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Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Unspection

a Gross revenue (not including \$	Α	For th	ne 2009 ca	lendar	year, or tax year l	oeginning	4/01	, 2009	, and ending	3/31			010
Least Service   Least Servic	В	Check i	f applicable		С						D Emplo	yer identi	fication number
Termination   Part of the complete   Section		Address	s change	Please	Texas Counc	cil for t	he Social	Studies			23-	.73272	296
Training training   Section   Sect		Name o	change	label or							E Teleph	none numb	per
Termination   Program		Initial re	eturn	type							291	-137	-3580
**Section 501(c/3) organizations and 4947(a/t) nonexempt charitable trusts which a completed Schedule A (Form 590 or 590-E2).    Website: N/A   Tax exempt telate (stek only one) -		Termina	ation	Specific							201	. 437	3300
**Section 501(c/3) organizations and 4947(a/1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-E2).    Website: N/A		Amende	ed return										ption
Website: N   X   Nebsite: N   X   Nebs	1	Applica	ition pending										
Website: N/A   Solicy   Soli		•	Section 5	501(c)(3 Just atta	) organizations and organizations and organizations and organizations and organizations are arranged to the complete of the co	nd 4947(a)(1) Schedule Å (F	nonexempt cha orm 990 or 990	aritable trusts -EZ).	G A	_		X Ca	ash Accrual
Website: N/A   Tare-seminal status Chekk only one)					· · · · · · · · · · · · · · · · · · ·					heck ►	X If the	organi	zation is <b>not</b>
Check   1   1   1   1   1   1   1   1   1	ı	Webs	site: ► N	I/A		-			r	equired to	attach S		
Check	1	Tax-ex	emnt status	s (check o	nly one) - X 501	(c) (3) <del>\</del>	(insert no )	4947(a)(1) or	527	90-EZ, or	990-PF)		
Add Junes Sh. 6s. and 7b. to line 9 to determine gross receipts, if \$500,000 or more, file Form 990   139, 759.     Partilizizi   Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)   1   2   30.     Contributions, gifts, grants, and similar amounts received   2   72, 305.     Add Junes Sh. 6s. and 7b. to line 9   1   30.   2   70.   30.     Contributions, gifts, grants, and similar amounts received   2   72, 305.     A linvestment income   3   3   19, 928.     A linvestment income   3   30, 708.   4   4, 208.     B a Gross amount from sale of assets other than inventory   5 a   30, 708.   4   4, 208.     B a Gross amount from sale of assets other than inventory   5 a   30, 708.   4   4, 208.     C a Gross amount from sale of assets other manyethry (Subtract in 5b from in 5a)   See Statement   5 c   -3, 701.     C Special events and activates (complete applicable parts of Schedule () if any amount is from gaming, check here   6 c   6 c   7 a   7 a   7 b   7 a   7 b   7 a   7 b   7 a   7 b   7 a   7 b   7 a   7 b	ĸ							organization	and its gross	receipts a	are norma	ally not	more than
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instructions for Part I   1   30   2   2   72   305   3   2   7   2   305   3   4   1   3   3   1   9   9   2   4   4   4   4   4   4   4   4   4		\$25,0	00 A Form	1 990-EZ	' o'r Form 990 retur	n is not require	ed, but if the orga	anization choos	ses to file a re	turn, be sur	e to file a	comple	te return
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instructions for Part I   1   30   2   2   72   305   3   2   7   2   305   3   4   1   3   3   1   9   9   2   4   4   4   4   4   4   4   4   4	L	Add I	ines 5b. 6	b. and	7b. to line 9 to de	termine aross	receipts, if \$50	00,000 or more	e, file Form 9	90 .			
1   Contributions, girts, grants, and similar amounts received   2   72,305.     2   Program service revenue including government fees and contracts   3   19,928.     3   Membership dues and assessments   4   4,208.     5   Gross amount from sale of assets other than inventory   5   30,708.     5   Signoss amount from sale of assets other than inventory   5   30,708.     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Special events and activates (complete applicable parts of Schedule 6) If any amount is from gaming, check here   5     6   Gross profit or (loss) from special events and activates (Subtract line 7b from line 6a)   7     7   Gross sales of inventory, less returns and allowances   7     8   Other revenue (describe   See Statement 2   9   105,350.     9   Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8   12,580.     10   Grants and similar amounts paid (attach schedule)   See Statement 3   10   3,473.     12 - Salanes, Sither compensation, and employee benefits   12   12   12   13   14   14   15     13   Professional fees and other payments to independent contractors   13   14   14   14   15   15   16   144,315.     17   Total expenses. Add lines 1 of through 16   16   144,315.   16   144,315.     18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   42,438.     18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   42,438.     19   Note assets or fund balances at end of year (Combine		ınstea	ad of Form	n 990-E.	Z						<u> </u>	\$	
