

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

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

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

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BOYS HOPE GIRLS HOPE		D Employer identification number 43-1209928
	Doing Business As		E Telephone number 314-298-1250
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 17,092,527.
	12120 BRIDGETON SQUARE DRIVE		H(a) Is this a group return for subordinates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code BRIDGETON, MO 63044		H(b) Are all subordinates included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: PAUL MINORINI 12120 BRIDGETON SQUARE DR, BRIDGETON, MO 63		H(c) Group exemption number ▶ 3143	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.BOYSHOPEGIRLSHOPE.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1977
			M State of legal domicile: MO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3 327	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 326	
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5 281	
	6 Total number of volunteers (estimate if necessary)	6 1296	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
	b Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 13,664,548.	Current Year 12,790,647.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,104,631.	1,089,943.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	158,336.	7,319.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,927,515.	13,887,909.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,276,781.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,737,470.	8,100,776.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	1,089.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,477,695.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,894,018.	3,672,365.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,908,269.	14,053,928.	
19 Revenue less expenses. Subtract line 18 from line 12	1,019,246.	-166,019.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 31,466,491.	End of Year 33,105,034.
	21 Total liabilities (Part X, line 26)	2,895,044.	3,312,320.
	22 Net assets or fund balances. Subtract line 21 from line 20	28,571,447.	29,792,714.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	PAUL MINORINI, CEO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	SHAWN C. BECKER		
	Firm's name ▶ RUBINBROWN LLP	Firm's EIN ▶ 43-0765316	Check if self-employed <input type="checkbox"/>
	Firm's address ▶ ONE NORTH BRENTWOOD SAINT LOUIS, MO 63105	Phone no. (314) 290-3300	PTIN P00970717

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: BOYS HOPE GIRLS HOPE HELPS ACADEMICALLY CAPABLE AND MOTIVATED CHILDREN-IN-NEED TO MEET THEIR FULL POTENTIAL AND BECOME MEN AND WOMEN FOR OTHERS BY PROVIDING VALUE-CENTERED, FAMILY-LIKE HOMES, OPPORTUNITIES AND EDUCATION THROUGH COLLEGE.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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

4a (Code:) (Expenses \$ 1,824,555. including grants of \$ 803,279.) (Revenue \$) NEW YORK - THE PROGRAM IS A RESIDENTIAL SCHOLARSHIP PROGRAM WHICH OPERATES 2 HOMES. SERVICES PROVIDED WITHIN A FAMILY LIKE SETTING, INCLUDE HOUSING, FOOD, SCHOOL TUITION, TUTORING, ADULT LIVE-IN SUPERVISION AND CLOTHING. THIS YEAR, SERVICES WERE PROVIDED FOR 42 SCHOLARS IN RESIDENCE AND 19 SCHOLARS AWAY AT COLLEGE. SUCCESS IS MEASURED BY HAVING ALL RESIDENCE SCHOLARS COMPLETE SERVICE HOURS AND MAINTAIN AN ABOVE AVERAGE GRADE POINT.

4b (Code:) (Expenses \$ 940,183. including grants of \$ 189,479.) (Revenue \$) ILLINOIS - THE PROGRAM IS A RESIDENTIAL SCHOLARSHIP PROGRAM WHICH OPERATES 3 HOMES. SERVICES PROVIDED WITHIN A FAMILY LIKE SETTING, INCLUDE HOUSING, FOOD, SCHOOL TUITION, TUTORING, ADULT LIVE-IN SUPERVISION AND CLOTHING. THIS YEAR, SERVICES WERE PROVIDED FOR 18 SCHOLARS IN RESIDENCE AND 20 SCHOLARS AWAY AT COLLEGE. SUCCESS IS MEASURED BY HAVING ALL RESIDENCE SCHOLARS COMPLETE SERVICE HOURS AND MAINTAIN AN ABOVE AVERAGE GRADE POINT.

4c (Code:) (Expenses \$ 928,918. including grants of \$ 175,036.) (Revenue \$) ST LOUIS - THE PROGRAM IS A RESIDENTIAL SCHOLARSHIP PROGRAM WHICH OPERATES 2 HOMES. SERVICES PROVIDED WITHIN A FAMILY LIKE SETTING, INCLUDE HOUSING, FOOD, SCHOOL TUITION, TUTORING, ADULT LIVE-IN SUPERVISION AND CLOTHING. THIS YEAR, SERVICES WERE PROVIDED FOR 17 SCHOLARS IN RESIDENCE AND 8 SCHOLARS AWAY AT COLLEGE. SUCCESS IS MEASURED BY HAVING ALL RESIDENCE SCHOLARS COMPLETE SERVICE HOURS AND MAINTAIN AN ABOVE AVERAGE GRADE POINT. IN ADDITION, 37 SCHOLARS WERE SERVED THROUGH THE HOPE PREP PROGRAM, AN INTENSIVE 9-YEAR PROGRAM OF ACADEMIC PREPARATION AND CHARACTER BUILDING (BEGINNING IN 8TH GRADE) THROUGH HIGH SCHOOL AND ENDING AT COLLEGE GRADUATION.

