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# SCANNED JUN 27 2011

Form **990** 

**Return of Organization Exempt From Income Tax** 

Department of the Treasury Internal Revenue Service  The organization may have to use a copy of this return to satisfy state reporting requirements												
A F	or the 2010 ca	elendar ve	ar, or tax year beginn			nd ending			: Inspection			
	heck if applicable	-	of organization					D Empio	oyer identification number			
г-1	ddress change		*	logy Acti	on of	Texas			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
믐	-	Doing F	Business As					74-	1696145			
<u></u> □ N	ame change		er and street (or P.O. box	r if mail is not delive	ared to street	at address)	Room/suite	1				
<u></u>	ntial return		East 9th St		cicu to stice	st audiess)	Noonvoore		ephone number L2-322-0000			
Пт	erminated			<del></del>	·	·	1	3+2	322 0000			
		Aust	town, state or country, a		x 7870	11			eipts 479,836			
닖^	mended return	-			<u> </u>	/ <u>+</u>	<del></del>	G Gross rece	ipis 473,030			
A	application pending	1	and address of principal				H(a) is this a	group return for	raffiliates? Yes X No			
		L	ly Jo Dixo	-	Lrect	or .	14/60 4 0	-671 mts	uded2 Yes No			
			East 9th	Street		0001	H(b) Are all		list. (see instructions)			
			tin			8701	" "	io, allacitat	nst. (see instructions)			
	Tax-exempt statu		501(c)(3) 501(c)		t na.)	4947(a)(1) or 527						
1 1	Website: 🕨 W		<u>cology-act</u>			· · · · · · · · · · · · · · · · · · ·	H(c) Group					
	Form of organization		rporation Trust	Association 0	her 🕨	<u>l</u> L	Year of formation 1	971	M State of legal domicile TX			
P		umman										
- 1			ne organization's mis									
શ	To €	educat	e and empowe	r people	to cre	ate a healthier						
	envi	ironme	ent through w	aste prev	ention	•						
틸		• •					•		• ••			
Governance	2 Check th	his box	if the organization	n discontinued i	ts operatio	ns or disposed of more th	an 25% of its ne	t assets				
9			members of the gov					3	7			
Ý.			endent voting membe					4	6			
ŧ			ndividuals employed					5	10			
Activities &			rolunteers (estimate		2010 (1 a	it v, in e zaj .		. 6				
ď			usiness revenue from	- /	(C)		•	7a				
									0			
	b Net Unite	eiated bus	siness taxable incom	e from Form 99	J-1, line 34	ł	Prior Ye	7b	Current Year			
	8 Contribu	utions and	d grants (Part VIII, lin	e 1h)				4,397	160,275			
Revenue			revenue (Part VIII, lir			• • • • • • • • • • • • • • • • • • • •		4,799	316,662			
Ş			ne (Part VIII, column		nd 7d\	• • •		8,962	243			
Re	P .		art VIII, column (A),					0,302	2,656			
	f .	•				, .	30	8,158	479,836			
			add lines 8 through 1				1 39	0,130	419,030			
			ar amounts paid (Par	JL - 1 - 1 \ / >	-,,,	, , , , , , , , , , , , , , , , , , , ,						
	1		or for members (Part		_ <del></del> ,	A	<del></del>	2 21 2	000 642			
Š			ompensation, employ			対 (A), lines 5–10)	23	3,919	298,643			
Expenses			Iraising fees Rart IX			). 	ļ		· · · · · · · · · · · · · · · · · · ·			
Ä			expenses (Part IX, o			g 10,780		~ári	(5)			
w	17 Other ex	xpenses (	(Part IX, column(A),	lines_11a_11d,-	14(-24())	= , ,		7,003	214,691			
	18 Total ex	openses /	Add lines 13-17 (mg	aga Banx	ggiumn (A	(a), line 25)		0,922	513,334			
	i 19 Kevenu	ie less ex	penses Subtract line	18 from line 12		<del></del>		2,764	-33,498			
ssets or							Beginning of Cu		End of Year			
8	20 Total as		• •					4,856	318,329			
뜋	4	•	art X, line 26)					5,290	112,261			
Z 2			d balances Subtrac	lline 21 from lin	<u>e 20                                    </u>		<u>  23</u>	<u>9,566</u>	206,068			
			re Block									
						mpanying schedules and stat			nowledge and belief, it is			
tri	ue, correct, and	complete I	Deplaration of prepare	other than officer)	is based on	all information of which prepai	er has any knowle	dge				
		X	auch) (	$\mathcal{T}$				L_				
Sig	gn 🔰	Signature	of officer	X		Nucon		Date	Jan 111			
He	re 📗	,	Karlu J	10 1) IXO	n $C$	0-101160x	W		5130111			
		Type or pri	int name and title									
	Print/T	ype prepar	er's name	Pre	parer's sign	ature	Date	Check	k of PTIN			
Pai		le Chapp		ار		Macle la	05/1	1	mployed P00271675			
Pre	parer Firm's		Gindler	Chappe		orrison & Co.		Firm's EIN				
Use	e Only	nunc y				, Ste. 250	<del>/ - · · ·  </del>	Camp Env				
	- T	address >	Austin,	TX 787	52	, 500. 250	Į	Dhoro se	512-833-9600			
Mar			eturn with the prepar			ructions)		Phone no	[42] . [7]			
			Act Notice, see the						. X Yes No Form <b>990</b> (2010)			
DA	4			barate mati					Form 330 (2010)			

-orm 990 (2010)	Ecology Action of	of Texas	74-1696145	Page 2
	tatèment of Program Sei		e :	==
		ains a response to any ques	tion in this Part III	X
To educa	ribe the organization's mission ate and empower ment through was	people to create ste prevention.	a healthier	
prior Form 9	anization undertake any significa 990 or 990-EZ? scribe these new services on Scl	nt program services during the year	which were not listed on the	Yes X No
services?		ake significant changes in how it co	nducts, any program	Yes X No
4 Describe the 501(c)(3) an	nd 501(c)(4) organizations and se	for each of the organization's three	largest program services by expenses a lor report the amount of grants and allowed	
process *Provid Central Austin *Teache prevent - Con opportu	es recycling droing center es recycling ser Texas and for I s Central Texans ion by - ducts tours and nities at its do ffs booths at va	43,007 including grants of op-off centers and rvices for special local music venues about recycling provides hands-on wintown recycling arious community expressions.	events around in downtown and waste volunteer center.	)
4b (Code	) (Expenses \$	including grants of\$	) (Revenue \$	)
4c (Code	) (Expenses \$	including grants of\$	) (Revenue \$	)
4d Other progr	am services (Describe in Sched	lule O )		
(Expenses		luding grants of\$	) (Revenue \$	)
4e Total progr	am service expenses 🕨	443,007		