2   Program service revenue including government fees and contracts   2   72,305.   3   19,928.   4   4,208.   5   30,708.   4   4,208.   5   5   30,708.   4   4,208.   5   5   30,708.   5   5   34,409.   5   5   34,409.   5   5   34,409.   5   5   34,409.   5   5   34,409.   5   5   34,409.   5   5   34,409.   5   5   5   34,409.   5   5   5   34,409.   5   5   5   5   34,409.   5   5   5   5   5   5   5   5   5	P	artil 🎘	Reve	enue,	Expenses, and	l Changes	in Net Asset	s or Fund	Balances (	See the	ınstruc	tions f	
3 Membership dues and assessments 4 Investment income 5 Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 5b from in 5a) See Statement 1 5 c -3,701.  6 Special events and activities (complete applicable parts of Schedule 6) If any amount is from gaming, check here a Gross revenue (not including \$ a Gross revenue (not including \$ b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7 a Gross sales of inventory. [sess returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe * See Statement 2 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (seasches * See Statement 4 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 4-42, 438. 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 20 Net assets or fund balances at end of year Combine lines 18 through 20 21 124, 377. 22 Land and buildings 24 Other assets (describe * ) 25 Total assets 26 Total lassets 27 Total assets 28 166,814, 27 124, 377. 29 Net assets or fund balances (line 27 of column (B) must agree with line 21) 21 16		1	Contribut	ions, gi	fts, grants, and si	milar amount	s received					1	
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11   Benefits paid to or for members   12   Salaries, other compensation, and employee benefits   12   Salaries, other compensation, and employee benefits   13   Professional fees and other payments to independent contractors   14   Occupancy, rent, utilities, and maintenance   15   15   15   15   15   15   15   1		+							See State	ment 3			
12   Salaries, other compensation, and employee benefits   13   Professional fees and other payments to independent contractors   14   Occupancy, rent, utilities, and maintenance   15   Printing, publications, postage, and shipping   16   Other expenses (describe   See Statement 4   17   Total expenses. Add lines 10 through 16   OGDEN. UT   16   144,315.   16   144,315.   17   147,788.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   -42,438.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   166,814.   20   21   124,376.   20   21   224,376.   21   224,376.   22   23   24   24   24   25   24   25   24   27   27   28   29   29   29   29   20   20   20   20		ı			•	attach school	, ,	DE		<u></u>	<del>-</del>		· ·
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15   16   144, 315.   16   17   18   18   18   18   18   18   19   18   19   19	Ň	14	Occupan	cv rent	utilities and ma	intenance	crident contract	ΫΫΙ ΝΩ	/ 9 9 2010	181	· · · · · · · · · · · · · · · · · · ·		
16 Other expenses (describe ► See Statement 4  17 Total expenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9)  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  20 Other changes in net assets or fund balances (attach explanation).  21 Net assets or fund balances at end of year Combine lines 18 through 20  Partitle Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II)  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe ►  25 Total assets  26 Total liabilities (describe ►  27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  16 144,315.  17 147,788.  18 Excess or (deficit) for the year (Subtract line 17 from line 9)  18 -42,438.  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year line 20)  20 □  21 124,376.  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe ►  25 Total assets  26 Total liabilities (describe ►  27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  28 Deficit (A) Beginning of year (B) End of year line 21, 22 line 24, 377.  29 Deficit (A) Beginning of year (B) End of year line 21, 22 line 24, 377.  20 Deficit (A) Beginning of year (B) End of year line 21, 25 line 24, 377.  20 Deficit (A) Beginning of year (B) End of year line 21, 25 line 24, 377.  20 Deficit (A) Beginning of year (B) End of year line 21, 25 line 24, 377.  20 Deficit (A) Beginning of year (B) End of year line 21, 25 line 24, 377.  21 Deficit (A) Beginning of year line 21, 25 line 24, 377.  22 Deficit (A) Beginning of year line 21, 25 line 24, 377.  23 Land and buildings line 21, 25 line 24, 377.  24 Deficit (A) Beginning of year line 25, 25 line 24, 377.  25 Deficit (A) Beginning of year line 25, 25 line 24, 377.  26 D	Ĕ	15	Printing	nublica	tions postage ar	d shinning		四  MO /	7 2 3 ZUIU	ကြ	<b></b>		