4d Other program services (Describe in Schedule O.) (Expenses \$ 7,014,813. including grants of \$ 1,111,904.) (Revenue \$)

4e Total program service expenses 10,708,469.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
24d			
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
25b			X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
26			X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
27			X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a			X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
29			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
34		X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
37			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	
38		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Main table with columns for question number, description, sub-questions (1a-1b, 2a-2b, etc.), and Yes/No columns. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance items.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (327), 1b (326), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b (X), 11a (X), 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AZ, CA, IL, NY, PA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: PAUL MINORINI - 314-298-1250 12120 BRIDGETON SQUARE DRIVE, BRIDGETON, MO 63044

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and 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) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID KOENINGER CHAIRMAN-ARIZONA	1.00	X		X				0.	0.	0.
(2) CURTIS HILDT VICE CHAIR-ARIZONA	1.00	X		X				0.	0.	0.
(3) AL LORENZI PAST CHAIRMAN - ARIZONA	1.00	X		X				0.	0.	0.
(4) DAN BONCEL TREASURER-ARIZONA	1.00	X		X				0.	0.	0.
(5) TOM FRANZ PROGRAM CHAIRMAN-ARIZONA	1.00	X		X				0.	0.	0.
(6) MIGUEL BRAVO DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(7) RON BUTLER SECRETARY-ARIZONA	1.00	X		X				0.	0.	0.
(8) MARY ELLEN DALTON GOVERNANCE CHAIRMAN-ARIZONA	1.00	X		X				0.	0.	0.
(9) SHELLIE ANDREEN DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(10) KASIM ASLAM DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(11) STEVE CHUCRI DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(12) CARLA CONSOLI DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(13) JOHN DAMIRIS DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(14) BRIGITTE DAYTON DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(15) JOHN ELDEAN DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(16) F. MICHAEL GEDDES DIRECTOR-ARIZONA	1.00	X						0.	0.	0.
(17) HOPE LEVIN DIRECTOR-ARIZONA	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SENTARI MINOR DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(19) PAUL MULLIGAN DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(20) JOHN OLSON DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(21) REV. EDWARD A. REESE, S.J. DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(22) DON SMITH DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(23) J.T. VANDERGRIF DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(24) CHERYL VOGT DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(25) CHRIS YARRINGTON DIRECTOR-ARIZONA	1.00	X					0.	0.	0.	
(26) ANDREW HILGER PAST CHAIRMAN-BALTIMORE	1.00	X		X			0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							1,221,728.	111,254.	119,991.	
d Total (add lines 1b and 1c)							1,221,728.	111,254.	119,991.	