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_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? If "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C,	ļ		
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	ļ		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	Ì		
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ì		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	Į.		
	complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-	ł		
	endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1. 1.5. 2.3.48g	54. 44. (3)	`° `° - `€ \$6
	VII, VIII, IX, or X as applicable	h		Scat
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	{		
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	Ĭ		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	<u> </u>		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				77
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		v
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46	i	v
7	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4.		v
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	,,		v
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	$-\!$	<u> </u>
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ا 🛴 ا	1	v
00-	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
D	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	201	1	
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form 990 (2010) Ecology Action of Texas
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		1	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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	22		x
24a	employees? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	_23		
44a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			x
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		
41	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	., 5.		Ym. 7
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	₫ ,^^,*	γ'έ Σ	ž
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C				
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	1	x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
•	Part I	31	)	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		<u>_X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	. }	1	
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		<u>x</u>
а	Did the organization receive any payment from or engage in any transaction with a		ļ	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,  Part V, line 2  Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	Ì	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? If "Yes," complete Schedule R,		ļ	
	Part VI	37	]	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	, (	[	
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2010) Ecology Action of Texas 74-1696145

Part: V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

				-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	2	72.	r 2.	110
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	10 mm	
С	Did the organization comply with backup withholding rules for reportable payments to vendors are			* 1,00		1
	reportable gaming (gambling) winnings to prize winners?	-		1c	Ĭ .	-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			*	. ~ .,	, 5 <sub>0</sub> ,
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	10	1 m2	1 12	2½ ,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruc			, # ; , ,		94.2.7
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	·		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or of	her au	thority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er finar	icial	İ	ł	
	account)?			4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country	_		** 2.55 ** .55,	10 ×	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finar		counts	*****	× 35.00	* *
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year			5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra	nsactio	ou <sub>o</sub>	5b	ــــــ	X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	<u> </u>	ļ
6a	See a	ld the			ŀ	
	organization solicit any contributions that were not tax deductible?			<u>6a</u>	<b> </b>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributes and the did to the contribute of	outions	s or			ľ
7	gifts were not tax deductible?			6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).	_		: ti	なかり状で 美 記憶	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	tor go	ods	5 * tv	- 2 -4	
<b>.</b>	and services provided to the payor?			7a	$\vdash$	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
·	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which required to file Form 8282?	it was	•	<b> </b>		<del></del>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7a		7c	- a.	X
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene		tract?	- I	100	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of			7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file			7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7 <u>9</u> 7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		WITHIC & TOTHE 1000-0.	2427 F	r -3	- AL
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor			, ,	* * * * * * * * * * * * * * * * * * * *	2 5
	organization, have excess business holdings at any time during the year?	5		8	์ จัดนั้ <i>เ</i>	X
9	Sponsoring organizations maintaining donor advised funds.			15		
а	Did the organization make any taxable distributions under section 4966?			9a	50 2 1	x
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter			2K.#-	-y - 1884-27	~~_\q_1,\dot
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		- A	人,爱?" · · · ·	13 %
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		25 ',	2.39	17, 79,00
11	Section 501(c)(12) organizations. Enter			1/4% (		~ ~ **
а	Gross income from members or shareholders	11a		3-30°		in The Signature
þ	Gross income from other sources (Do not net amounts due or paid to other sources			. 14.1% 23.1%	1 · 1	7 1/2 /A
	against amounts due or received from them )	11b				35 " (8),
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	orm 10	41?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		, AL	2, 25 2, 45 3, 47, 15	, <u>.</u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				, W.S.	
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O			\$ 2 ° 1 ' \$ " . , , '	31.77	19, 76.
þ	Enter the amount of reserves the organization is required to maintain by the states in which			11 mil 18 4	3.	3 o,
	the organization is licensed to issue qualified health plans	13b	<del></del>	,55 ×	- } !}:	, ar ;
C	Enter the amount of reserves on hand	13c		1		152 7
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		<u> </u>
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sche	dule O		14b		
DAA				Form	990	(2010)

			_
	990 (2010) Eçology Action of Texas 74-1696145  rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through	Page 7b below, and	
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or ch		
	O. See instructions.  Check if Schedule O contains a response to any question in this Part VI	(S	Ž.
Sec	tion A. Governing Body and Management		
<del>, , , ,</del>	non-rice server ming poor, and management	Yes N	lo
1a	Enter the number of voting members of the governing body at the end of the tax year	20° 1, 10	
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6		s'" k
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	A. Wall of the	·.
	any other officer, director, trustee, or key employee?	2 3	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct		_
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3 7	-
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<u>ζ</u>
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?  Does the organization have members or stockholders?		<u>`</u>
7a	Does the organization have members of stockholders, or other persons who may elect one or more members	-   -	<u>-</u>
	of the governing body?	7a   3	ζ
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b 3	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		. * ,
	the year by the following	# 12 2 1 2 PA	¥ 4.7
а	The governing body?	8a X	_
b	Each committee with authority to act on behalf of the governing body?	8b X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<b>.</b>
200	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal F	9 3	
360	tion b. Foncies (This decitor b requests information about policies not required by the internal re		<u>.)</u> 10
l0a	Does the organization have local chapters, branches, or affiliates?		ζ
	If "Yes," does the organization have written policies and procedures governing the activities of such		_
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		
	form?	11a 3	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		,334
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	125	ζ
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b 3	<u> </u>
Ŭ	describe in Schedule O how this is done	12c X	
13	Does the organization have a written whistleblower policy?	13 X	
14	Does the organization have a written document retention and destruction policy?	14 X	_
15	Did the process for determining compensation of the following persons include a review and approval by	7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ŝ
а		15a X	<u>_</u>
b	Other officers or key employees of the organization	15b X	<del></del>
160	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement.	L. E. M. (5. L.) &	.,;;
ıoa	with a taxable entity during the year?	16a X	r
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its		<u> </u>
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the		
	organization's exempt status with respect to such arrangements?	16b	<u>.</u>
Sec	tion C. Disclosure		_
7	List the states with which a copy of this Form 990 is required to be filed ▶None		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	ible	
	for public inspection. Indicate how you make these available. Check all that apply		
10	Own website Another's website W Upon request		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the		
-	organization ► Karly Jo Dixon 707 East 9th Street		