17 Total expenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9)  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  20 Other changes in net assets or fund balances (attach explanation)  21 Net assets or fund balances at end of year Combine lines 18 through 20  Partitle Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II)  (A) Beginning of year (B) End of year Cother assets (describe ►  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe ►  25 Total assets  166,814. 25 124,377.  26 Total liabilities (describe ►  27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  166,814. 27 124,377.	S		J,		. ,			<u> </u>					144 315
18 Excess or (deficit) for the year (Subtract line 17 from line 9)  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  20 Other changes in net assets or fund balances (attach explanation)  21 Net assets or fund balances at end of year Combine lines 18 through 20  Partitle Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II)  (A) Beginning of year (B) End of year  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe )  25 Total assets  Total liabilities (describe )  Net assets or fund balances (line 27 of column (B) must agree with line 21)  166,814. 27 124,377.								<del>l OG</del> F	<del>)FN H</del>	<del>T  </del>			
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20 Other changes in net assets or fund balances (attach explanation).   20   21   124, 376.     21 Partill   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)   (A) Beginning of year   (B) End of year     22 Cash, savings, and investments   166, 814.   22   124, 377.     23 Land and buildings   23   24     24 Other assets (describe   )   24     25 Total assets   166, 814.   25   124, 377.     26 Total liabilities (describe   )   0. 26   0.     27 Net assets or fund balances (line 27 of column (B) must agree with line 21)   166, 814.   27   124, 377.     28	_						7 from line 9)		- 1 T 4 - 1 T 4				
figure reported on prior year's return)  Other changes in net assets or fund balances (attach explanation).  Net assets or fund balances at end of year Combine lines 18 through 20  Partill  Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ  (See the instructions for Part II)  Cash, savings, and investments  Land and buildings  Other assets (describe  Other assets (describe  Total assets  Total liabilities (describe  Net assets or fund balances (line 27 of column (B) must agree with line 21)  166,814. 27  19 166,814.  20  21 124,376.  (A) Beginning of year  (B) End of year  166,814. 22  124,377.  166,814. 25  124,377.  166,814. 27  124,377.				•			•		(				12, 150.
See the instructions for Part II   See the instruction for Part II   See the instruction for Part II   See the instruction for Part II   See the instructi	Ņ	SI 19	Net asse	ts or tui	nd balances at be on prior vear's refi	ginning of yea	ar (from line 27	, column (A))	(must agree	with end-o	. ,		166 814
See the instructions for Part II   See the instruction for Part II   See the instruction for Part II   See the instruction for Part II   See the instructi	Ť	E 20				•	attach evolanat	ion)			-		100/014.
Raince Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ    (See the instructions for Part II)		s -											124 376
(See the instructions for Part II )  22 Cash, savings, and investments  23 Land and buildings  24 Other assets (describe ▶ )  25 Total assets  26 Total liabilities (describe ▶ )  27 Net assets or fund balances (line 27 of column (B) must agree with line 21)  (A) Beginning of year  (B) End of y	D.								O or more fu	lo Form 00			
22 Cash, savings, and investments       166,814. 22       124,377.         23 Land and buildings       23         24 Other assets (describe ►       )       24         25 Total assets       166,814. 25       124,377.         26 Total liabilities (describe ►       )       0. 26       0.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       166,814. 27       124,377.	* I a.	antini	er Daie	11100 0				are \$1,250,00					
23       24         24 Other assets (describe ► )       24         25 Total assets       166,814.25       124,377.         26 Total liabilities (describe ► )       0.26       0.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       166,814.27       124,377.	2	<b>2</b> ∩≥	sh saving	ıs andı	•	ractions for f	uncin j		<del>-\2</del>				
24       Other assets (describe ►)       24         25 Total assets       166,814.25       124,377.         26 Total liabilities (describe ►)       0.26       0.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       166,814.27       124,377.	_		, ,						<del> </del>	100	<del></del>	-	
25 Total assets       166,814.25       124,377.         26 Total liabilities (describe ► )       0.26       0.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       166,814.27       124,377.				-	he ►		`		<del> </del>				
26 Total liabilities (describe ►)       0. 26       0.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       166,814. 27       124,377.						<del></del>	,		<del> </del>	166			124 377
<b>27 Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) 166, 814. <b>27</b> 124, 377.					cribe >			)	<del> </del>	100			
						of column (R)	must acree wi	_/ th line 21)		166			
	_										, 017.		orm <b>990-EZ</b> (2009)