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

	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		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
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		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOE LAROCQUE CHAIRMAN-BALTIMORE	1.00	X		X				0.	0.	0.
(28) PAUL FINAMORE DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(29) KATHLEEN ANDERSON DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(30) CATHLEEN BROCKMEYER DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(31) DOUGLAS M. GODINE, JR. DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(32) TODD GUSTIN DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(33) JESSICA HIEBLER TREASURER-BALTIMORE	1.00	X		X				0.	0.	0.
(34) LAURIE JONES DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(35) HEATHER KLINK DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(36) MIKE MCSALLY DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(37) JOSEPH J. MOLYNEAUX DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(38) DAN T. MURTAUGH DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(39) JACLYN PAVALEC-CEESAY DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(40) LISA M. STRONG DIRECTOR-BALTIMORE	1.00	X						0.	0.	0.
(41) RICHARD ZINK SECRETARY-BALTIMORE	1.00	X		X				0.	0.	0.
(42) MELISSA GRAND CHAIR-BATON ROUGE	1.00	X		X				0.	0.	0.
(43) SHAWN USHER SECRETARY-BATON ROUGE	1.00	X		X				0.	0.	0.
(44) MARVIN BORGMEYER DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(45) THOMAS CLEMONS DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(46) CANDACE COLLINS DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) DONNA COLLINS-LEWIS DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(48) TOM ELDRINGHOFF DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(49) LARRY GALLOWAY DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(50) RYAN ISTRE DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(51) BEN LAZARE DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(52) CANDACE LEBLANC DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(53) RON MOREAU DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(54) MEGHAN PARRISH DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(55) FREDDIE PITCHER DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(56) CARL REDMAN DIRECTOR-BATON ROUGE	1.00	X						0.	0.	0.
(57) DAVID W. CONWAY CHAIRMAN-CINCINNATI	1.00	X		X				0.	0.	0.
(58) ANTHONY L. LONGI, JR. VICE CHAIR-CINCINNATI	1.00	X		X				0.	0.	0.
(59) LAURA CONNELLY TREASURER/SECRETARY-CINCINNATI	1.00	X		X				0.	0.	0.
(60) EVAN ANDREWS DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(61) STEVEN ARNOLD DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(62) MICHAEL BAIN DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(63) JEFFREY E. BECKHAM DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(64) MARK C. BISSINGER DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(65) JEFFREY BLACKWELL DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(66) GARY T. BORCHERS DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) SUSAN G. BRANSCOME DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(68) PATRICK BURKE DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(69) MICHAEL CALLOWAY DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(70) MICHAEL CAUDILL DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(71) MIKE CINQUE DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(72) CHARLES H. DEITSCHEL DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(73) KEVIN DONOVAN DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(74) GINA A. DUBELL-SMITH DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(75) JOHN HART DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(76) ANDREW HAWKING DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(77) KEVIN J. KELLY DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(78) BEVERLY MACK DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(79) SUKANYA R. MADLINGER DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(80) WALT MCBRIDE DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(81) GEORGE MEYERS DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(82) RALPH NARDINI DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(83) LANCE PARSONS DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(84) JAMES R. POSTON, JR. DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(85) BETSY ROSS DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(86) LAKSHMI SAMMARCO DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(87) THOMAS J. SCHAEFER DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(88) THEODORE L. SCHWARTZ DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(89) PAUL M. SWANSON DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(90) BRAD R. WENSTRUP DIRECTOR-CINCINNATI	1.00	X						0.	0.	0.
(91) ANN RICE CHAIRMAN-COLORADO	1.00	X		X				0.	0.	0.
(92) MARK KINIRY VICE CHAIR-COLORADO	1.00	X		X				0.	0.	0.
(93) ROB CROSBY TREASURER-COLORADO	1.00	X		X				0.	0.	0.
(94) PHIL STEELE SECRETARY-COLORADO	1.00	X		X				0.	0.	0.
(95) SUSAN BAILEY DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(96) SCOTT CROMIE DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(97) MARSHA FALLINE DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(98) ROBERT FANTE DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(99) TOM KANE DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(100) POLLY LESTIKOW DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(101) CONOR MCCALLIN DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(102) ROBERT STRAUSS DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(103) ADAM TRUITT DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(104) MARTIN WALSH DIRECTOR-COLORADO	1.00	X						0.	0.	0.
(105) LINDA V. PARKER CHAIRMAN-DETROIT	1.00	X		X				0.	0.	0.
(106) KERRIE BINNO DIRECTOR-DETROIT	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(107) MAUREEN MARA BROWN DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(108) JO COLEMAN DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(109) SCOTT CRANE DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(110) KEVIN KALCZYNSKI DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(111) DANIEL LAIBLE DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(112) ALICIA M. ROBERTS DIRECTOR-DETROIT	1.00	X						0.	0.	0.
(113) STEPHEN V. KING CHAIRMAN-ILLINOIS	1.00	X		X				0.	0.	0.
(114) DAVID GIBSON VICE CHAIR-ILLINOIS	1.00	X		X				0.	0.	0.
(115) BRIAN CRABB TREASURER-ILLINOIS	1.00	X		X				0.	0.	0.
(116) STELLA BOYLE SECRETARY-ILLINOIS	1.00	X		X				0.	0.	0.
(117) MICHAEL HAGEN DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(118) JAMIE BAISLEY, JR. DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(119) JASON BERNE DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(120) MICHAEL C. BRENNAN DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(121) DAVID BRYLA DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(122) DANIEL CAGNEY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(123) MELISSA T. CLARY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(124) JOHN J. FOLEY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(125) RYAN E. FREEL DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(126) JENNIFER GALLAGHER DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(127) MARY ANN HARVEY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(128) JEFFREY D. HUNTINGTON DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(129) MICHAEL P. KAILUS DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(130) JOHN M. LAFFERTY, JR. DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(131) PETER LEE DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(132) KEVIN MAY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(133) MARK E. MCNABOLA DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(134) THOMAS MOREHEAD DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(135) HENRY J. MUNEZ DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(136) DANIEL J. O'DONOVAN DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(137) DIANNE O'DONOVAN DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(138) JENNIFER DOWNS O'SHAUGHNESSY DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(139) CYRUS OELERICH DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(140) DAWN OVEREND DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(141) MARY MARGARET PACHUCKI DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(142) JOHN PERKAUS DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(143) MARK PUCCIO DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(144) TIMOTHY REYNOLDS DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(145) GARRETT RYAN DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(146) DEVIN K. SCHAFFER DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(147) LISA M. SEYMOUR DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(148) MATTHEW FORD SMITH DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(149) PETER M. SPINGOLA DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(150) CHRISTOPHER TARZON DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(151) RUDOLPH TREBELS DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(152) LISA FAREMOUTH WEBER DIRECTOR-ILLINOIS	1.00	X						0.	0.	0.
(153) RUSS KOCA CHAIRMAN-KANSAS CITY	1.00	X		X				0.	0.	0.
(154) PAUL DAMON VICE CHAIR-KANSAS CITY	1.00	X		X				0.	0.	0.
(155) BOB BEHNER SECRETARY-KANSAS CITY	1.00	X		X				0.	0.	0.
(156) MICHAEL J. CALLAHAN DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(157) MARIANNE DAMON DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(158) JORGE ECHAVE DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(159) TOM FREEMAN DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(160) GREGORY HARKNESS DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(161) MELISSA HENDRICKS DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(162) DAN HOGAN DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(163) HOWARD MAYER DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(164) RICHARD W. MILLER DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(165) MICHELE RITCHEY DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(166) ALLISON K. SCHORGL DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(167) BRIAN WEIFORD DIRECTOR-KANSAS CITY	1.00	X						0.	0.	0.
(168) THOMAS R. EBY, JR. CHAIRMAN-NE OHIO	1.00	X		X				0.	0.	0.
(169) MARIA O'NEIL RUDDOCK VICE CHAIR-NE OHIO	1.00	X		X				0.	0.	0.
(170) EDWARD T. MARSHALL TREASURER-NE OHIO	1.00	X		X				0.	0.	0.
(171) NANCY C. BENACCI SECRETARY-NE OHIO	1.00	X		X				0.	0.	0.
(172) ANN COAKLEY ANDERSON DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(173) ALICE ARMSTRONG DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(174) KRISTEN BAIRD-ADAMS DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(175) DOUGLAS E. BELL DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(176) MICHAEL M. BOESCHENSTEIN DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(177) JIM BROWN, JR. DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(178) MARCIA FLOYD DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(179) HOWARD HANNA IV DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(180) MICHAEL HAUGHT DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(181) ROBERT E. HETZEL, JR. DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(182) JOHN L. HINDS DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(183) MICHAEL J. MERRIMAN DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(184) ANDREW W. MOOCK DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(185) RAYMOND M. MURPHY DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(186) WILLIAM MURPHY DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(187) HUGH O'NEILL IV DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(188) EDWARD PLASPOHL DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(189) TODD STEPHENSON DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(190) DOUGLAS E. WELLS DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(191) JOHN V. WHITE DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(192) BETH YATES DIRECTOR-NE OHIO	1.00	X						0.	0.	0.
(193) JOHN C. DUPLANTIER CHAIRMAN-NEW ORLEANS	1.00	X		X				0.	0.	0.
(194) JANIS VAN MEERVELD VICE CHAIR-NEW ORLEANS	1.00	X		X				0.	0.	0.
(195) GREG ROUCHELL SECRETARY-NEW ORLEANS	1.00	X		X				0.	0.	0.
(196) LEWIS J. DERBES TREASURER-NEW ORLEANS	1.00	X		X				0.	0.	0.
(197) BRIAN BERRIGAN DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(198) WILL Z. BIENVENU DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(199) JON A. BUISE DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(200) CHARLES COLA DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(201) TIM CRAGIN DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(202) KAREN S. DEBLIEUX DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(203) SALLY T. DUPLANTIER DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(204) BRETT P. FENASCI DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(205) RICHARD Q. FLICK DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(206) STEPHEN HANEMANN DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(207) JOHN HUMMEL DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(208) THOMAS M. KITCHEN DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(209) EDWARD J. KOEHL, JR. DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(210) HILLARY HURST LANDRY DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(211) RONALD P. MCCLAIN DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(212) STANTON MURRAY DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(213) RONALD H. PATRON DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(214) EUGENE PRIESTLY DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(215) ALVIN M. ROUCHELL DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(216) RICHARD E. TREUTING DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(217) CHRISCILDA TURLEY-NICOLAS DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(218) SUSIE ZERINGUE DIRECTOR-NEW ORLEANS	1.00	X						0.	0.	0.
(219) JOHN J. HALLERON, III CHAIRMAN-NEW YORK	1.00	X		X				0.	0.	0.
(220) MARY LANNING VICE CHAIR-NEW YORK	1.00	X		X				0.	0.	0.
(221) WALTER F. MODRYS TREASURER-NEW YORK	1.00	X		X				0.	0.	0.
(222) DONALD PRIVETT SECRETARY-NEW YORK	1.00	X		X				0.	0.	0.
(223) KEVIN CHARLTON DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(224) KEVIN CHAU DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(225) MOUHAMADOU DIOP DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(226) T. TROY DIXON DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(227) WILLIAM A. EAGAN III DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(228) DAVID GILDEA DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(229) ROBERT M. GRILLO DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(230) JOHN M. HACKNEY DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(231) DAVID HAMMER DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(232) KEVIN C. HASKELL DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(233) PATRICK O. HASKELL DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(234) WILLIAM HULT DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(235) FREDERICK C. JOHS DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(236) DAVID KALAJIAN DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(237) JAMES F. KEENAN DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(238) JOHN J. KING DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(239) PETER T. MALONEY DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(240) ROBERT MANCINI DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(241) JOHN K. MARA DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(242) JAY B. MARTIN DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(243) BERK NOWAK DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(244) RICHARD A.R. PINKHAM III DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(245) JACK E. PLYM DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(246) MICHAEL J. RICE DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(247) JOSEPH A. TARANTINO DIRECTOR-NEW YORK	1.00	X						0.	0.	0.