TX 78701

Austin

Form 990 (2010) Ecology Action of Texas

74-1696145

ane 7

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

Check if Schedule O contains a response to any question 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 ord	(B) (C) Average Position (check all that apply)							(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	ភ្ជ  Individual trustee o  or director		Officer	Key employee	a Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1)Brent Perdue Secretary	2.00	x		X				26,287	0	
(2) Austin Van Zant	2.00	12		-	$\vdash$	$\leftarrow$		20,201		
Member	1.00	x		1		} }	1	o	0	
(3) Lauren Dreyer										
Vice Chair	2.00	X		X		<u> </u>		0	0	
(4) Adam Thompson										
Chair	2.00	X	ļ	X	ļ	lacksquare		0	0	· · · · · · · · · · · · · · · · · · ·
(5) Tanya Ladha							ı			
Treasurer (6) Eric Dieter	2.00	X	-	X	-	-		0	0	
Member	4.00	x	1				ł	o	o	!
(7) Simon Powell-Ev	ens	1			┝	<del>                                     </del>	$\dashv$			
Member	4.00	X					]	o	o	
(8) Karly Jo Dixon							Ī			
Co-Director	40.00	<u> </u>	L	X			_	29,570	0	
(9)							l			
(10)		$\vdash$	-	-	<del> -</del>	$\vdash$	1			
(11)		$\vdash$		-						<del></del>
(12)		-		-	_		-			
(13)			-		_		+			
(14)		$\vdash$	-	-	-		1			<del></del>
(15)		<del>                                     </del>			_		7			<del></del>
(16)		$\vdash$	-		_		_			<del></del>

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in

55,857

55,857

(B)
Description of services 2 Total number of independent contractors (including but not limited to those listed above) who

0

(28)

1b

Sub-total

Total (add lines 1b and 1c)

Total from continuation sheets to Part VII, Section A

received more than \$100,000 in compensation from the organization

# Form 990 (2010) Ecology Action of Texas 74-1696145

		(2010) ECOLOGY AC		<u>I Texas</u>	<del></del>	/4-1696145	<u> </u>	Page S
	<u>rt.V</u>		enue					
8.74 S 10 wa	موركه أنساة		r dr ring		(A) Total revenue	( <b>B</b> ) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
mounts	1a	Federated campaigns	1a	9,352			311	"5 1. Tr. 15. 11 A.
50	b	Membership dues	1b			1. 12. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14		(3ので観光です。) ないれつだった。
3 6	С	Fundraising events	1c				The state of the s	ないがひご イール
<u> </u>	d	Related organizations	1d		**************************************	Frank . The sec	6 T 2	"" " " " " " " " " " " " " " " " " " "
žΞ	e	Government grants (contributions)	1e	132,000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The all will be referred	at fatting the second	Tristings of Marie
S L		All other contributions, gifts, grants,			6. "# 15 & 15 & 15 A" A	125 J. Wall	化对数 经数据 不 "	~~
3 <del>.</del>	-	and similar amounts not included above	1f	18,923	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	i des de la		
and other similar an	а	Noncash contributions included in lines 1				F . TAKE . MICHES TO	THE PROPERTY OF SECTION ASSESSMENT	AND THE THE
3 6	•	Total. Add lines 1a-1f	- ·· · ·	•	160,275	2 * 7 \$ \$7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ر بر الله الله الله الله الله الله الله الل	Example
		Total Tito Ta 11	<del></del>	Busn. Code		4 1,49 1,48		
Ver	2a	Material Sales		Busil. Code	276,235		,-	· · · · · · ·
8	b	Memberships			40,427			
ဒ္ဌ	0	Memberships			40,427	40,427		
ē	ا							
E	u			-				<del></del>
ga	£	All other program convector						<del></del>
Program Service Revenue		All other program service revolution. Add lines 2a–2f	Citue		316,662	The state of the s		I
+		Investment income (including	dividende	<del></del>	310,002	5 500 to 10 50	#1 4 V V V V V V	·
	•	and other similar amounts)	dividends,	micresi,	243		•	243
	4	Income from investment of ta	v evemnt h	and process	243			243
	5	Royalties	v-evenibi pr	ond proceeds				
	J	(i) Real		(ii) Personal				
-	6-	Gross Rents	<del>'</del>	(ii) Personal				and the second s
- 1			-+-		18 142 m = 12 m 6 48 1 is	133×1 17 1 3	* 1 > 8127 7 7 5 7 7 1 4 8	
		Less rental exps	<del></del>	<del>-</del>	The fibration of the state of t	. 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		INTERNATIONAL CONTRACTOR CONTRACT
		Rental inc or (loss)			11 100 1 1 100 100 100 1 1 1 1 1 1 1 1		1 7,7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 4 5 7 500 1 00 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1
		Oross amount from (i) Securities	<del></del>	(II) Other	and the state of t	r · i zi zi zi		PARTY IN
ļ		sales of assets	-	(ii) Outer	√-ఇకలుయాముం .		W. J. C. C. C. C. C.	a 184 Ali (1877) (197
		other than inventory	<del></del> -		We did to the Committee of the second		747-2-48-32 F 5-32	
	D	Less cost or other			NOTE THE BUILDING		e delle di di delle di e	
		basis & sales exps				1/444/12/16/16/16 d	TEN KINSTAT	* * 2 4. 10 7 _ 41. 4x
İ		Gain or (loss)			~		"( · ) 3:2" - >	5 5-7 2 "
		Net gain or (loss)						
<u>=</u>	ga	Gross income from fundraising ever	ents		TAL ALLENDE	46 b ***********************************	31.2 11 1 50.50 mm	Transfirm of the control of the cont
Revenue		(not including \$	,		tora a directain a		12 th., 11 th.	14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
è l		of contributions reported on line 10	<sup>5)</sup>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 . 7
ē		See Part IV, line 18	a				Salar St. T. S.	8 'x " _ \$", ' %, 'y',
Other		Less direct expenses	b	<del></del>	· · · · · · · · · · · · · · · · · · ·		· " · ~ ~	
-		Net income or (loss) from fund		ents <b>&gt;</b>	AU A 5	(		
	9a	Gross income from gaming activitie	•			The state of the s		
	_	See Part IV, line 19	a		1/2/25 1 2 2 70/2017		- 75' 12' 12' 12' 12' 12' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13' 14' 13'	A PARTIE AREA TO A PROPERTY
		Less: direct expenses	b[		with the traction of	. Torre	2.07% 1.38.36	\$*** 28 ***
		Net income or (loss) from gan		es 🕨		Ang 1 ag 1 h.A. 1 5 - 1	423 50 50 50 50 50 50 50 50 50 50 50 50 50	
	10a	Gross sales of inventory, less			A SELE AND LEVE		25 (2 ) 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1	
		returns and allowances	a			e de la la la la la la la la la la la la la	The second of th	
		Less cost of goods sold	b		man a material state of the material state o		, §* ×1 , *** \$* \$, ** **	"
	С	Net income or (loss) from sale			X + m 1		y > 4.088	
F		Miscellaneous Revenue		Busn. Code		·		
'	11a	Miscellaneous income	ı		2,656			2,656
	b							
	C							
		All other revenue						
- 1	е	Total. Add lines 11a-11d		<b>&gt;</b>	2,656	<i>್ ಜನ್ಯ ಸರ್ಚಾ</i> ಚ್ಚಾಗ ಕನ್ನಡ	Carry Towns, The	The sales of the
- 1		Total revenue. See instructio			479,836	316,662	ol	2,899