Form 990-EZ (2009) Texas Council f	or the Social Stud	ies	23	-732	7296 Page <b>2</b>
Part III Statement of Program Se					Expenses
What is the organization's primary exempt purpose? FU	IRTHER EDUCATION IN	SOCIAL STUDIES	S IN TEXAS	(Reg	uired for section c)(3) and (4)
Describe what was achieved in carrying out the	ne organization's exempt pure	oses in a clear and co	ncise manner.	orgai	(4) Dizations and section
Describe what was achieved in carrying out the describe the services provided, the number of	f persons benefited, or other	relevant information for	each	4947	nîżátions ànd section (a)(1) trusts, optional
program title				for o	thérs')
28 ANNUAL CONFERENCE AND OTH					_
STATE MANDATED GUIDELEIN	ES, CLASSROOM STRAT	EGIES & PRACTION	CES TO		
FURTHER SOCIAL STUDIES					
	nis amount includes foreign gr	ants check here		28 a	80,549.
			Cabiner	200	00,347.
29 3,000 COPIES OF THE SOCIA					
EVERY 4 MONTHS TO DISSEM	INATE INFORMATION E	SENEFICIAL TO SO	OCTAT		
STUDIES TEACHERS.					
(Grants \$ ) If the	nis amount includes foreign gi	rants, check here	▶	29 a	29,010.
30 MAINTAIN WEB PAGE TO INFO			Y		
DEVELOPMENTS		<u> </u>	=		
DEAFTOLMENTS				'	
7,7	<del></del>	,,,			4 627
	nis amount includes foreign gi	rants, check here		30 a	4,677.
31 Other program services (attach schedul	<sup>e)</sup> See Statement 5		. —		
	nis amount includes foreign gi	rants, check here	<b>-</b>	31 a	3,473.
32 Total program service expenses (add I	ines 28a through 31a)		<u> </u>	32	117,709.
Part IV List of Officers, Directors	, Trustees, and Key Em	ployees. List each on	ie even if not com	pensa	ated (See the instrs.)
	(b) Title and average hours		(d) Contributions	to	(e) Expense account
(a) Name and address	per week devoted	not paid, enter -0)	employee benefit plar	ns and	and other allowances
	to position		deferred compensa		
JUDY BRODIGAN	President	0.		0.	0.
C/O_TCSS P. O. BOX 35761	5.00				
HOUSTON, TX 77235	7				
NANCY HESTER	President Elect	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00			٠.	0.
	3.00				
HOUSTON, TX 77235					**********
AMY THIBAUD	Past President	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00				
HOUSTON, TX 77235	]				
DR NED MOSS	Treasurer	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00			٠.	0.
	3.00				
HOUSTON, TX 77235	<del> </del>				
ROBIN SALEO	Recording Sec.	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00				
HOUSTON, TX 77235	1				
KATHY UHLICH	Vice President	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00		,		<b>.</b>
HOUSTON,	-				
	<del> </del>				
SUSAN_LOCKLEAR_	Parliamentarian			0.	0.
C/O TCSS P. O. BOX 35761	5.00				
HOUSTON, TX 77235					
STEPHEN JOHNSON	Executive Sec.	0.		0.	0.
C/O TCSS P. O. BOX 35761	5.00				• •
HOUSTON, TX 77235	-				
HOUSTON, IX 77233					<del></del>
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Form	990-EZ (2009) Texas Council for the Social Studies 23-732729	6	P	age 3
Par		ateme	nt	6
<u> </u>	· ·		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		Х
34	1 2 KM Latter and against the absence	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and proxy tax requirements?  If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 a		X
	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the	20		v
37 a	year? If 'Yes,' complete applicable parts of Schedule N  a Enter amount of political expenditures, direct or indirect, as described in the instructions  137a  0.	36		X
	Did the organization file Form 1120-POL for this year?	37 b	ŭ.	X
38 a	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X
ŀ	of If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations Enter		32 t	
	a Initiation fees and capital contributions included on line 9		j.	7 場
	Gross receipts, included on line 9, for public use of club facilities  N/A		is.	
	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under	1	3	74.4
700	section 4911 ► 0., section 4912 ► 0., section 4955 ►0_		*	
	Section 4911 - 0., Section 4512 - 0.		<u> </u>	
١	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		X
•	c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		,	33
(	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	**************************************		6
•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
	List the states with which a copy of this return is filed None			
42:	a The organization's books are in care of ► Dr. Ned Moss & A J Donahue, PC Telephone no ► 281-4 Located at ► 3911 West Valley Dr. Missouri City Tx ZIP+4 ► 77459	<u>37-3</u>	5 <u>80</u>	
ı	<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If 'Yes,' enter the name of the foreign country.	ļ. ` l		1:34
		1 32		-33
		1	ř' -	3,7
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts.	¥.	,	1
	c At any time during the calendar year, did the organization maintain an office outside of the US?	42 c		X
		72.0	-	
	If 'Yes,' enter the name of the foreign country.			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	I	▶ [7]	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
			Yes	No
4.4	Did the expensation mountain any denot advised 6 and 2 16 West Farm 000 as at he consisted and			
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		x
		<del></del>		<u> </u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		x
BAA		rm <b>990</b>	EZ (	