(248) MARK M. SHERWIN CHAIRMAN-PITTSBURGH	1.00	X		X				0.	0.	0.
(249) TRUDY WARD VICE CHAIR-PITTSBURGH	1.00	X		X				0.	0.	0.
(250) CHRISTINE M. CARMAZZI SECRETARY-PITTSBURGH	1.00	X		X				0.	0.	0.
(251) RONALD R. TISCH TREASURER-PITTSBURGH	1.00	X		X				0.	0.	0.
(252) JAY ADAMS DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(253) BONNIE BAGAY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(254) MARIA BERNIER DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(255) BRUCE CARLSON DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(256) PATRICK DALY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(257) COLLEEN DARRAGH DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(258) MEGAN DUFFY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(259) MICHAEL W. FEENEY, JR. DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(260) CHARLES I. FERRARA DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(261) F. DUFFY HANNA DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(262) LAURA HARTFORD DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(263) JOSEPH L. KELLEY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(264) JAN W. MADISON DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(265) ANTHONY L. MASTRO DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(266) JUDITH L. NOCITO DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(267) ROSANNE OBERLEITNER DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(268) MARY PELLEGRINO DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(269) PAUL R. PIGMAN, JR. DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(270) SUSANNE RIELLY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(271) DONNA MARIE TAHANEY DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(272) JOSEPH M. VARGO DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(273) ROSEMARY WELSH DIRECTOR-PITTSBURGH	1.00	X						0.	0.	0.
(274) ANDY DAECHER CHAIRMAN-SAN FRANCISCO	1.00	X		X				0.	0.	0.
(275) ALBERT S. BALDOCCHI DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(276) LUIS A. BELMONTE DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(277) NATHAN BARULICH DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(278) SCOTT PERTEL DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(279) MICHELLE M. FULL DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(280) MICHELLE LEWIS DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(281) MARTIN RESCH DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(282) TIMOTHY R. CONNER DIRECTOR-SAN FRANCISCO	1.00	X						0.	0.	0.
(283) JESSE BAGLEY CHAIRMAN-SO CALIFORNIA	1.00	X		X				0.	0.	0.
(284) MARK SCHECHTER VICE CHAIR-SO CALIFORNIA	1.00	X		X				0.	0.	0.
(285) DAMON BENNETT DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(286) CINDY CANNON DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(287) STEVE DERKASH DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(288) TED EMBRY DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(289) GARTH K. FLINT DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(290) HEIDI HALL DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(291) MARK C. JOHNSON DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(292) ROGER T. KIRWAN DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(293) DIANE LANNON DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(294) CAMERAN LINDEE DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(295) DOUGLAS M. MCCAULLEY DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(296) SANDRA L. MITCHELL DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(297) THERESA C. MORRISON DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(298) JAMES O'NEAL DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(299) ADAM PORTER DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(300) CHRISTOPHER PRIBUS DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(301) MITCHELL W. SHATZEN DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(302) KEITH WEBSTER DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(303) ROBIN K. YOSHIMURA DIRECTOR-SO CALIFORNIA	1.00	X						0.	0.	0.
(304) BERNARD P. SCHWEISS CHAIRMAN-ST. LOUIS	1.00	X		X				0.	0.	0.
(305) LISA A FLAVIN VICE CHAIR-ST. LOUIS	1.00	X		X				0.	0.	0.
(306) JEFF SCHREMP TREASURER-ST. LOUIS	1.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(307) EDWARD T. AUSTIN DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(308) MARK W. BATES DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(309) CATHERINE BEHNEN DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(310) MARK BRAWLEY DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(311) JACK L. CAHILL DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(312) JOSEPH P. CASTELLANO DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(313) RYAN S. DAVIS DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(314) DONALD F. GEDERS, JR. DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(315) DANIEL GENOVESE DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(316) KURT HEUMANN DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(317) RALPH HOULIHAN DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(318) EVERETT JOHNSON DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(319) ANGELIQUE JOSEPH DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(320) CHERYL MANLEY DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(321) BILL MANSFIELD DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(322) JAMES L MATHER DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(323) LUCY MITCHELL DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(324) RICH NEMANICK DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(325) R BRIAN POTTER DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
(326) H. DEAN VANDEKAMP DIRECTOR-ST. LOUIS	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(327) PAUL MINORINI DIRECTOR-VARIOUS AFFILIATES	1.00 40.00	X					0.	111,254.	15,470.	
(328) HOWARD MAYER FORMER EXEC DIR-KANSAS CITY	40.00	X		X			18,029.	0.	9,864.	
(329) TAMARA BOHANNON EXEC DIR-ARIZONA	40.00			X			81,016.	0.	3,938.	
(330) KRISTY NORBERT EXEC DIR-BALTIMORE	40.00			X			54,732.	0.	857.	
(331) ELIZABETH SARTORIUS EXEC DIR-BALTIMORE	40.00			X			21,250.	0.	0.	
(332) JOHN DANIELS EXEC DIR-BATON ROUGE	40.00			X			7,269.	0.	0.	
(333) DEBBIE BOWMAN EXEC DIR-CINCINNATI	40.00			X			100,000.	0.	3,628.	
(334) MARY FRANCES THARP EXEC DIR-COLORADO	40.00			X			71,193.	0.	10,082.	
(335) SUNEIL SINGH EXEC DIR-DETROIT	40.00			X			0.	0.	0.	
(336) JENNIFER SMITH FORMER EXEC DIR-DETROIT	40.00			X			61,022.	0.	5,298.	
(337) PETER BEALE DELVECCHIO EXEC DIR-ILLINOIS	40.00			X			115,000.	0.	13,766.	
(338) KIMBERLY HINES EXEC DIR-KANSAS CITY	40.00			X			40,000.	0.	0.	
(339) TIMOTHY GRADY EXEC DIR-NE OHIO	40.00			X			82,115.	0.	13,574.	
(340) CHARLES ROTH EXEC DIR-NEW ORLEANS	40.00			X			89,510.	0.	5,274.	
(341) BRADLEY ZERVAS EXEC DIR-NEW YORK	40.00			X			165,000.	0.	1,092.	
(342) GEORGE WIESE EXEC DIR-PITTSBURGH	40.00			X			77,178.	0.	13,545.	
(343) SUZANNE PALMER EXEC DIR-SAN FRANCISCO	40.00			X			79,033.	0.	5,278.	
(344) DIANE DICAPRO EXEC DIR-SO CALIFORNIA	40.00			X			85,000.	0.	4,857.	
(345) BRIAN HIPPI EXEC DIR-ST. LOUIS	40.00			X			74,381.	0.	13,468.	
Total to Part VII, Section A, line 1c							1,221,728.	111,254.	119,991.	

