held a	and administer	ed for the	N N-
	_	related organizations						3:	Yes No
		elated organizations							i(ii) Yes
b		es" on 3a(II), are the related organi							3b Yes
4	Desc	ribe in Part XIII the intended uses	of the organization's	s endowi	ment fun	ds			-
Pai	rt VI	Land, Buildings, and Equi							
		Complete if the organization Description of property	answered 'Yes' to	Form	990, Pa (a)	rt IV,	line 11a.See (ь)	Form 990, Part >	(, line 10. (d)Book value
		Description of property		C	ost or othe (investmi		Cost or other ba		(d)book value
1a	Land					0	18,359,4	47	18,359,447
b	Buildin	gs							
						0	, ,		<u> </u>
		nold improvements		• _		0	, -	<u> </u>	-
		nent		· _		0	113,027,6	75,834,74	2 37,192,913
е	Other								,

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

101,092,220

See Form 990, Part X, line 12. (a) Description of security or cate	egory	(b) Book value	(c)Method of valuation
(including name of security) (1)Financial derivatives			Cost or end-of-year market valu
(2)Closely-held equity interests			
(3)Other (A) BSA Commingled Endowment Fund LP		327,893,489	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 1	2)	327,893,489	
Part VIII Investments—Program Relate	d.		
Complete if the organization answ (a) Description of investmen		(b) Book value	Form 990, Part X, line 13. (c) Method of valuation
(-,	-	(-,	Cost or end-of-year market valu
		orm 990 Part IV line 11	d See Form 990 Part X June 15
Part IX Other Assets. Complete if the organ (a)	3 /	orm 990, Part IV, line 11	(b) Book value
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
Part IX Other Assets. Complete if the organ (a) (1) Intercompany Receivable	ization answered 'Yes' on Fo	orm 990, Part IV, line 11	(b) Book value 299,611,82
(a) (1) Intercompany Receivable (2) Gift Annuity and Other Assets Total. (Column (b) must equal Form 990, Part X, col (B)	lization answered 'Yes' on Fo		(b) Book value 299,611,82 8,866,04
(a) (1) Intercompany Receivable (2) Gift Annuity and Other Assets Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the	lization answered 'Yes' on Fo		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Assets. Complete if the organ (a) (a) (1) Intercompany Receivable (2) Gift Annuity and Other Assets Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	lization answered 'Yes' on Fo		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	line 15) c organization answered 'Yes' on Formula in the content of the content		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15) c organization answered 'Yes' on Formula in the content of the content		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
(a) (1) Intercompany Receivable (2) Gift Annuity and Other Assets Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability Federal income taxes (a) Complete if the organ (b) must equal Form 990, Part X, line 25.	line 15)		(b) Book value 299,611,82 8,866,04

Schedule D (Form 990) 2015

1

2

197,143,000

1

а	Net unrealized gains (losses) (on investments	2a	-19,3/2,654		
b	Donated services and use of fa	acılıtıes	2b	80,979	1	
c	Recoveries of prior year grants		2 c	0]	
d	Other (Describe in Part XIII)				1	
			2d	0	4	
е	Add lines 2a through 2d				2e	-19,291,675
3	Subtract line 2e from line 1 .				3	216,434,675
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a	0]	
b	Other (Describe in Part XIII)		4b	20,395,676]	
c	Add lines 4a and 4b				4c	20,395,676
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, lii	ne 12)		5	236,830,351
Par		xpenses per Audited Financial S nization answered 'Yes' on Form 990			s pe	Return.
1	Total expenses and losses per	r audited financial statements			1	242,258,000
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	acılıtıes	2a		ı	
b	Prior year adjustments		2b	C		
c	Otherlosses		2c	С		
d	Other (Describe in Part XIII)		. 2d	C		
e	Add lines 2a through 2d				2e	0
3	Subtract line 2e from line 1 .				3	242,258,000
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incli	uded on Form 990, Part VIII, line 7b .	. 4a		ı	
b	Other (Describe in Part XIII)		. 4b	12,842,241		
c	Add lines 4a and 4b				4c	12,842,241
5	Total expenses Add lines 3 ar	nd 4c. (This must equal Form 990, Part I,	line 18)	5	255,100,241
					ı	
Par	Supplemental Inf	ormation				
Part		Part II, lines 3, 5, and 9, Part III, lines i lines 2d and 4b, and Part XII, lines 2d a				ide any additional
	Return Reference	Explanation				
Sche	dule D, Part III, Line 1	The National Scouting Museum in Irving	Texas.	, possesses artifacts, fi	ne art,	and multimedia

archives last appraised in March 2012 at approximately \$60,000,000. The museum also houses collections of Scouting memorabilia, objects, and archival documents. In conformity with accounting policy generally followed by museums, these collections are not recognized as assets in the consolidated balance sheet, however, costs associated with insuring and maintaining these collections have been expensed. During 2015, no major additions or disposals of collections items.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12

occurred

efile GRAPHIC prii	nt - DO NOT PROCE	SS As	Filed Da	ta -		DLN:	9349331907175
SCHEDULE F (Form 990)	Statemen	t of Act	ivities (ates	OMB No 1545-004		
Department of the Treasury Internal Revenue Service	► Col ► Information about		Part IV, line: ► Attach t	ov/form990.	2015 Open to Public Inspection		
Name of the organization BOY SCOUTS OF AMER						Employer ident	ification number
	Information on Ac			ne United States. orm 990, Part IV, line	14b.		
and other assist used to award th 2 For grantmaker assistance outsi	ance, the grantees' one grants or assistants. S. Describe in Part Volume the United States.	eligibility foce? the organi	or the gran	s to substantiate the nts or assistance, and rocedures for monitor uplicated if additional sp	the sele	ection criteria use of its gran	√ Yes ts and other
(a) Region	(b) Num offices region	ber of (c) n the en	Number of mployees, gents, and dependent ntractors in	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	(e) If action program	vity listed in (d) is a n service, describe ecific type of ice(s) in region	(f) Total expenditure: for and investments in region
(1) See Add'l Data			region	region)			
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuto Part I c Totals (add lines 3		2	1		No 500		22,189,2 ule F (Form 990) 2015