23-7327296 Form 990-EZ (2009) Texas Council for the Social Studies Page 4 Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51. Yes No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 46 Х X Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 48 Х Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Χ 49a Did the organization make any transfers to an exempt non-charitable related organization? 49 a 49 b b If 'Yes,' was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None' (d) Contributions to employee benefit plans and deferred compensation (e) Expense account and other allowances (b) Title and average (c) Compensation (a) Name and address of each employee paid more than \$100,000 hours per week devoted to position None f Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation None d Total number of other independent contractors each receiving over \$100,000 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 Signature Here IREASURER. Type or print name and title Preparer's Identifying Number (See instructions) Check if **Paid** Preparer's signature

P.C

3730 Kirby Drive Suite 1200

Donahue

Houston, TX 77098

May the IRS discuss this return with the preparer shown above? See instructions

Pre-

Use

Only

BAA

parer's

Firm's name (or yours if self employed), address, and ZIP + 4

employed

Phone no 🕨

EIN

76-0203943

(713) 789-4040

►X Yes

No

Form 990-EZ (2009)

## SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number Texas Council for the Social Studies Treasurer Dr. Ned Moss 23-7327296 attn:

aru	. 1	Reason for Put	nic Charley Statu	s (All Organizations	must c	Julipie	te tilis	part.)	Jee 11	13ti ucti	0113		
ne o	rga	nization is not a priv	ate foundation becau	se it is (For lines 1 throi	ugh 11,	check o	nly one	box )					
1		A church, convention	n of churches or asso	ociation of churches desc	ribed in	section	170(b)(	(1)(A)(i)	•				
2	Н	A school described	in section 170(b)(1)(A	A)(ii). (Attach Schedule E	Ξ)								
3	Н			e organization described		on 170(t	X1XAXi	iii).					
4	Н			d in conjunction with a h					0/bY1YA	Wiii). En	ter the hos	nital's	
•	ш		,	a in conjunction with a re	ospitai c	icaci ibc	a 500		-(- <u>)</u> (-),	.,,(,		,p.r.u.	•
5		name, city, and stated An organization open 170(b)(1)(A)(iv). (C	erated for the benefit	of a college or university	owned	or opera	ated by	a gover	nmental	unit des	scribed in s	ection	n
6 7		An organization tha	local government or on the common transfer or on the common transfer or on the complete of the	governmental unit descrit substantial part of its su art II)	pport fro	ection 1 om a go	<b>70(b)(1)</b> vernmer	(A)(v). ntal uni	t or from	the ger	neral public	desci	rıbed
8		A community trust of	described in <b>section</b> 1	1 <b>70(b)(1)(A)(vi).</b> (Complet	e Part I	l)							
9	X	from activities related investment income	t to its exempt function	more than 33-1/3 % of its s is – subject to certain exce iss taxable income (less complete Part III)	entions, a	and (2) n	o more t	han 33-	1/3 % of	its suppo	ort from ares	SS	ıfter
10		An organization org	anized and operated	exclusively to test for pu	blic safe	ety See	section	509(a)	(4).				
17		more publicly suppo	orted organizations d	exclusively for the benef lescribed in section 509(a zation and complete lines	a)(1) or ·	section !	509(a)(2	ctions ( 2) See	of, or car <b>section</b>	ry out th <b>509(a)(3</b> )	ne purpose ). Check th	s of or ne box	ne or that