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	3,522,533.				
	d Related organizations	1d	65,000.				
	e Government grants (contributions)	1e	39,693.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,163,421.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			12,790,647.			
	Program Service Revenue	2 a	Business Code				
		b					
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		466,172.			466,172.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)			623,771.		623,771.
	8 a Gross income from fundraising events (not including \$ 3,522,533. of contributions reported on line 1c). See Part IV, line 18	a		1,570,372.			
		b Less: direct expenses	b	1,570,372.			
		c Net income or (loss) from fundraising events			0.		
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a MISCELLANEOUS	900099		97,741.			97,741.	
b PAYABLE FORGIVENESS	900099		21,460.			21,460.	
c IMPAIRMENT LOSS	900099		-111,882.			-111,882.	
d All other revenue							
e Total. Add lines 11a-11d			7,319.				
12 Total revenue. See instructions.			13,887,909.	0.	0.	1,097,262.	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	2,279,698.	2,279,698.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,456,027.	1,014,328.	223,523.	218,176.
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	5,188,599.	3,635,425.	765,660.	787,514.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	19,621.	12,754.	1,962.	4,905.
9 Other employee benefits	228,493.	175,138.	28,281.	25,074.
10 Payroll taxes	1,208,036.	815,233.	205,977.	186,826.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	47,080.	4,950.	30,150.	11,980.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1,089.			1,089.
f Investment management fees	48,211.		48,211.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	43,403.	30,756.	12,167.	480.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	1,139,706.	1,020,757.	71,228.	47,721.
17 Travel	33,531.	22,882.	10,649.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	39,804.	29,793.	438.	9,573.
20 Interest	19,139.	12,616.	6,523.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	585,560.	524,271.	58,995.	2,294.
23 Insurance	154,365.	109,629.	39,881.	4,855.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM ADMINISTRATION	762,786.	419,600.	235,026.	108,160.
b TRANSPORTATION	357,238.	356,184.	748.	306.
c NATIONAL ASSESSMENT	344,211.	231,691.	86,914.	25,606.
d BAD DEBT EXPENSE	7,907.		7,907.	
e All other expenses	89,424.	12,764.	33,524.	43,136.
25 Total functional expenses. Add lines 1 through 24e	14,053,928.	10,708,469.	1,867,764.	1,477,695.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	2,081,101.	1	3,016,583.	
	2 Savings and temporary cash investments	71,422.	2	0.	
	3 Pledges and grants receivable, net	2,911,897.	3	2,783,073.	
	4 Accounts receivable, net	259,924.	4	111,265.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	73,158.	9	46,352.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,954,988.			
	b Less: accumulated depreciation	10b 9,086,493.	10,832,781.	10c	10,868,495.
	11 Investments - publicly traded securities	15,208,703.	11		16,138,930.
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	27,505.	15		140,336.
16 Total assets. Add lines 1 through 15 (must equal line 34)	31,466,491.	16		33,105,034.	
Liabilities	17 Accounts payable and accrued expenses	1,591,708.	17		1,623,582.
	18 Grants payable		18		
	19 Deferred revenue	229,700.	19		120,237.
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties	1,068,311.	23		1,565,702.
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,325.	25		2,799.
	26 Total liabilities. Add lines 17 through 25	2,895,044.	26		3,312,320.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	20,726,396.	27		21,700,690.
	28 Temporarily restricted net assets	2,503,660.	28		2,996,559.
	29 Permanently restricted net assets	5,341,391.	29		5,095,465.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	28,571,447.	33		29,792,714.
34 Total liabilities and net assets/fund balances	31,466,491.	34		33,105,034.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,887,909.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,053,928.
3	Revenue less expenses. Subtract line 2 from line 1	3	-166,019.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,571,447.
5	Net unrealized gains (losses) on investments	5	1,379,966.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	7,320.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,792,714.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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 Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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		