12:31:011 Grants and Other Assistance to Organizations or Entities Outside the United Stat	Part II	Grants and Other Assistance to Organizations or Entities Outside the United States.
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Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

LANTING and a		l	(-) A	(6) Manager of	(-) 0	(h) December	(i) Mathadas
section and EIN (if	(c) Region	(d) Purpose of grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		section and EIN (if	section grant and EIN (if	section grant cash grant and EIN (if	section grant cash grant cash disbursement	section grant cash grant cash of non-cash and EIN (if disbursement assistance	section and EIN (if grant cash grant cash of non-cash assistance assistance

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

10

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Schedule F (Form 990) 2015							Page 3
Part III Grants and O				ted States. Complete i	if the organization an	swered "Yes" to Form	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	East Asia and the Pacific	300	25,480	check	0		мрриман, -
(2) Science center research and support	South America	2	7,020	check and wire	0		
(3)				7			
(4)				'		,	
(5)				'			
(6)		+		'			
(7)				<u>'</u>			
(8)		+		-			
(9)		+ +					
(10)		+ +					
(11)		+ +					
(12)		+ +					
(13)				 			
(14)		+ +					
(15)		+ +				·	

(16) (17) (18) 8621)

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

Yes

Nο

▽ (see Instructions for Form 8865) Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990) Yes Νo (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete

Page 5

Schedule F (Form 990) 2015

990 Schedule F, Supplem	990 Schedule F, Supplemental Information							
Return Reference	Explanation							
Cabadala E Danti I I a 2	The comment of the co							

this part to provide any additional information (see instructions).

Schedule F, Part I, Line 2

The organization has an established relationship with the existing world Scouting organizations that are given grants. These specific organizations are supported due to their effectiveness and legitimacy with program documentation and finances. The organization is in contact with these organizations regularly to follow up on projects and ensure compliance.

Additional Data

Software ID: 15000352

Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Investments	Investment of pension funds in foreign partnerships and corporations	15,164,089
Europe (including Iceland and Greenland)	0	0	Investments	Investment of pension funds in foreign partnerships and corporations	5,675,104
North America (including Canada and Mexico, but not the United States)	2	1	Program Services	Northern Tier High Adventure Base programs in Canada at the Atikaki and Atikokan Youth Ventures Inc facilities	494,414

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (e) If activity listed in (a) Region (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region agents in type) (i e , fundraising, service, describe region specific type of service region program services, grants to recipients (s) in region located in the region) East Asia and the Pacific Program Services Reviewing supply vendor 231,935 Ifacilities and World Jamboree Central America and the Program Services Training 4,158 Caribbean Europe (including Iceland Program Services Grants to support 40,110 and Greenland) International Scouting

Imovement

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe agents in region specific type of service region program services. grants to recipients (s) in region located in the region) North America (including Program Services 2019 World Jamboree 4,719

Grantmaking

Support Scout training

land activity center

lconstruction

12.668

126,965

Canada and Mexico, but not the United States)	-			preparation	
Sub-Saharan Africa	0	0	-	African Regional Conference	

Form 990 Schedule F Part I - Activities Outside The United States

Central America and the

Caribbean

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe region agents in specific type of service region program services. grants to recipients (s) in region located in the region) East Asia and the Pacific Grantmaking Safe Scouting Program 91,826 lGrant. Europe (including Iceland Grantmaking Support World Scouting 301.650 and Greenland) lmovement

Grantmaking

Training grant

16,607

Form 990 Schedule F Part I - Activities Outside The United States

South America

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (a) Region (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe agents in region specific type of service region program services. grants to recipients (s) in region located in the region) South Asia 25,000

lGrantmakıng

IScout Center limprovement grant

(q) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) Central America and Leadership training 126,965 wires the Caribbean

9,587

lwire

(I) Method of

	 Safe Scouting program grant	66,346	EFT and wire	0	
	Support International	301,650	wire	0	

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Greenland)

South America

Scouting

Support

International Scouting

(b) IRS code

(b) IRS code (1) Method of (q) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and FIN(if cash grant cash dishursement (book, EMV organization າ<u>ther)</u>

organization	applicable)			cash grant	cash disbursement	assistance	assistance	appraisal, oth
		South Asia	Scout center	25,000	wire	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States

limprovement grant

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

Internal Revenue Service

Name of the organization
BOY SCOUTS OF AMERICA

Department of the Treasury

Employer identification number

22-1576300

Ра	Form 990-EZ filers are not required to complete this part.	
1	Indicate whether the organization raised funds through any of the following activities Check all that apply	

- a Mail solicitationsb Internet and email solicitations
- f Solicitation of government grants

c 🔽 Phone solicitations

- d 🔽 In-person solicitations
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising

 √Yes No services?
- **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(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 Community Counselling Service 461 5th Ave 3rd Floor New York, NY 10017	Develop Campaign	Yes	No No	0	63,112	-63,112
America's Charities 14150 Newbrook Dr Suite 110 Chantilly, VA 20151	Employee AGC & Federated Campaigns	Yes		370,580	56,469	314,111
3 Automotive Recovery Services Two Westbrook Corporate Center Suite 500 Westchester, IL 60154	Donated vehicle auction program	Yes		210,999	62,323	148,676
4						
5						
6						
7						
8						
9						
10						
Total	1			581,579	181,904	399,675

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NV, OH, OK, OR, PA, PR, RI, SC, TN, UT, VA, WA, WI, WV