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must of	complete column (A) bu	t are not required to compl	ete columns (B), (C), and	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(8) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
_			- CAPCHICO	1.78 N 12. 12.22.24 88.05	18 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
•	organizations in the U.S. See Part IV, line 21		Ì	Constant and the second of the	Bally and the state of the stat
2	Grants and other assistance to individuals in		<del> </del>	1 - 18 - 3 N - 5/ 1 K-5/	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	the U.S. See Part IV. line 22			The state of the s	
3	Grants and other assistance to governments		<del>-                                    </del>	50 85 C 15 14	A 3 1882 18. 1. 18. 1.
•	organizations, and individuals outside the				TEST IN THE STORY OF THE STORY
	U.S. See Part IV, lines 15 and 16		Ì		
4	Benefits paid to or for members		<del>                                     </del>	12 74 15 16 16 17 17 17 18 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	THE ST WILLIAM ST.
5	Compensation of current officers, directors,		<del> </del>	1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
3	trustees, and key employees				
6	Compensation not included above, to disqualified		<del></del>	<del> </del>	· · · · · · · · · · · · · · · · · · ·
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		1	1	
7	Other salaries and wages	202,36	5 174,641	23,474	4,250
8	Pension plan contributions (include section 401(k)	202,50	1/4,041	25,273	1,250
·	and section 403(b) employer contributions)				
9	Other employee benefits	75,09	5 64,807	8,711	1,577
10	Payroll taxes	21,18	3 18,281	2,457	445
11	Fees for services (non-employees)		10,201	2,30,	
	Management			]	
b					
	Accounting	4,50	0 3,884	522	94
	Lobbying		0,000		<u> </u>
	Professional fundraising services See Part IV, line 1	7	2 m 5 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m	82 - 6 75 2 " 2 - 56", 7	<del> </del>
f		·	<del> </del>	<del></del>	<del>                                     </del>
g		8,76	2 7,561	1,017	184
12	Advertising and promotion	95			
13	Office expenses	41,69			
14	Information technology	1,03			
15	Royalties				<del></del>
16	Occupancy	56,59	8 48,844	6,565	1,189
17	Travel		<u> </u>	3/233	=7=35
18	Payments of travel or entertainment expense	s		<u> </u>	
	for any federal, state, or local public officials		İ	ļ	
19	Conferences, conventions, and meetings			<del></del>	
20	Interest	6,68	5,838	720	130
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,30	0 61,532	8,271	1,497
23	Insurance	1,21			26
24	Other expenses Itemize expenses not covered	abar ver instru	a light and the teles	1256 1 ; N. 1812 . 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	above (List miscellaneous expenses in line 24f If		and the second of the second o		I B II STOREGE
	line 24f amount exceeds 10% of line 25, column	A L. Fan Skrimte	LINETER TODAY.	1, 12 1, 12, 2, 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Top And Nov. Portor His-
	(A) amount, list line 24f expenses on Schedule O)				1 (12 1 1721, 172), 18g 2
а	Transportation costs	12,78			268
b	Event expense	5,55			
С	Product expense	1,31			28
d	Employee development	1,14			
θ	Miscellaneous	62			
f	All other expenses	52		61	11
25	Total functional expenses. Add lines 1 through 2	f 513,33	4 443,007	59,547	10,780
26					
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column				
	(B) joint costs from a combined educational				
<del></del>	campaign and fundraising solicitation				
DAA					Form <b>990</b> (2010)