		a Type I	<b>b</b> Type II	c ☐ Type III	– Fund	tionally	integrat	ed		d 🗍	Type III-	Other	
е		By checking this bo than foundation ma 509(a)(2)	x, I certify that the or nagers and other tha	ganization is not controll n one or more publicly si	ed direc	tly or in I organi	directly zations (	by one describe	or more ed in sec	disquali ction 509	fied perso (a)(1) or s	ns oth ection	ner
f			received a written det	ermination from the IRS	that is a	Type I,	Type II	or Typ	e III sup	porting (	organizatio	٦,	
g		Since August 17, 20	006, has the organiza	ition accepted any gift of	r contrib	ution fro	om any o	of the fo	ollowing	persons	7		
												Yes	No
		below, the go	verning body of the s	controls, either alone or tupported organization?	together	with pe	rsons de	escribed	ın (ıı) a	and (III)	11 g (i)		
		(ii) a family mem	ber of a person desc	cribed in (i) above?							11 g (ii)		
		(iii) a 35% control	lled entity of a persor	n described in (i) or (ii) al	oove?						11 g (iii)		
h		Provide the following	ng information about t	the supported organization	ns								
	(	i) Name of Supported Organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	s the ion in col i in your rning ment?	(v) Did y the organ col ( your su	ization in	(vi) le organizati (i) organiz U S	on in col	(vii) Amour	t of Sup	port
					Yes	No	Yes	No	Yes	No			
				-									
			·············		1								
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Texas Council for the Social Studies 23-7327296

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.)

Sect	tion A. Public Support	od the ben en inte						
Caler	ndar year (or fiscal year nning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.							
4	Total. Add lines 1-through 3			W	\.i\	y 5		
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	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support	1			· · · · · · · · · · · · · · · · · · ·		<del></del>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4							
. 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	vities, etc. (see in:	structions)			12		
	First five years. If the Form 990 organization, check this box and	l stop here		nd, third, fourth,	or fifth tax year a	s a section 501(c	)(3)	
Sec	tion C. Computation of Pu						<del></del>	
14	Public support percentage for 20	, ,	• • • • • • • • • • • • • • • • • • • •	ne 11, column (f)		14	<u>%</u>	
15	Public support percentage from					15	%%	
16 a	16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization							
t	b 33-1/3 support test — 2008. 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							
17 a	17a 10%-facts-and-circumstances test — 2009 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.							
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the 'facts-and-circumstances'	and-circumstance test The organi	s' test, check this zation qualifies as	box and <b>stop he</b> s a publicly suppo	<b>re.</b> Explain in Pai orted organization	rt IV how the	
18	Private foundation. If the organ	ization did not che	eck a box on line,	13, 16a, 16b, 17a				
BAA					Sc	hedule A (Form 9	990 or 990-EZ) 2009	

Page 3

Schedule A (Form 990 or 990-EZ) 2009 Texas Council for the Social Studies

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)