	•	•
Part II	Fundraising	Events

Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

	receipts greater than \$5,000	(a)Event #1	(b) Event #2	(c)O ther events	(d)
		Tarpon Fish Tournament	Wilderness Fish Tournament	(total number)	Total events (add col (a) through col (c))
		(event type)	(event type)	(total number)	coi (c))
Revenue					
Rev	1 Gross receipts	80,888	82,390		163,278
	2 Less Contributions	28,988	43,390		72,378
	Gross income (line 1 minus line 2)	51,900	39,000		90,900
	4 Cash prizes	0	0		0
	5 Noncash prizes	0	246		246
တွ	6 Rent/facility costs	41,803	4,587		46,390
Expenses	7 Food and beverages	4,045	49,625		53,670
Ä.	8 Entertainment	0	0		0
Direct	9 Other direct expenses	13,729	6,198		19,927
ā	10 Direct expense summary Add lines 4	through 9 in column (d)		120,233
	11 Net income summary Subtract line 1	0 from line 3, column (c)	•	-29,333
Pai	rt III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on I	Form 990, Part IV, line	e 19, or reported mo	re than \$15,000 on
Revenue		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
Expenses	2 Cash prizes				
	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes% Νο	├ Yes <u> </u>	│ Yes%	
	7 Direct expense summary Add lines 2	through 5 in column (c)		
	8 Net gaming income summary Subtra	ct line 7 from line 1, col	umn (d)	•	
9 a	Enter the state(s) in which the organizated is the organization licensed to conduct				Yes No
b	-	-			
10a	Were any of the organization's gaming li	censes revoked, suspe	nded or terminated during	the tax year?	Yes No
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS As Filed Data Schedule I
(Form 990)

Grants and C
Governments
Complete if the organize

Department of the
Treasury

Information about Schedule

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Internal Revenue Service

Name of the organization

BOY SCOUTS OF AMERICA

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

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

▶ Attach to Form 990.

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

OMB No 1545-0047

DLN: 93493319071756

<u>2015</u>

Open to Public Inspection

Schedule I (Form 990) 2015

Employer identification number

out seed to at Attender	Ses the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance released to award the grants or assistance?										
Part I General Informatio	n on Grants an	d Assistance				·					
the selection criteria used to aw Describe in Part IV the organiza Part II Grants and Other Assista	vard the grants or a ation's procedures f ance to Domestic O	ssistance? or monitoring the use	of grant funds in the Un	ited States			√ Yes No				
(a) Name and address of		(c) IRC section	(d) A mount of cash	cash	valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
See Additional Data Table											
	-						_				
	+	+									
	+										
		+									
Enter total number of section 50Enter total number of other orga		-					45				

Cat No 50055P

Additional Data

8315 W Jefferson Blvd

Fort Wayne, IN 46804

Software ID: 15000352
Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Alamo Area Council 583 74-6079583 6,877 Grants funded by 501(c)(3) 2226 NW Military Drive America Charities San Antonio, TX 78213 donations supporting Scouting at the local council Aloha Council 104 99-0073482 501(c)(3) 11,166 Grants funded by 42 Puiwa Road America Charities donations supporting Honolulu, HI 96817 Scouting at the local council Anthony Wayne Area Cncl 35-0876343 501(c)(3) 16,000 Grant to support local 157 council Scout

programs

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) Baltimore Area Council 220 52-0591572 501(c)(3) 14,353 Grants funded by 701 Wyman Park Drive A merica Charities Baltimore, MD 21211 donations supporting Scouting at the local support local

donations supporting Scouting at the local

council

					council
Calumet Council 152 8751 Calumet Ave Munster,IN 46321	35-0867968	501(c)(3)	16,000		Grant to support loca council Scout programs
Capitol Area Council 564 12500 North IH 35	74-1143057	501(c)(3)	9,110		Grants funded by America Charities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Austin, TX 78753

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Cascade Pacific Council 492 93-0386792 501(c)(3) 8,180 Grants funded by 2145 Naito Pkwy America Charities Portland, OR 97201 donations supporting Scouting at the local council

donations supporting

Scouting at the local

council

Catalina Area Council 11 5049 E Broadway Blvd Ste 200 Tucson, AZ 85711	86-0107516	501(c)(3)	5,520		Grants funded by America Charities donations supporting Scouting at the local council
Chief Seattle Council 609 3120 Rainier Ave South	91-0569878	501(c)(3)	11,378		Grants funded by America Charities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

P O Box 440408 Seattle, WA 98114

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Circle Ten Council 571 75-0800615 501(c)(3) 11,133 Grants funded by 8605 Harry Hines Blvd A merica Charities P O Box 35726 donations supporting Dallas,TX 75235 Scouting at the local council

Central Point, OR 97502

					Council
Cradle Of Liberty Council 525 1485 Valley Forge Road Wayne,PA 19087	23-1352052	501(c)(3)	6,422		Grants funded by America Charities donations supporting Scouting at the local council
Crater Lake Council 491 3039 Hanley Rd	93-0386820	501(c)(3)	5,258		Grants funded by America Charities

donations supporting Scouting at the local

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) French Creek Council 532 25-0965265 501(c)(3) 9,940 A quatics grant 1815 Robinson Road West Erie, PA 16509

Georgia-Carolina Council 93 4132 Madeline Drive Augusta, GA 30909	58-0566185	501(c)(3)	7,454		Grants funded by America Charities donations supporting Scouting at the local council
Grand Canyon Council 10 2969 N Greenfield Rd Phoenix, AZ 85016	86-0101295	501(c)(3)	5,308		Grants funded by America Charities donations supporting

Scouting at the local

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Great Smoky Mountain 62-0476811 501(c)(3) 68,712 STEM program grant Council 557 1333 Old Weisgarber Rd Knoxville, TN 37909

Great Southwest Council 412 5841 Office Blvd NE Albuquerque, NM 87109	85-0102305	501(c)(3)	6,655		A meri donati	s funded by ca Charities ons supporting ing at the local
Greater Los Angeles Area Council 33 2333 Scout Way Los Angeles,CA 90026	95-1643982	501(c)(3)	7,144		A merı donatı	s funded by ca Charities ons supporting ing at the local

(a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Greater New York Council 13-1624015 501(c)(3) 11.968 Grants funded by 640 America Charities Empire State Bldg 350 Fifth donations supporting Scouting at the local Avenue Suite 7820 council New York, NY 10118 43-0652676 501(c)(3) 8,807 Grants funded by America Charities

council

Greater St Louis Area Council 312 4568 West Pine Blvd donations supporting St Louis, MO 63108 Scouting at the local council Gulf Ridge Council 86 59-0624406 501(c)(3) 5,084 Grants funded by 13228 North Central Avenue A merica Charities

Tampa, FL 33612 donations supporting Scouting at the local

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Indian Nations Council 488 73-0579230 501(c)(3) 11,856 Grant supporting Indian 4295 S Garnett Road camperships Tulsa, OK 74146 ded by