	art X	S Balance Sheet	<u></u>	-1090143		rage 11
		•	·	(A)	Γ	(B)
				Beginning of year		End of year
T	1	Cash—non-interest bearing		19,862	1	14,048
	2	Savings and temporary cash investments		24,457		15,288
	3	Pledges and grants receivable, net		22,000		22,000
l	4	Accounts receivable, net		14,332		24,417
	•	Receivables from current and former officers, directors	trustees kev	元 原語を発出 法ニト的 1 美	12.4.F	سالوليه ١٠٠ ويو دلاتي الملكة عرب الدي
ľ	•	employees, and highest compensated employees Cor	-	A TOMBOUR THE SALES		THE SECTION AND THE SECOND
		Schedule L	inpicte i alt ii oi	y of \$2 by farm #8 plantings made on F box shoots \$	5	The state of the s
ŀ	6	Receivables from other disqualified persons (as define	nd under section	The same of the same		The same of the sa
		4958(f)(1)), persons described in section 4958(c)(3)(B)			30	
		employers and sponsoring organizations of section 50		الكنفة والا والمقتنية والتقارة وأسارا والتا	للرية سنة	Rain Mark Halle, MAS 1879 C
		employees' beneficiary organizations (see instructions	• • • •	Allerand Link aller contine " of It's	l _	ille attractions of the
ţ	7	Notes and loans receivable, net	,		7	
Assets	8	Inventories for sale or use			8	
As					9	
j	9	Prepaid expenses and deferred charges	1 [	The real of the sent time sent as were the	-	ATTERNITION OF THE STATE OF
	iva	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 458,488	AND THE CHARGE TO THE PERSON	(2.H)	La electronica de la la la la la la la la la la la la la
	_	-				Sindanimass alimber
		Less accumulated depreciation	10b 216,362			242,126
ı	11	Investments—publicly traded securities		15,587		
	12	Investments—other securities See Part IV, line 11			12	<del> </del>
	13	Investments—program-related See Part IV, line 11			13	<del> </del>
	14	Intangible assets		700	14	450
	15	Other assets See Part IV, line 11	796		450	
ᅱ	16	Total assets. Add lines 1 through 15 (must equal line	34)	344,856		318,329
	17	Accounts payable and accrued expenses  Grants payable		2,315		16,021
	18 19	Deferred revenue			18	
	20			·	19	
S		Tax-exempt bond liabilities	of Cohodula D	· · · · · · · · · · · · · · · · · · ·	20	
Liabilities	21	Escrow or custodial account liability Complete Part IV		me i a majerena i patamenta la la maja i a esta	21	panjiristan i summar uzur e sala ann, urseka u
Ξ	22	Payables to current and former officers, directors, trust	•	TOTAL CONTROL OF THE		TO A SCHOOL OF THE
Ē		employees, highest compensated employees, and disc	qualified persons	most and the highest of affects of pages of a court,		many in mining many money in
-	22	Complete Part II of Schedule L	and montro.	94,806	22	90 406
	23 24	Secured mortgages and notes payable to unrelated the Unsecured notes and loans payable to unrelated third		34,800		80,496
	25	Other liabilities Complete Part X of Schedule D	parties	8,169	24	15,744
	26	Total liabilities. Add lines 17 through 25		105,290		112,261
Ses	20	Organizations that follow SFAS 117, check here	and complete			Electrical and
		lines 27 through 29, and lines 33 and 34.	and complete	J'HALLENDER DE TENER DE LE CONTROL DE LE CON	52.2	STREET STREET
Bala	27	Unrestricted net assets		211,116	Land Late	206,068
m	28	Temporarily restricted net assets	28,450		200,000	
פַ	29	Permanently restricted net assets	20,430	29		
ا جَ.	23	Organizations that do not follow SFAS 117, check h			renterenamente	
۲		complete lines 30 through 34.	ALON MARKET CAL	1. 202 1	and property and the contract of the contract	
Net Assets or Fund	30	Capital stock or trust principal, or current funds	SOLD ALLERY MENTERS SOLD		Right and in the second second second second second second second second second second second second second se	
ie i	31	Paid-in or capital surplus, or land, building, or equipme	ant fund		30 31	
SS	32			<del></del>	32	
<b>†</b>	33	Total net assets or fund balances	or other tunus	239,566		206 060
ş				344,856		206,068
그	34	Total liabilities and net assets/fund balances	<del></del> ·	344,636	34	318,329

Form **990** (2010)

Form	990 (2010) Ecology Action of Texas 74-1696145			Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>836</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>334</u>
3	Revenue less expenses Subtract line 2 from line 1	3			<u>498</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23	39,	<u> 566</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	20	06,0	068
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		T\$7.72.7	Z	理
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			2772 (3) 18 (1) (3)	"Terrigit
	Schedule O			ANCE II	- Line 1-
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
b	Were the organization's financial statements audited by an independent accountant?	•	2b	X	
	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?		2c		x
	If the organization changed either its oversight process or selection process during the tax year, explain in		e Like	Mine Since	11 1237
	Schedule O		1/2/27	Property of	78° 12",
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		72.34		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
	issued on a separate basis, consolidated basis, or both		J_1501	attivista.	78. 18. 18. 18. 18. 18. 18. 18. 18. 18. 1
	X Separate basis Consolidated basis Both consolidated and separate basis		_ Zpt ;	personal pa	,
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		2. 41427	or the score	W. ***
	the Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2010)

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

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

74-1696145

	art-l	Pass		y Status (All organization	ne mu	et com	olete t	hie na	<del>17 \ S</del>	e inci	tructions			
_				ause it is (For lines 1 through				illo pa	11.) 3	56 1113	u delloris.			
	oiga		•	ssociation of churches describ		-		V:N						
1	$\vdash$				ea in sec	tion 170	A)(T)(A)	)(1).						
2	$\vdash$		• • • •	(A)(ii). (Attach Schedule E)										
3		<u> </u>	•	rvice organization described in										
4			•	ted in conjunction with a hospi	tal descri	bed in se	ction 1	70(b)(1	)(A)(iii).	. Enter t	he hospital's	s name		
_		city, and sta									J			
5		_		it of a college or university owr	nea or op	erated by	a gove	rnment	ai unit c	iescribe	a in			
_			(b)(1)(A)(iv). (Complete Pa	•										
6			=	r governmental unit described i										
7	X	-	•	a substantial part of its suppor	rt from a g	governme	ental un	t or fror	n the g	eneraì p	ublic			
			bed in section 170(b)(1)(A)(vi). (Complete Part II )											
8	H			n 170(b)(1)(A)(vi). (Complete F	,		_	_		_				
9				(1) more than 33 1/3% of its s										
		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-Other													
е		By checking	this box, I certify that the o	organization is not controlled di	rectly or	ndirectly	by one	or more	disqua	alified pe	ersons			
		other than fo	oundation managers and of	ther than one or more publicly	supported	d organiz	ations d	escribe	d in sec	ction 50	9(a)(1)			
		or section 50	09(a)(2)											
f		If the organiz	zation received a written de	etermination from the IRS that	ıt ıs a Typ	e I, Type	II, or T	ype III s	supporti	ng				
		organization	, check this box											
g		Since Augus	st 17, 2006, has the organi	zation accepted any gift or con	tribution f	rom any	of the							
		following pe	rsons?											
		(i) A perso	n who directly or indirectly	controls, either alone or togeth	er with p	ersons de	escribed	l ın (ıı) a	and			Yes	No	
		(III) belo	w, the governing body of t	he supported organization?	•						11g(i)			
		(ii) A family	member of a person desc	ribed in (i) above?							11g(ii			
				n described in (i) or (ii) above?							11g(ii			
h			• •	it the supported organization(s										
	Name	of supported	(ii) EIN	(lii) Type of organization		organization	(v) Did v	ou notify	(vi)	ls the	(vii) An	nount of		
•	org	anization		(described on lines 1-9		sted in your	the organ	rization in	organizat		sup	port		
				above or IRC section	governing	document?		of your port?		zed in the				
				(see instructions))	Yes	No	Yes	No	Yes	No				
(A)														
	_				<u> </u>				[					
(B)				1	1	}								
									] ,	1				
(C)					Ţ									
				1				l		[ ]				
(D)														
\-/				}		}								
(E)			<del> </del>	<del> </del>	<del>                                     </del>									
\ <del>-</del> /			]	}	1	}			] .					
			على المحالية	المالا به سليد" مشاير السلس المسدورة الله أم علم	مستفرسة فسطو الا	Jan & Bak	العدر أحظو	مريد المراجعة	g R. dun-	وقيد المائد				