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization **BOYS HOPE GIRLS HOPE** Employer identification number **43-1209928**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,513,204.	13,226,306.	10,065,853.	13,664,548.	12,790,647.	61,260,558.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11,513,204.	13,226,306.	10,065,853.	13,664,548.	12,790,647.	61,260,558.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						61,260,558.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	11,513,204.	13,226,306.	10,065,853.	13,664,548.	12,790,647.	61,260,558.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	361,964.	436,382.	401,435.	377,991.	466,172.	2,043,944.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,442,054.	1,809,014.	1,574,083.	1,703,310.	1,577,691.	8,106,152.
11 Total support. Add lines 7 through 10						71,410,654.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	85.79 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	95.79 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input checked="" type="checkbox"/>	
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶ <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2009 AMOUNT: \$ 124,351.

2010 AMOUNT: \$ 213,101.

2011 AMOUNT: \$ 90,024.

2012 AMOUNT: \$ 158,336.

2013 AMOUNT: \$ 97,741.

GROSS REVENUE FROM FUNDRAISING EVENTS

2009 AMOUNT: \$ 1,317,703.

2010 AMOUNT: \$ 1,595,913.

2011 AMOUNT: \$ 1,484,059.

2012 AMOUNT: \$ 1,544,974.

2013 AMOUNT: \$ 1,570,372.

FORGIVENESS OF PAYABLE

2013 AMOUNT: \$ 21,460.

LOSS ON IMPAIRMENT

2013 AMOUNT: \$ -111,882.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization BOYS HOPE GIRLS HOPE **Employer identification number** 43-1209928

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

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

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

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

Yes No

9 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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.

b 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) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,984,454.	7,368,164.	7,063,320.	6,723,932.	8,691,999.
b Contributions	923,400.	25,000.	3,000.		103,000.
c Net investment earnings, gains, and losses	879,855.	850,771.	470,453.	377,325.	350,625.
d Grants or scholarships					
e Other expenditures for facilities and programs	483,725.	259,481.	168,609.	37,937.	2,421,692.
f Administrative expenses					
g End of year balance	9,303,984.	7,984,454.	7,368,164.	7,063,320.	6,723,932.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 42.41 %
- b Permanent endowment 54.77 %
- c Temporarily restricted endowment 2.82 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

- (i) unrelated organizations
- (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,810,943.		1,810,943.
b Buildings		15,071,272.	9,086,493.	5,984,779.
c Leasehold improvements				
d Equipment		1,826,205.		1,826,205.
e Other		1,246,568.		1,246,568.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				10,868,495.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATION	2,799.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Total revenue and adjustments are listed.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Total expenses and adjustments are listed.

Part XIII Supplemental Information.

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

PART V, LINE 4:

ENDOWMENT FUNDS, INCOME ONLY IN THE CASE OF PERMANENT

ENDOWMENT FUNDS, ARE USED TO OFFSET OPERATIONAL EXPENSES OF AFFILIATES.

ENDOWMENTS ARE HELD BY INDIVIDUAL AFFILIATES AND USED TO OFFSET THEIR OWN EXPENSES.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

**Open To Public
Inspection**

Name of the organization **BOYS HOPE GIRLS HOPE** Employer identification number **43-1209928**

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. 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 solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2 a 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 services? **Yes** **No**

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 individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			

Total ▶

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.

Part II Fundraising Events. Complete if the organization answered "Yes" to 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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		AFFILIATE EVENTS	NONE	NONE	
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	5,092,905.			5,092,905.
	2 Less: Contributions	3,522,533.			3,522,533.
	3 Gross income (line 1 minus line 2)	1,570,372.			1,570,372.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,570,372.			1,570,372.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				1,570,372.
	11 Net income summary. Subtract line 10 from line 3, column (d)				0.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization operates gaming activities: _____
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity operated in:

13a		%
13b		%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17** Mandatory distributions:
 - a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**

OMB No. 1545-0047

2013

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Inspection**

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

Name of the organization

BOYS HOPE GIRLS HOPE

**Employer identification number
43-1209928**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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

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

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

Schedule I (Form 990) (2013)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
BHGH - ARIZONA	47	84,280.	0.		
BHGH - BALTIMORE	22	223,848.	0.		
BHGH - BATON ROUGE	7	19,389.	0.		
BHGH - GREATER CINCINNATI	33	68,866.	0.		
BHGH - COLORADO	37	49,817.	0.		

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

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
BHGH - MICHIGAN	20.	117,605.	0.		
BHGH - ILLINOIS	38.	189,479.	0.		
BHGH - KANSAS CITY	8.	31,659.	0.		
BHGH - NORTHEASTERN OHIO	24.	98,042.	0.		
BHGH - NEW ORLEANS	24.	129,307.	0.		
BHGH - NEW YORK	61.	803,279.	0.		
GIRLS HOPE - PITTSBURGH	24.	163,148.	0.		
BHGH - SAN FRANCISCO	18.	59,182.	0.		
BHGH - SOUTHERN CALIFORNIA	19.	66,761.	0.		

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
BHGH - ST LOUIS	62.	175,036.	0.		