(e) Amount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

council

Last Frontier Council 480 3031 N W 64th St Oklahoma City, OK 73116	73-0580263	501(c)(3)	7,047		Grants funded by America Charities donations supporting Scouting at the local council
Mecklenburg County Council	56-0529957	501(c)(3)	10,895		Grants funded by

(d) A mount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

supporting the local ded by America Charities 415 1410 East 7th Street donations supporting Charlotte, NC 28204 Scouting at the local

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Middle Tennessee Council 62-0477729 501(c)(3) 5,380 Grants funded by 560 America Charities 3414 Hillsboro Rd donations supporting Nashville, TN 37215 Scouting at the local le a un cul funded by Charities

Scouting at the local

council

					Councii
Mount Baker Council 606 1715-100th Place SE Everett, WA 98208	91-1622046	501(c)(3)	6,731		Grants fun America C donations
					Scouting a
					council
National Capital Area Council	53-0204610	501/c)/3)	43.401		Grants fun

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Bethesda, MD 20814

ns supporting at the local Grants funded by 43,401 National Capital Area Council 53-0204610 501(C)(3)| 8.2 A merica Charities 9190 Rockville Pike donations supporting

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Occoneechee Council 421 56-0529984 501(c)(3) 7,230 Grants funded by America Charities 3231 Atlantic Avenue Raleigh, NC 27629 donations supporting

					Scouting at the local council
Ohio River Valley Council 619 P O Box 6186 Wheeling, WV 26003	55-0357014	501(c)(3)	5,459		Grants funded by America Charities donations supporting Scouting at the local

programs

council Old Hickory Cncl 427 56-0529985 501(c)(3) 10,048 Grant to support local 6600 Silas Creek Pkwy council Scout

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Winston Salem, NC 27106

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Orange County Council 39 95-1727660 501(c)(3) 8,098 Grants funded by 1211 East Dyer Road America Charities Santa Ana, CA 92705 donations supporting a at the local

					Scouting a council
Quivira Council 198 3247 N Oliver St	23-7147508	501(c)(3)	10,478		STEM pro

Harlingen, TX 78551

Quivira Council 198 3247 N Oliver St Wichita,KS 67220	23-7147508	501(c)(3)	10,478		STEM program grant
Rio Grande Council 775	74-1143104	501(c)(3)	31 364		Grant for operation

Wichita, KS 67220					
Rio Grande Council 775	74-1143104	501(c)(3)	31,364		Grant for operation
6912 W Expressway 83					expenses

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment assistance other) Sagamore Council 162 35-0867972 501(c)(3) 16,000 Grant to support local 518 N Main St council Scout Kolomo, IN 46903 programs Sam Houston Area Council 76-0239833 501(c)(3) 6.676 Grants funded by

1207 Upas St

San Diego, CA 92163

576 2225 North Loop West Houston,TX 77292	, 0 0233033	301(0)(3)	0,070		America Charities donations supporting Scouting at the local council
San Diego-Imperial Council 49	95-1643983	501(c)(3)	10,219		Grants funded by America Charities

donations supporting

Scouting at the local

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) San Francisco Bay Area 94-1568616 501(c)(3) 7,020 Grants funded by Council 28 America Charities 1001 Davis St donations supporting Scouting at the local San Leandro, CA 94577 council 54-0505875 501(c)(3) 39,325 Grants funded by America Charities

Tidewater Council 596 1032 Heatherwood Dr. Virginia Beach, VA 23455 donations supporting Scouting at the local council

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

APO.AE 09714

Transatlantic Council 802 98-0000121 501(c)(3) 125,000 Grant to support local council development USAG Brussels Unit 28100 Box 24 efforts

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Westchester-Putnam Council 13-2750608 501(c)(3) 6,011 Grants funded by America Charities 388 41 Saw Mill River Road donations supporting Hawthorne, NY 10532 Scouting at the local council 64-0315213 501(c)(3) 25,000 Grant for operation expenses

Scouting at the local

council

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 04-2349692 501(c)(3) 5,307 Nashua Valley Council 230 Grants funded by 1980 Lunenbura Rd America Charities Lancaster MA 01523 Idonations supporting ocal

operations

	Luncuster, FIX 01323					ponacions supporch
						Scouting at the loca
_						council
-	National Catholic Committee on Scouting 55 Broad St	53-0196617	501(c)(3)	10,000		Grant to support scouting

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

600 N Wheeling Road

Mount Prospect, IL 60056

Red Bank, NJ 07701 Pathway to Adventure Council 47-5066720 501(c)(3) 21,150 Grant to support

cash grant FMV, appraisal, other) Florida Seabase Scholarship 42 33,040 National Eagle Scout Association 111 300,983 Scholarship National Jewish Committee on Scouting 7,000 Scholarship Doerr Scholarship 000,8 Maguire Scholarship 82 36,950 Waite Phillips Scholarship 714 272,320

(d)A mount of

non-cash assistance

(e)Method of valuation (book, (f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b)Number of

recipients

12

11

42

36

(c)A mount of

18,810

6,360

13,000

161,785

16,854

31,000

(a) Type of grant or assistance

World Jamboree Scholarship

Cooke Eagle Scholarship

Josh Sain Memorial Scholarship

GLIP Scholarship

STEM Scholarship

Kiefer Scholarship

Compensation Information

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

Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.