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

Schedule A (Form 990 or 990-EZ) 2010

Total

Schedule A (Form 990 or 990-EZ) 2010 Ecology Action of Texas 74-1696145 Page 2

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.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	282,301	290,200	392,053	154,397	160,275	1,279,226
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	282,301	290,200		154,397	160,275	1,279,226
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)			AND SECTION AND SE			
6	Public support. Subtract line 5 from line 4	" * " * * * * * * * * * * * * * * * * *	1367 + a cobado 4860 + b 70 com	/		5 7 (1985) 1 (1977) 900 70 71 18	1,279,226
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	282,301	290,200	392,053	154,397	160,275	1,279,226
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,845	3,620	2,098	979	243	8,785
9	Net income from unrelated business activities, whether or not the business is regularly carried on					1,656	1,656
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	890	7,325	296		, ,	8,511
11	Total support. Add lines 7 through 10	~ 8~ 7.25 40 1	- 4 haby 45 gr 47,	Name of the second of the seco	a star of a color of the color of the color of the color	11 e <sup>20</sup> 1 2 0	1,298,178
12	Gross receipts from related activities, etc.	•	•			12	316,662
13	First five years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	n 501(c)(3)	
	organization, check this box and stop he	ого	<u> </u>		···		
	tion C. Computation of Public S	<del></del>		<del></del>		<del></del>	
14	Public support percentage for 2010 (line		•	lumn (f))		14	98.54%
15	Public support percentage from 2009 Sc					15	98.71%
16a	33 1/3% support test—2010. If the orga				is 33 1/3% or mo	ore, check this	<b>⊾</b> <del>•</del>
<b>L</b>	box and stop here. The organization qual 33 1/3% support test—2009. If the organization qual test—2009 is the organization quality and stop here.				4E 22 4/20/		► X
þ	check this box and stop here. The organ					or more,	▶ □
17a	· ·	•		•		t line 14 is	
	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization or	n meets the "fact	s-and-circumstan	ces" test, check th	is box and stop I	nere.	
18	supported organization  Private foundation. If the organization of	lid not check a bo	x on line 13, 16a,	16b, 17a, or 17b,	check this box ar	nd see	<b>&gt;</b> [
	instructions						<b>&gt;</b> []

Page 3

Schedule A (Form 990 or 990-EZ) 2010 Ecology Action of Texas

Part III Support Schedule for Organizations Described in Section 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.)

Sec	tion A. Public Support	to quality und	ior trio tooto iit	sted below, pi	case complet	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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							
þ	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							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	, (e) 2010	(f) Total	
9	Amounts from line 6		<u> </u>			ļ		
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						<del></del>	
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 th	e organization's	first, second, third	, fourth, or fifth tax	year as a sectio	n 501(c)(3)		
	organization, check this box and stop he						▶	
Sec	tion C. Computation of Public S							
15	Public support percentage for 2010 (line			lumn (f))		15	%	
16	Public support percentage from 2009 Sc					16	%_	
	tion D. Computation of Investm			10 1 10				
17	Investment income percentage for 2010	17	<u>%</u>					
18 19a	Investment income percentage from 200 33 1/3% support tests—2010. If the org	•	•	line 14 and line 1	E ie mara than 31	18   3 1/3% and line	<u>%</u>	
134				•			▶ □	
b	17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  3 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and						nd	
-	line 18 is not more than 33 1/3%, check						▶ □	
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2010 Ecology Action of Texas 74-1696145 Page

Frant IV: Supplemental Information. Complete this part to 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).

Part II, Line 10 - Other Income Detail

Miscellaneous

8,511

### 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, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public --

a Inspection 🚟 🗈

Name of the organization **Employer Identification number** Ecology Action of Texas 74-1696145 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the :Part\*l 🚐 organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, 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 XIV, 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 S b Assets included in Form 990, Part X