Sect	ion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	28,092.	23,190.	23,660.	20,178.	19,928.	115,048.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt	89,549.	121,932.	150,105.	72,858.	73, 205.	507,649.
3	purpose Gross receipts from activities that are not an unrelated trade or business under section 513	03,343.	121, 932.	130,103.	12,030.	73,203.	0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						_0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
7 a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified	117,641.	145,122.	173,765. 0.	93,036.	93,133.	622,697.
	persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line		**		<b>34</b> 4		
	7c from line 6.)	1000			- Torres	AND AT / YEAR OR A	622,697.
	tion B. Total Support	1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Seat 1 - Marian day		I more than the second		
		(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007 173, 765.			(f) Total 622, 697.
Cale:		117,641.	145,122.	173,765.	93,036.	93,133.	622,697.
Calei 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	9,304.	145,122.	173,765.	93,036.	93,133.	30,707. 0.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	117,641.	145,122.	173,765.	93,036.	93,133.	30,707. 0. 30,707.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b,	9,304.	145,122.	173,765.	93,036.	93,133.	30,707. 0.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lns 9, 10c, 11, and 12)	9,304.	145,122. 11,112.	173,765. 11,701.	93,036. -1,916. -1,916.	93,133. 506.	30,707. 0. 30,707. 0. 0. 653,404.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990	9,304. 9,304.	145,122. 11,112.	173,765. 11,701.	93,036. -1,916. -1,916.	93,133. 506.	30,707. 0. 30,707. 0. 0. 653,404.
Calei 9 10 a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	9,304. 9,304.	145,122.  11,112.  11,112.  ation's first, secon	173,765. 11,701.	93,036. -1,916. -1,916.	93,133. 506.	30,707. 0. 30,707. 0. 0. 653,404.
Calei 9 10 a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990	9,304.  9,304.  9,304.	145,122.  11,112.  11,112.  ation's first, seconercentage	173, 765.  11, 701.  11, 701.	93, 036. -1, 916. -1, 916. or fifth tax year a	93,133. 506.	30,707. 0. 30,707. 0. 0. 653,404.
Calei 9 10 a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 2	9,304.  9,304.  9,304.  s for the organization here blic Support P	145, 122.  11, 112.  11, 112.  ation's first, seconercentage of (f) divided by line	173, 765.  11, 701.  11, 701.	93, 036. -1, 916. -1, 916. or fifth tax year a	93, 133. 506. 506.	30,707. 0. 30,707. 0. 0. 653,404. 3) ► □
Calei 9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Putions support in the sale of capital assets.	9,304.  9,304.  9,304.  s for the organization here blic Support Poog (line 8, column 2008 Schedule A,	145, 122.  11, 112.  11, 112.  ation's first, seconercentage of (f) divided by line Part III, line 15	173, 765.  11, 701.  11, 701.  and, third, fourth,	93, 036. -1, 916. -1, 916. or fifth tax year a	93, 133. 506. 506.	30,707. 0. 30,707. 0. 0. 653,404. 3) ► □
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage for 20 Public support percentage from tion D. Computation of Inventors.	9,304.  9,304.  9,304.  9,304.  Is for the organization there Stop here  blic Support P 009 (line 8, column 2008 Schedule A,	145, 122.  11, 112.  11, 112.  ation's first, seconercentage of (f) divided by line Part III, line 15 ne Percentage	173, 765.  11, 701.  11, 701.  nd, third, fourth, ne 13, column (f)	93, 036. -1, 916. -1, 916.	93, 133. 506. 506.	30,707. 0. 30,707. 0. 0. 653,404. 3) ► □
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from	9,304.  9,304.  9,304.  9,304.  Is for the organized stop here  blic Support P  009 (line 8, column 2008 Schedule A, vestment Incor	145, 122.  11, 112.  11, 112.  11, 112.  ation's first, seconercentage of (f) divided by line Part III, line 15 one Percentage column (f) divide	173, 765.  11, 701.  11, 701.  11, 701.  11, 701.	93, 036. -1, 916. -1, 916.	93, 133. 506. 506. 15 16	30,707. 0. 30,707. 0. 0. 653,404. 3) ► □ 95.3% 94.6%
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support percentage from the support income percentage investment income percentage.  133-1/3 support tests – 2009. If the more than 33-1/3%, check this is	9,304.  9,304.  9,304.  9,304.  1s for the organization blic Support Poof (line 8, column 2008 Schedule A, restment Incorfor 2009 (line 10c, from 2008 Schedu organization did not poox and stop here	11,112.  11,112.  11,112.  11,112.  ation's first, seconercentage of (f) divided by line Part III, line 15 ne Percentage column (f) divided le A, Part III, line check the box on inthe organization.	173, 765.  11, 701.  11, 701.  11, 701.  11, 701.  11, 701.  11, 701.  11, 701.	93, 036.  -1, 916.  -1, 916.  or fifth tax year and the supported supported and the supported supported and the supported supported and the supported and th	93, 133.  506.  506.  506.  15  16  17  18  3%, and line 17 is not organization	30,707. 0. 30,707. 0. 30,707. 0. 653,404. 3) ► □ 95.3% 94.6% 4.7% 5.4% ► [X]
Calei 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from Investment income percentage Investment income percentage	9,304.  9,304.  9,304.  9,304.  9,304.  1s for the organization did not 2008 Schedule A, /estment Incor for 2009 (line 10c, from 2008 Schedule organization did not 200x and stop here the organization did not 200x and stop here	11,112.  11,112.  11,112.  11,112.  ation's first, seconercentage of (f) divided by line Part III, line 15 one Percentage column (f) divided le A, Part III, line check the box on interest the organization dinot check a box on the organization dinot check a box	173, 765.  11, 701.  11, 701.  11, 701.  11, 701.  11, 701.	93, 036.  -1, 916.  -1, 916.  or fifth tax year as the supported supported as and line 16 is referred.	93, 133.  506.  506.  506.  15 16  17 18  3%, and line 17 is not organization more than 33-1/3%	30,707. 0. 30,707. 0. 30,707. 0. 653,404. 3) ► □ 95.3% 94.6% 4.7% 5.4% ► [X]