2015

OMB No 1545-0047

DLN: 93493319071756

Schedule J (Form 990)

eası	tment of the ury al Revenue Service	▶ Information about Schedule J (Form	1 990) and its instructions is at <u>www.irs.</u>	<u>.gov/form990</u> .	Open t Insp	o Pul ectio		
	me of the organiz SCOUTS OF AMERI				Employer identifica	tion nu	mber		
					22-1576300				
Pa	rt I Questi	ions Regarding Compensation					1		
_							Yes	No	
La		ropiate box(es) if the organization provid Section A, line 1a Complete Part III to							
	•	s or charter travel	~	Housing allowance or residence fo	r personal use		ļ		
	✓ Travel for	companions		Payments for business use of pers	onal residence		ļ		
	✓ Taxıdem	nification and gross-up payments	~	Health or social club dues or initia	tion fees		ļ	ļ	
	Discretio	nary spending account	Γ	Personal services (e g , maid, chai	uffeur, chef)	l I			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain								
2		zation require substantiation prior to reim tees, officers, including the CEO/Executi				2	Yes		
	,	, , ,		, 3			1 03		
3	organızatıon's	, if any, of the following the filing organiza CEO/Executive Director Check all that led organization to establish compensation	apply	Do not check any boxes for metho	ds				
	✓ Compens	ation committee	~	Written employment contract					
	✓ Independ	ent compensation consultant	~	Compensation survey or study					
	Form 990	of other organizations	✓	Approval by the board or compens	ation committee				
1	During the yea or a related org	r, did any person listed on Form 990, Pai ganization	rt VII	I, Section A, line 1a with respect to	the filing organizatio	on			
а	Receive a seve	erance payment or change-of-control pay	men	t?		4a	Yes		
b	Participate in,	or receive payment from, a supplemental	none	qualified retirement plan?		4b	Yes		
c	Participate in,	or receive payment from, an equity-base	d cor	mpensation arrangement?		4c		Νo	
	If "Yes" to any	of lines 4a-c, list the persons and provide	de th	e applicable amounts for each item i	n Part III				
	Only 501(c)(3)), 501(c)(4), and 501(c)(29) organization	ıs mu	st complete lines 5-9.					
5	•	ted on Form 990, Part VII, Section A, lin contingent on the revenues of	ne 1a	, did the organization pay or accrue	any				
а	The organization	on?				5a	Yes		
b	Any related org	ganızatıon?				5b		Νo	
	If "Yes," on lin	e 5a or 5b, describe in Part III							
5	•	ted on Form 990, Part VII, Section A, lir contingent on the net earnings of	ne 1a	, did the organization pay or accrue	any				
а	The organization	on?				6 a		No	
b	Any related org	ganızatıon?				6b		Νo	
	If "Yes," on lin	e 6a or 6b, describe in Part III							
7		ted on Form 990, Part VII, Section A, lir described in lines 5 and 6? If "Yes," desc			on-fixed	7		No	
3		unts reported on Form 990, Part VII, paid Initial contract exception described in Re				8		No	

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Selledales (Form 550) 2015					r age 🕳						
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.											
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual											
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in						

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	-	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior
	(i) compensation	compensation	compensation				Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Schedule J (Form 990) 2015

Page 2

Return Reference	
	Employees who travel extensively reimbursed to employees and not family oriented organization and rightsion of the Boy Scouts of Ameexpenses for spousal travel durin

Schedule J (Form 990) 2015

Schedule J, Part I, Line 4

Schedule J, Part I, Line 5

Participants in the non qualified retirement restoration plan have the taxable portion grossed-up to cover the taxes. Housing allowances paid to the CFO

otherwise be limited by the Omnibus Budget Reconciliation Act of 1993 Benefits attributed under the Restoration Plan supplement those accrued under the qualified Retirement Plan and payments do not commence until an employee's retirement Participants include employees with compensation over \$ 265,000 C Wayne Brock \$169,754 restoration plan, \$128,973 plan 457(f), Michael Surbaugh \$29,314 restoration plan, Michael A Ashline \$12,590 restoration plan, Tom Fitzgibbon \$129,186 restoration plan, John Green \$22,163 restoration plan, Bradley Farmer \$8,240 restoration plan, Don

higher because of retirement

McChesney \$6,567 restoration plan, Gary Butler \$33,110 restoration plan and Al Lambert \$4,071 restoration plan, JD McCarthy \$801 restoration plan,

maintaining operations within budget, and achieving goals within the organizations strategic plan

Tom Harrington \$134,746 restoration plan Wayne Brock retired after 42 years of service in September 2015 - the change of control payment (unused

vacation and severance) was \$250,409 and his calculated restoration plan benefit were higher because of retirement. Tom Fitzgibbon retired after 37 years of service in - the change of control payment (unused vacation and severance) was \$326,352 and his calculated restoration plan benefits were

An Annual Incentive Plan was adopted with a component of compensation is based on items such as membership, obtaining funding commitments,

Explanation

were included in taxable compensation. He is working in both North Carolina and Texas locations as the CFO and Supply Division leader

The BSA's National Executive Board approved a non-qualified, Retirement Benefits Restoration Plan for the benefit of all employees whose benefits would

substantiation and submission of a business purpose as to why first/business class accommodations were needed. The Chief Scout Executive, and Assistant Chief Scout Executive are reimbursed for club dues at the LaCima club which is used for meeting with potential donors, volunteers, and offsite meetings. These expense reimbursements are not included in taxable employee compensation. The total of the LaCima expense in 2015 was \$3,192.

are allowed to travel first/business class when potential or current donors are in first class/business class to allow continued fundraising efforts. In addition, first/business class is allowed for certain employees that are required to travel extensively and also require special accommodations. The total first class travel for 2015 was \$52,722 and was not included in employees' taxable compensation and were only reimbursed to the employees upon

employee upon substantiation and submission of a business purpose. The Boy Scouts of American policy allows employees traveling with volunteers to upgrade to first/business class to allow the employee to discuss business during the flight. Also employees travelling extensively for philanthropic efforts

requires spousal participation for events in which the spouse's participation is critical to furthering the programs and ierica. Their expenses are considered necessary to fulfill the business purpose of the organization. As such, total ng 2015 was \$19,118 were not included in the employees' taxable compensation and were only reimbursed to the

ly are allowed to join the Airline Travel Clubs. Payment for airline travel clubs totaled \$3,562. Airline travel club fees were it included in employee compensation only if a substantial business purpose was provided. The Boy Scouts of America is a