Sche 5 che	dule D (Form 990) 2010 Ecology Ac	ction of T	exas		74-169	<u>6145                                    </u>		P	age 2
ĕPa	rtilli Organizations Maintaining	Collections of	Art, Historical T	reasur	es, or Othe	r Similar A	ssets (co	ntir	nued
3	Using the organization's acquisition, accessing collection items (check all that apply)	on, and other record	s, check any of the fo	llowing th	nat are a signif	icant use of its	3		
а	Public exhibition	d 🗍 Lo	an or exchange progr	ams					
b	Scholarly research	e Otl	her						
С	Preservation for future generations	_							
4	Provide a description of the organization's co	llections and explain	how they further the	organiza	ation's exempt	purpose in Pa	irt		
	XIV	·	•	•					
5	During the year, did the organization solicit o		•	-			<u></u>	_	_
	assets to be sold to raise funds rather than to							s	No
_:Pa	Escrow and Custodial Arra				on answere	d "Yes" to	Form 990	), P	art IV
	line 9, or reported an amou						<del></del>		
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for contributions	or other a	assets not		□ <b>v</b> -	- F	7
	included on Form 990, Part X?		Marrie de La				∐ Ye	s _	No
Đ	If "Yes," explain the arrangement in Part XIV	and complete the to	llowing table			<u> </u>	Amoun		
					• ,	\ <del>+</del>	Amoun		
	Beginning balance					10	<del></del>		
	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			<del></del>
	Did the organization include an amount on F		21?				Ye	s	_∣ No
	If "Yes," explain the arrangement in Part XIV								
<u>. Pa</u>	art V Endowment Funds. Comp								
		(a) Current year	(b) Pnor year	(c) Tw	vo years back	d) Three years t			
1a	Beginning of year balance			ļ		On Charles	EXE SER SEA	H. 1102 1	1.11
þ	Contributions		ļ			was and dist.			
C	Net investment earnings, gains, and			}	Į	TOTAL SERVICES		-	
	losses					at Let Market			
d	Grants or scholarships					. Pariticana	et sila i		Marka :
е	Other expenditures for facilities and						en veri	1, 245	in a series of the series of t
	programs					U TABBATAN		bi îx	The C
f	Administrative expenses					n dales alle anathritists A fre en grown francis	The same of the sa	٠ ع <del>دية ,</del> ١- 5 ٣)*	19 3 December 1. 1.
g	End of year balance					_ No literation		٠	T. ELIZ.,
2	Provide the estimated percentage of the year	r end balance held a	s	<del></del>					
а	Board designated or quasi-endowment ▶	%	-						
b	Permanent endowment ▶ %								
c	Term endowment ▶ %								
	Are there endowment funds not in the posse	ssion of the organiza	ition that are held and	l adminis	tered for the				
	organization by	ooion or and organiza					Γ	Yes	No
	(i) unrelated organizations						3a(i)		1
	(ii) related organizations						3a(ii)		†
h	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule R2				3b		<del> </del>
4	Describe in Part XIV the intended uses of the	•					<u> </u>		٠
Pa	art VI. Land, Buildings, and Equi			ne 10					
	Description of investment	(a) Cost or other bar			(c) Accum	ulated	(d) Book	value	
	Sossi, pasin si linasanisin	(investment)	(other)	, Daois	depreci	ľ	(4) 500.		
1a	Land	<del> </del>	<del>-  </del>		There were	The second second second			
	Buildings				- 11 VA JACOB SELECT 743	a a garage of the pr			
	Leasehold improvements		46	,147				6	147
	Equipment			,341	<del>                                     </del>	<del></del>			341
	Other	<del></del>	7-5	1047	21	6,362			362
	I. Add lines 1a through 1e (Column (d) must e	equal Form 000 Par	X column (B) line 1	0(c) )					$\frac{302}{126}$
1014	. Add alles to though te (Column (d) Must t	squai i olili 330, Fal	A, Column (B), mile 1	U(U) /				~_	420

Schedule D (F	form 990) 2010 Ecology Action of Te	xas	74-1696145	Page <b>3</b>
#Part₂VII∄	Investments—Other Securities. See Form 9			
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-yea	ar market value
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				<u></u>
(D)				
(E)		<u></u>		
(F)			<u> </u>	
(G)		ļ		
(H)		ļ		
<u>(l)</u>		ļ	and the same of th	and the second of the second o
	n (b) must equal Form 990, Part X, col (B) line 12)	000 Part V Car 40		والمتلاء والمتلاي المتعالية مالينا المتعالية
Part VIII	Investments—Program Related. See Form		(2) 14 14 14 14	
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
(4)		<u> </u>	Cost of end-of-yea	- market value
(1)		<del> </del>	<u> </u>	
(2)	<del></del>	<del> </del>	<u>-</u>	<del></del>
(3)		<del> </del>		<del></del>
(4)				<del></del>
(5) (6)		<del>  </del>	<del> </del>	<del></del>
(7)	<del></del>	<del> </del>		
(8)		<del> </del>	<del></del>	
(9)	<del></del>			
(10)		<del>                                     </del>		
<del></del>	in (b) must equal Form 990, Part X, col (B) line 13)	<del> </del>	To CITUE ON THE PROPERTY OF THE	The SEE CONSIST AND STREET OF THE
Part IX*	Other Assets. See Form 990, Part X, line 15	D.		
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	·	<del></del>		
(9)				
(10)				
	in (b) must equal Form 990, Part X, col (B) line 15)	<del></del>	<u>-</u>	
Part X	Other Liabilities. See Form 990, Part X, line		कि, मेल, उन्हें इंड विकास	
1. (4) Fadassi	(a) Description of liability	(b) Amount	THE THE THE THE PARTY OF THE PA	Tierientetti ittiliteti.
	ncome taxes ued payroll	0 524	- the - the state of the state	"I LESSES INC. HELDER - THE TANKS -
<del></del>	oll taxes payable	4,442		net dell'ore el l'el colli
	ued leave payable			
	ued interest payable	2,329		
	dea incorest payable	1 433	ili, ar elimpiatismentisheracin	anders and and and a
(6) (7)		<del> </del>	ALECT COLUMN COL	
(8)	<del></del>	<del> </del>	DETROCKED LINES NOW IN A STATE	LINE DE LES LES LES LES LES LES LES LES LES LE
(9)		<del> </del>	recommendation of the property of the comments	
(10)	<del></del>	<del>                                     </del>	LOUP ALIMET ME USIN	articasticación evo
(11)	<del></del>	<del> </del>		
<del>* _ /</del>	nn (b) must equal Form 990, Part X, col (B) line 25)	15 744	The state of the s	THE DELEGATION
2 FIN 40 (A)	20 740) Feetente la Bort VIV arrando the text of the feeten	1	There was a super a superior of the same o	<u>ng magani maganar naga /an i y an wa</u> an album