Schedule A (Form 990 or 990-EZ) 2009

		·
2009	Federal Statements	Page 1
Client TCSS	Texas Council for the Social Studies attn: Treasurer Dr. Ned Moss	23-7327296
11/17/10		03 52PM
Statement 1 Form 990-EZ, Part I, Line 5c Net Gain (Loss) from Noninven	tory Sales	
Publicly Traded Securitie	<u></u>	
Gross Sales Price: Cost or Other Basis:	30,708. 34,409.	
	Total Gain (Loss) Publicly Traded Securities	-3,701.
	Total Net Gain (Loss) From Noninventory Sales \$	-3,701.
Statement 2 Form 990-EZ, Part I, Line 8 Other Revenue		
	Total \$	12,580. 12,580.
Statement 3 Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Pa	aid	
Donee's Name: Cash Amount Given:	NO RECIPIENT RECEIVED IN EXCESS OF 5000 \$	3,473.
Statement 4 Form 990-EZ, Part I, Line 16 Other Expenses		
CONFERENCES CURRICULUM & LIASON FASSE DONATION FINANCIAL ADVISOR & BANK GIFTS MEMBERSHIP OFFICE NCSS ACTIVITY NOMINATIONS EXP OFFICER & COMMITTEE EXPE OTHER PUBLICATIONS TECHNOLOGY & WEBSITE TSSA	NSE	80,549. 1,980. 200. 1,733. 87. 12,046. 5,963. 113. 7,532. 50. 29,011. 5,001.
	Total \$	144,315.

2009

11/17/10

#### **Federal Statements**

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Texas Council for the Social Studies attn: Treasurer Dr. Ned Moss

23-7327296

Client TCSS

03 52PM

Statement 5 Form 990-EZ, Part III, Line 31 Statement of Program Service Accomplishments

Description	Grants	Program Service Expenses
SCHOLARSHIPS AWARDED TO HIGH SCHOOL SENIORS INTERESTED IN BECOMING SOCIAL STUDIES TEACHERS. GRANTS TO SOCIAL STUDY TEACHERS FOR SUPPLIES OR FOR FURTHER STUDY. AWARDS TO SOCIAL SUITES "TEACHERS OF THE YEAR"  Includes Foreign Grants: No	3,050.	3,473.
Total §	3,050.	\$ 3,473.

Statement 6 Form 990-EZ, Part V Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No

2009

### **Federal Supporting Detail**

Page 1

**Client TCSS** 

Texas Council for the Social Studies attn: Treasurer Dr. Ned Moss

23-7327296

11/17/10

03 52PM

Other Revenue Related or exempt function income

OTHER INCREASE IN NET ASSETS

 \$
 12,580.

 Total
 \$

 12,580.

2009 **Supporting Detail** Page 1 Texas Council for the Social Studies attn: Treasurer Dr. Ned Moss 23-7327296 **Client TCSS** 03 52PM 11/17/10 Other Income Producing Activities Membership dues and assessments 19,928. 19,928. EST MEMBERSHIP IN ACCOUNT "CONF FEES & MEMBERSHIPS" Total \$