Schedule J (Form 990) 2015

Page 3

Software ID: 15000352 **Software Version:** v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990, Schedule J,	Part :							(E) C
(A) Name and Title		(B) Breakdown of (i) Base Compensation	W-2 and/or 1099-MI: (ii) Bonus & Incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1Wayne Brock Secretary / Chief Scout Executive (Jan - Sept 2015)	(1)	320,776 	49,780	691,039	266,603	23,526	1,351,724	0
	(,	_	0	0	U	0	0	0
1Michael B Surbaugh Secretary / Chief Scout Executive (Oct-Dec 2015)	(1)	289,807 0	0	75,115 	147,636 	23,593 	536,151 	0 0
2Steven McGowan	(1)	81,862	0	23,890	0	1,406	107,158	0
Assistant Secretary & General Counsel (Oct-Dec 2015)	(11)	0	0	23,690	0	1,400 		0
3Michael A AshlineCFO	(1)	323,471	37,090	79,021	76,684	16,988	533,254	0
	(11)	0	0	0	0	- - 0	0	0
4 John Green Group Director - Outdoor	(1)	259,930	0	71,880	54,365	28,460	414,635	0
Adventures	(11)	0	0	0	0	- 0		0
5 Bradley Farmer ACSE Development	(1)	304,259	35,772	32,334	139,614	26,395	538,374	0
	(11)	0	0	0	0	-0	0	0
6 Gary Butler Deputy Chief Scout Executive	(1)	309,153	32,965	71,672	140,810	33,847	588,447	0
	(11)	0	0	0	0	- 0	- 0	0
7Tom Fitzgibbon ACSE Council Support	(1)	45,670	60,293	578,766	87,765	2,517	775,011	0
	(11)	0	0	0	0	- - 0	- 0	0
8 Don McChesney Regional Director	(1)	305,786	27,338	18,903	132,999	17,920	502,946	0
	(11)	0	0	0	0	- 0		0
9 Perry Cochell Director, Office of	(1)	242,889	0	10,127	112,702	27,791	393,509	0
Philanthropy	(11)	0	0	0	0	0	- 0	0
10 Ponce Duran Regional Director	(1)	262,132	24,912	20,206	128,884	36,151	472,285	0
	(11)	0	0	0	0	-0	- 0	0
11J D McCarthy Group Director - Summit	(1)	266,936	30,098	4,008	75,669	18,834	395,545	0
	(11)	0	0	0	0	-	- 0	0
12Steve Medlicott Group Director - Marketing	(1)	215,913	0	5,262	77,031	24,724	322,930	0
croup birector. Transcting	(11)	0	0	0	0			0
13Al Lambert Regional Director	(1)	286,157	30,085	21,873	139,136	27,225	504,476	0
	(11)	0	0	0	0			0
14 Tom Harrington Regional Director	(1)	266,016	30,468	256,598	166,979	26,008	746,069	0
	(11)	0	0	0	0			0

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

DLN: 93493319071756

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

OMB No 1545-0047

Open to Public

Department of the Treasury

(Form 990)

Internal Davisson Conver

explanations, and any additional information in Part VI. ► Attach to Form 990.

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

	nal Revenue Service												Inspe		
	e of the organization / SCOUTS OF AMERICA									Em	ployer id	entifica	tion nur	nber	
ВО	1 SCOUTS OF AMERICA									22	-15763	00			
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	orice	(f) Description of purpose		of purpose	(g) De	feased	(h) beha	lf of		Pool ncing
										Yes	No	ıss Yes	No	Yes	No
A	The County Commission of Fayette County (WV)	55-6000314		11-05-2010	50,00	t	the St	truction and ummit Becht nal Scout Re		103	Х	- 103	Х	103	X
В	The County Commission of Fayette County (WV)	55-6000314		11-05-2010	50,00	0,000 c	Const		equipping of el Family		х		х		х
С	County Commission of Fayette County (WV)	55-6000314		03-09-2012	175,00	0,000 c	Const		equipping of el Family		Х		Х		×
Pa	rt III Proceeds	•													
						A		E	в		С			D	
1	A mount of bonds retired					50,000,	,000		4,555,545		10,95	6,420			
2	A mount of bonds legally defea	sed					0		0			0			
3	Total proceeds of issue					50,000,	.000	į	50,000,000		175,00	0.000			
4	Gross proceeds in reserve fun-						0		0			0			
- 5	Capitalized interest from proce						0		0			0			
6	Proceeds in refunding escrows				+		0		0			0			
7	Issuance costs from proceeds				+	0 0					0				
8	Credit enhancement from proc					0 0				0					
9	Working capital expenditures f					0 0				0					
10	Capital expenditures from prod					50,000,000 50,000,000			175,000,000						
11	Other spent proceeds					30,000,	0 50,000,000				173,00	0			
12	Other unspent proceeds						0		0			0			
13	Year of substantial completion				20	013		20	13	2013					
_	·				Yes	No		Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part	of a current refundi	ngıssue?			×			х			х			
15	Were the bonds issued as part	of an advance refur	ndıngıssue?		1	X			×			x		-	
16	Has the final allocation of proc				X	+		Х		X					
17	Does the organization maintail allocation of proceeds?	n adequate books ar	nd records to supp		×			×		X					
	TI III Private Business U		• •												
						A		E	3		С			D	
					Yes	No		Yes	No	Yes	ľ	No.	Yes		No

Was the organization a partner in a partnership, or a member of an LLC, which owned

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

Χ

Χ

Х

Χ

	(. 1						
						3		<u>c</u>		D
3a	Are there any management or service contracts that may result in private b	ousiness use	Yes	No X	Yes	No X	Yes	No X	Yes	No
	of bond-financed property?			^		^		_ ^		
b prope	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the final erty?									
С	Are there any research agreements that may result in private business use financed property?	of bond-		×		х		×		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert:									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government.			0 %		0 %		0 %		l
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government	rsection		0 %		0 %		0 %		
6	Total of lines 4 and 5			0 %		0 %		0 %		
7	Does the bond issue meet the private security or payment test?		Х		Х		Х			
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bond issued?			×		Х		x		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or c	lisposed of				•		•		•
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations s	ections								
9	Has the organization established written procedures to ensure that all nonq bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		х		×		X			
Par	t IV Arbitrage			•						
		Α			В		С		D	
	•	Yes	No	Yes	No	Yes	;	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		Х		Х			х		
2	If "No" to line 1, did the following apply?								•	
a	Rebate not due yet?	Х		Х		X				
b	Exception to rebate?		Х		Х			Х		
c	No rebate due?		Х		Х			Х		
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Х		X			Х		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х			Х		
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									
								I		

D

Yes

Page 3

Nο

Were gross proceeds invested in a guaranteed investment contract (GIC)?

Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary

period? Has the organization established written procedures to monitor

the requirements of section 148? . . . **Procedures To Undertake Corrective Action**

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified

and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

Yes

Yes

Nο

Х

Х

No

В

Yes

Х

В

Yes

No

Nο

Yes

Yes

Χ

No

No

Х

D Yes

No

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE M

DLN: 93493319071756

OMB No 1545-0047

2015

Open to Public

Noncash Contributions

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

► Attach to Form 990.

(Form 990)

Department of the

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

Treas	sury nal Revenue Service						Inspe	ectio	n
Nam	ne of the organization				Emplo	yer identificat	tion nu	mber	
BOY :	SCOUTS OF AMERICA				22-15	76300			
Pā	rtI Types of Property				22-13	70300			
	,,,	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line		(d Method of d oncash contrib	letermı	_	its
3 4	Art—Works of art Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods								
6 7 8 9	Cars and other vehicles Boats and planes Intellectual property Securities—Publicly traded .	X	350	,		1arket Value on date of don	ation		
10 11	Securities—Publicly traded . Securities—Closely held stock . Securities—Partnership, LLC, or trust interests Securities—Miscellaneous	^	39	2,412	7 I'l V	on date of don	audii		
13	Qualified conservation contribution—Historic structures								
15	Qualified conservation contribution—Other Real estate—Residential .								
16 17 18	Real estate—Commercial Real estate—Other Collectibles								
19 20 21 22	Food inventory Drugs and medical supplies Taxidermy Historical artifacts								
23 24	Scientific specimens Archeological artifacts Other ► (X	4	17,919) Fair M	1arket Value			
26 27	Gram Equipment) Other ► () Other ► () Other ► ()								
29	Number of Forms 8283 received for which the organization comple				29			Yes	0 No
30a	During the year, did the organization it must hold for at least three ye for exempt purposes for the enti	ars from th	e date of the initial contribu	ition, and which is not requ					
	If "Yes," describe the arrangem	ent in Part I	II				30a		No
31 32a	Does the organization have a gift Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell			31 32a	Yes	No.
33	If "Yes," describe in Part II If the organization did not report describe in Part II				(a) ıs c	hecked,		. 55	

Page 2

Schedule M (Form 990) (2015)

One Difference" program 95% of the proceeds are distributed to local Councils, Distributions are based upon the donor's designation or, if none, payments are made to the local Council servicing the

larea of the donor's zip code

Schedule M (Form 990) (2015)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE O (Form 990 or

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.

OMB No. 1545-0047 2015 Open to Public Inspection

DLN: 93493319071756

Name of the organization BOY SCOUTS OF AMERICA

Return

990-EZ)

Treasurv

Department of the

Internal Revenue Service

> Employer identification number 22-1576300

990 Schedule O. Supplemental Information

Explanation Reference Form 990. Part Form 990 w as reviewed and approved by the Controller and National Legal Counsel An executive summary was prepared VI. Section B. and that, along with Form 990 without Schedule B, was distributed to the Officers and the Audit Committee for their review Line 11b Pricew aterhouseCoopers reviewed and signed Form 990 as paid preparer Finally. Form 990 without Schedule B was distributed to all Executive Board members before it was filed. Schedule B was not included due to confidentiality agreements with donors, some of which are members of the Executive Board Form 990. Part Annually a conflict of interest policy confirmation is required of the organizations Execu VI. Section B. tive Board Members and employees responsible for every department. The organization uses a Line 12c n outside company for anonymous reporting of potential ethics violations. A report of the violation is e-mailed to Internal Audit and National Legal Counsel for thorough research, review and resolution. The report, issue, and resolution are presented to the Audit Commit tee for review

990 Schedule O, Supplemental Information

Return Reference Explanation

Form 990, Part VI, Section B, Line 15	Governing documents and conflict of interest policy are available upon request

Governing documents and conflict of interest policy are available upon request

Form 990, Part VI, Section B, Line 15 Governing documents and conflict of interest policy are available upon request

Form 990, Part VI, Section C, Line 19

990 Schedule O, Supplemental Information

Return Reference Explanation

Form 990, Part VII,
Section A, Line 1a
Steven McGow an is an attorney that was employed by Steptoe & Johnson PLLC before being hired in 2015 as the
National Legal Counsel As an employee of Steptoe & Johnson PLLC, Steven worked on legal matters for the Boy
Scouts of America

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

BOY SCOUTS OF AMERICA

Employer identification number

22-1576300

rart 1 Identification of Disregarded Entitles Comple	te ii tile organization ansv	vereu tes on ro	riii 990, Part I	v, iiile 33.	
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) BSA Asset Management LLC	General Partner/Investments	DE	0	0	N/A
(1) 554 Asset Malnut Hill Lane Irving, TX 750383008 26-2473220	General Partner/Investments	DE	Ů	0	IV/A
(2) Atikokan Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base operation	CA	0	0	N/A
(3) Atıkakı Youth Ventures Inc PO Box 509 Ely, MN 55731	High Adventure Base operation	CA	0	0	N/A
(4) Associacion of Baptists for Scouting 1325 West Walnut Hill Lane Irving, TX 75038 74-6061216	Scouting	TX	0	0	N/A
(5) New World 19 LLC 1325 West Walnut Hill Lane Irving, TX 75038 37-1793510	World Jamboree	TX	0	0	N/A
Part II Identification of Related Tax-Exempt Organiz	ations Complete if the oi	ganization answe	red "Yes" on F	orm 990, Part	IV, line 34 because it had one

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.