2. FIN 48 (ASC 740) Footnote in Part XIV, 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)

	dule D (Form 990) 2010 Ecology Action of Texas	74-169614		Page 4
<u>≓Pa</u>	rt-XI. Reconciliation of Change in Net Assets from Form 990	to Audited Financial Sta	atem	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	479,836
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	513,334
3	Excess or (deficit) for the year Subtract line 2 from line 1	1	3	-33,498
4	Net unrealized gains (losses) on investments	[	4	
5	Donated services and use of facilities	(	5	
6	Investment expenses	(	6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8	1	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	nd 9	10	-33,498
Pa	irt XII Reconciliation of Revenue per Audited Financial State	ments With Revenue per	Ret	
1	Total revenue, gains, and other support per audited financial statements		1	479,836
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		الين الآي العندة	
а	Net unrealized gains on investments		新工产。 1	
þ	Donated services and use of facilities		Vietor Evrin	
C	Recoveries of prior year grants		B - 八百	
d	Other (Describe in Part XIV)	2d	MIL. IN	
9	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1		3	479,836
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		年1日	
а	Investment expenses not included on Form 990, Part VIII, line 7b		J' a' 31	
b	Other (Describe in Part XIV)	4b	اریکاگوم(ر) نامسان تاد	
C	Add lines 4a and 4b		4c	L
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	479,836
<u>₩</u> Ra	Reconciliation of Expenses per Audited Financial State	ements With Expenses p	er R	eturn
1	Total expenses and losses per audited financial statements		1	513,334
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		in it	
а	Donated services and use of facilities		en. Leng	
b	Prior year adjustments	2b	THE	
C	Other losses	2c	FEEL)	
đ	Other (Describe in Part XIV)	2d	7: 15 B	
0	Add lines 2a through 2d		2е	<u> </u>
3	Subtract line 2e from line 1		3	513,334
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	The 186	1
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	*. * # 123	1
b	Other (Describe in Part XIV)	4b	1.0%	
C	Add lines 4a and 4b		4c	
_5_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	513,334
Pa	int XIV. Supplemental Information			

Complete this part to 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 XI, line 2, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

74-1696145

Page 5

**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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Ecology Action of Texas

Employer identification number

74-1696145

Form 990, Part I, Line 6

Volunteers

Hours Logged by Volunteers:

Operations: 12 volunteers - 408 hours

Stubbs: 50 volunteers - 1,000 hours

County Fair: 8 volunteers - 24 hours

Form 990, Part III, Line 4a - First Achievement

- Conducts classroom visits to educate children about recycling.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Once Ecology Action receives our form 990 from our C.P.A. it is reviewed by our financial committee and compared to our bookkeeping data as held in After a review by our financial committee the Form 990 is sent to our Treasurer and the entire Board of Directors who review it for Once reviewed and any errors fixed the form 990 is filed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy The Board of Directors and the Co-directors constantly monitor the activity of the Organization and the conflict of interest policy.

Form 990, Part VI, Line 15b - Compensation Process for Officers All staff are hourly employees and receive the same hourly rate. Recommending an hourly rate is the responsibility of the staff who meet in Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization

Ecology Action of Texas

Employer identification number 74-1696145

weekly staff meetings. A consensus on any change in the hourly rate is required. On approval of any change in the hourly rate at a weekly staff meeting, the change in rate is sent to the Board of Directors for review and final approval. Compensation of staff is based on the financial health of the organization.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Ecology Action Makes our governing document, conflict of interest policy and financial statements available to the public by posting them on Guide star our website (www.ecology-action.org) and having them available by request.

							2010	
<u> </u>		For c	alendar year 2010,	or tax year beginning		, and ending		
Nam	е						Employer Id	entification Number
Ecology Action of Texas						74-169	6145	
F	orm 990, Pa	rt X	, Line 23	- Addition	al Informa	tion		
		Name	of lender			Relationship to di	squalified pers	son_
(1)	PeopleFund				None			
<u>(2)</u>	PeopleFund				None			
(3)	PeopleFund				None			
(4) (5)	John Deere	Inst	callment A	greement_	None			
(6)					<del> </del>	<del></del>		<del></del>
(7)					<del> </del>			
(8)						•		
(9)						· · · · · · · · · · · · · · · · · · ·	*	, = = = = =
(10)		. e (		<del></del>	<u> </u>	<del></del>	<del></del>	<del></del>
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	Original amour	nt	Data of lass	Maturity		Dana sumant tarma		Interest
(1)	borrowed 76,4	17	Date of loan 11/09/07	date 11/04/12		Repayment terms  30 monthly	<del></del> _	8 . 000
(2)	25,0		09/09/08	09/01/13		monthly		8.000
(3)	40,0		12/23/08	01/01/14		monthly		8.000
(4)	12,4	00	04/06/10	04/06/13	\$4,205	Annually		0.870
<u>(5)</u>	<del> </del>				<u> </u>			
(6)		——∔			<del> </del>			
<u>(7)</u>	<del></del>		<del></del>		<del> </del>	- <del></del>		
(8) (9)	· · · · · · · · · · · · · · · · · · ·		<del>}</del>		<del> </del>			<del></del>
(10)	<del></del>				<u> </u>			<del>-  </del>
	LINE CAN FAMILIATION OF THE	· ERMEL	PI LO LIKE CH	ediji de komunikaci saliye	Teneth Tempitates.	pen in plantan	A CENTRALINE	
		ecurity pr	ovided by borrower		<u> </u>	Purpose o		
(1)	Equipment					equipment		
(2)	Equipment		<del></del>			Equipment		
(3) (4)	Equipment none	<del></del>	<del></del>	<del></del>	Purchase	Equipment	<u> </u>	
(5)					Lurchase	CTACCOL		
(6)			· <del></del>	<del></del>	1	<del></del>		<del></del>
(7)_								
(8)			<del></del>					
(9)					<b></b>			
(10)	en della en en en en en en en en en en en en en	Y TO PARTIE AND	LEAT VEHIC PERCENT		TOTAL POLICE PARTY IN	WASHINGTON TO BE THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OWNER OF THE OWNER OWN	STEELSTEENS	RESERVE OF THE SECOND S
1-1-1	<u> </u>	·····'			Balance			lance due at
761		eration fu	rnished by lender			ng of year	<u> </u>	end of year
(1)	None None					38,946 20,720	<del></del>	23,249 16,228
(2) (3)	None		<del></del>	<del></del>		35,140		28,619
(4)	None			<del></del>		,		12,400
(5)								
(6)								
(7)								
(8)					<del> </del>		<del></del>	<del></del>
(9) (10)	<del></del>		<del></del>		<del>                                     </del>		<del></del>	<del></del>
(10) To	tals				<del>                                     </del>	4,806	<del></del>	80,496
<u></u>					<del></del>	<u> </u>		