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2013

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

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Department of the Treasury
Internal Revenue Service

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

Name of the organization

BOYS HOPE GIRLS HOPE

Employer identification number
43-1209928

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on 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	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" to line 6a or 6b, describe in Part III.		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2013

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRADLEY ZERVAS EXEC DIR-NEW YORK	(i)	165,000.	0.	0.	0.	1,092.	166,092.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Lined area for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 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

2013

Open to Public
Inspection

Name of the organization

BOYS HOPE GIRLS HOPE

Employer identification number

43-1209928

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PROGRAM PROVIDES HOUSING AND EDUCATIONAL ASSISTANCE FOR ABANDONED,
ABUSED AND NEGLECTED YOUTHS IN A FAMILY ENVIRONMENT WHICH ALLOWS THEM
TO MATURE AND SUCCEED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

12 ADDITIONAL AFFILIATES PROVIDING HOUSING AND EDUCATIONAL ASSISTANCE
FOR ABANDONED, ABUSED AND NEGLECTED YOUTH.

EXPENSES \$ 7,014,813. INCLUDING GRANTS OF \$ 1,111,904. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

THERE ARE BOARD MEMBERS OF VARIOUS AFFILIATES THAT HAVE FAMILY
RELATIONSHIPS WITH OTHER BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11:

THE FINANCE COMMITTEE CHAIRS ARE SENT A COPY OF THE IRS FORM
990 TO REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICTS ARE TO BE DISCLOSED AND DISCUSSED AS THEY ARISE.

FORM 990, PART VI, SECTION B, LINE 15A:

SALARIES OF TOP MANAGEMENT OFFICIALS AND OTHER EMPLOYEES ARE
TESTED FOR CONSISTENCY WITH SURVEY DATA FOR SIMILAR POSITIONS AND ARE
APPROVED AS PART OF THE BOARD'S APPROVAL OF THE ANNUAL BUDGET.

Name of the organization
BOYS HOPE GIRLS HOPE

Employer identification number
43-1209928

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Multiple horizontal lines for additional text entry.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

BOYS HOPE GIRLS HOPE

Employer identification number

43-1209928

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
BOYS HOPE GIRLS HOPE OF ARIZONA, INC. - 86-0630295, 3443 NORTH CENTRAL AVE, SUITE 713, PHOENIX, AZ 85012	HOUSING/EDUCATION	ARIZONA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF BALTIMORE - 52-2356443, 3700 NORTHERN PARKWAY, 2ND FLOOR, BALTIMORE, MD 21206	HOUSING/EDUCATION	MARYLAND	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF BATON ROUGE, INC. - 72-1441462, P.O. BOX 4414, BATON ROUGE, LA 70821	HOUSING/EDUCATION	LOUISIANA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF BATON ROUGE, FOUNDATION - 72-1441463, P.O. BOX 4414, BATON ROUGE, LA 70821	HOUSING/EDUCATION	LOUISIANA	501(C)(3)	LINE 7	N/A		X

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

Schedule R (Form 990) 2013

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
BOYS HOPE GIRLS HOPE OF GREATER CINCINNATI, INC. - 31-1054816, 1725 RIVERSIDE DRIVE, CINCINNATI, OH 45202	HOUSING/EDUCATION	OHIO	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF COLORADO, INC. - 84-1239769, 7060 E. HAMPDEN AVE, SUITE 203, DENVER, CO 80224	HOUSING/EDUCATION	COLORADO	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF MICHIGAN, INC. - 38-2536444, P.O. BOX 21085, DETROIT, MI 48221	HOUSING/EDUCATION	MICHIGAN	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF ILLINOIS, INC. - 51-0248353, 1100 N. LARAMIE AVE, WILMETTE, IL 60091	HOUSING/EDUCATION	ILLINOIS	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF KANSAS CITY - 43-1927487, 7930 STATELINE ROAD, SUITE 120, PRAIRIE VILLAGE, KS 66208	HOUSING/EDUCATION	KANSAS	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF NORTHEASTERN OHIO - 34-1534921, 9619 GARFIELD BLVD, GARFIELD HEIGHTS, OH 44125	HOUSING/EDUCATION	OHIO	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF GREATER NEW ORLEANS - 72-0905785, 4128 BAUDIN STREET, NEW ORLEANS, LA 70119	HOUSING/EDUCATION	LOUISIANA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF NEW YORK, INC. - 13-2990982, 367 CLERMONT AVENUE, BROOKLYN, NY 11238	HOUSING/EDUCATION	NEW YORK	501(C)(3)	LINE 7	N/A		X
GIRLS HOPE OF PITTSBURGH, INC. - 25-1625524 1005 BEAVER GRADE ROAD SUITE 103 CORAPOLIS, PA 15108	HOUSING/EDUCATION	PENNSYLVANIA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF SAN FRANCISCO, INC. - 91-2002481, P.O. BOX 347359, SAN FRANCISCO, CA 94134	HOUSING/EDUCATION	CALIFORNIA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF CALIFORNIA, INC. - 36-3734433, 1041 W. 18TH STREET, SUITE A101, COSTA MESA, CA 92627	HOUSING/EDUCATION	CALIFORNIA	501(C)(3)	LINE 7	N/A		X
BOYS HOPE GIRLS HOPE OF ST LOUIS, INC. - 43-1202596, 755 S. NEW BALLIS RD, ST LOUIS, MO 63141	HOUSING/EDUCATION	MISSOURI	501(C)(3)	LINE 7	N/A		X

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
BOYS HOPE GIRLS HOPE - 51-0182614 12120 BRIDGETON SQUARE DR BRIDGETON, MO 63044	EDUCATION	MISSOURI	501(C)(3)	LINE 7	N/A		X

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

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

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

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

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

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

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

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

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)			
(2)			
(3)			
(4)			
(5)			
(6)			

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.

(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 section 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