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	(13) co ent	512(b) ntrolled ity?
(4.1)	Varieta dan alamana ant	DC	E04(-)(2)	9		Yes	No No
(1)Learning for Life 1329 West Walnut Hill Lane	Youth development	DC	501(c)(3)	9	N/A		No
Irving, TX 75038 75-2396057							
(2)National Boy Scouts of America Foundation 1325 West Walnut Hill Lane	Support Scouting	DC	501(c)(3)	7			No
1323 West Wallut Alli Lalle					N/A		
Irving, TX 750383008 75-2675978							
(3)Learning for Life Foundation 1329 West Walnut Hill Lane	Support Learning for Life	TX	501(c)(3)	7	Learning for Life		No
	programs						
Irving, TX 75038 26-2270708							
(4)Scout Executives Alliance PO Box 152079	Support Scouts' employees	TX	501(c)(9)			Yes	
PO BOX 132079					N/A		
Irving, TX 750152079 22-6069455							
(5)Boy Scouts of Amenca Employee Welfare Benefits PlanP O Box 152079	Welfare Benefits Plan	TX	501(c)(9)			Yes	
Benefits Plane O Box 152079					N/A		
Irving, TX 750152079 75-2347824							
(6)Arrow WV Inc 1325 West Walnut Hill Lane	Develop program & facility for Boy Scouts	wv	501(c)(3)	7	Boy Scouts of America	Yes	
Irving, TX 750383008							
27-0441319							<u> </u>
(7)BSA Endowment Master Trust 1325 West Walnut Hill Lane	Support Scouting	DE	501(c)(3)	7	81/8		No
Irving, TX 750383008					N/A		
27-6850785							
For Danamusel, Dadustian Ast Notice and the Instructions for Form Of		Cat No FO13	EV		Cabadula D / Farm	- 000\ 3	^45

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end- of-year assets	(h Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or iging	(k) Percentage ownership
							Yes	No		Yes		
(1) BSA Commingled Endowment Fund LP 1325 West Walnut Hill Lane Irving, TX 750383008 26-2474514	Endowment investment	DE	N/A	Excluded	22,539,209	356,908,831	Yes		-56,936		No	65 311 %
Part IV Identification of Polated Organizations Tax	blo se s Co		lion ov Tv	uat Camplet	f +ba araa	n.=at.on and		. IIVos	l on Form	000	Dowt	TV line

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.

	0				
(1) Section 512 (b)(13) controlled entity?	Yes				
(h) Percentage ownership					
(g) Share of end- of-year assets					
(f) Share of total Income					
(e) Type of entity (C corp, S corp, or trust)					
(d) Direct controlling entity					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of related organization					

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

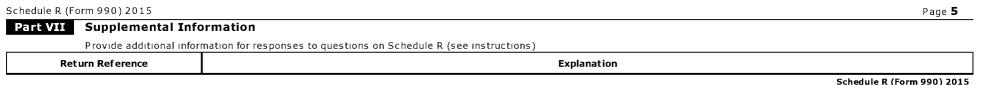
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
С	Gift, grant, or capital contribution from related organization(s)	1 c	Yes	
		1d	Yes	
		1e		No
f	Dividends from related organization(s)	1f		No
		1g		No
_		1h		No
	Exchange of assets with related organization(s)	1i		No
	Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
,	Lease of facilities, equipment, of other assets to related organization(s).	ŕ		
L	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
٠.	· · · · · · · · · · · · · · · · · · ·		. 00	
m		1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
	Sharing of paid employees with related organization(s)	10	Yes	
D	Reimbursement paid to related organization(s) for expenses	1p		No
		1q	Yes	
ч	Rembulsement para by relaced organization(5) for expenses 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ė		
	Other transfer of cash or property to related organization(s)	1r	Yes	
		1s	Yes	
5	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)Scout Executives Alliance	m	12,000	Estimated fair market value
(2)Scout Executives Alliance	Г	608,116	Per tax return
(3)Boy Scouts of America Employee Welfare Benefits Plan	r	57,021,343	Per tax return
(4)Arrow WV Inc	a-I	7,347,585	Interest expense incurred by Arrow through the construction of the Summit Bechtel Reserve, which if constructed by the Boy Scouts of America, would also be exempt
(5)BSA Commingled Endowment Fund LP	S	62,237,429	Per tax return
(6)BSA Commingled Endowment Fund LP	b	1,388,407	Per tax return

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

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

revenue) that was not a related organization See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 I	
													<u> </u>



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Software Version: v1.00

EIN: 22-1576300

Name: BOY SCOUTS OF AMERICA

Form 990, Schedule R, Part II - Identification of Re (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	Sectio (b)(contr enti	n 512 13) olled
						Yes	No
Learning for Life 1329 West Walnut Hill Lane Irving, TX 75038 75-2396057	Youth development	DC	501(c)(3)	9	N/A		No
National Boy Scouts of America Foundation 1325 West Walnut Hill Lane Irving, TX 750383008 75-2675978	Support Scouting	DC	501(c)(3)	7	N/A		No
Learning for Life Foundation 1329 West Walnut Hill Lane Irving, TX 75038 26-2270708	Support Learning for Life programs	ТХ	501(c)(3)	7	Learning for Life		No
Scout Executives Alliance PO Box 152079 Irving, TX 750152079 22-6069455	Support Scouts' employees	ТХ	501(c)(9)		N/A	Yes	
Boy Scouts of America Employee WelfareBenefits Plan P O Box 152079 Irving, TX 750152079 75-2347824	Welfare Benefits Plan	ТХ	501(c)(9)		N/A	Yes	
Arrow WV Inc 1325 West Walnut Hill Lane Irving, TX 750383008 27-0441319	Develop program & facility for Boy Scouts	wv	501(c)(3)	7	Boy Scouts of America	Yes	
BSA Endowment Master Trust 1325 West Walnut Hill Lane Irving, TX 750383008 27-6850785	Support Scouting	DE	501(c)(3)	7	N/A		No

Form 990, Schedule R, Part V - Transactions With Related Organizations (a) (b) (c) (d) Name of related organization Amount Involved Transaction Method of determining amount type(a-s) involved Scout Executives Alliance 12.000 Estimated fair market value (1) m (1) Scout Executives Alliance 608,116 Per tax return (2) Boy Scouts of America Employee Welfare 57,021,343 Per tax return Benefits Plan (3) Arrow WV Inc 7,347,585 Interest expense incurred by Arrow a-ı through the construction of the Summit Bechtel Reserve, which if constructed by the Boy Scouts of America, would also be exempt (4) BSA Commingled Endowment Fund LP 62,237,429 Per tax return (5) BSA Commingled Endowment Fund LP 1,388,407 Per tax return