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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-20)10		
Che	eck ıf a	pplicable C Name of organization BOY SCOUTS OF AMERICA		D Employe	er identification number
- Add	tress ch	nange EAST TEXAS AREA COUNCIL		75-080	8767
– Nai	ne cha	nge		E Telephor	ne number
– Init	ıal retu	rn Number and street (or P O box if mail is not delivered to street address)	Room/suite	(903) 5	97-7201
– Ter	mınate	1331 FAST FIFTH ST		(503) 5	
– Am	ended	return City or town, state or country, and ZIP + 4		G Gross rec	eıpts \$ 2,842,477
– Apr	olication	TYLER, TX 75701			
		F Name and address of principal officer	11/->	<u>.</u>	
		MIKE BALLEW	H(a) Isthisa	group return for a	affiliates? Yes No
		1331 E FIFTH ST TYLER,TX 75701	H(b) Are all a	affiliates includ	ed?
		11EER, 1X 73701	If "No	," attach a l	ıst (see ınstructıons)
Та	x-exen	npt status	H(c) Group	exemption	number ►
	obcit (e: ► http://www.etexscouts.com/	\dashv		
			<u> </u>		T
		ganization ✓ Corporation ← Trust ← Association ← Other ►	L Year of for	mation 1933	M State of legal domicile TX
Pa	rt I	Summary			
		Briefly describe the organization's mission or most significant activities THE MISSION OF THE BOY SCOUTS OF AMERICA IS TO PREPARE YOUN	IC DEODIE TO 1	M A V E E T U I	CAL AND MODAL
.		CHOICES OVER THEIR LIFETIME BY INSTILLING IN THEM THE VALUES			
aovemance					
<u> </u>					
<u>.</u>					
		Check this box 🔭 if the organization discontinued its operations or dispose		1	1
ð.		Number of voting members of the governing body (Part VI, line 1a)		3	69
ű		Number of independent voting members of the governing body (Part VI, line 1	•	4	69
Acuviues &	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	69
į		Total number of volunteers (estimate if necessary)		6	5
	1	Total unrelated business revenue from Part VIII, column (C), line 12		7	,
	b	Net unrelated business taxable income from Form 990-T, line 34		71	b 43,566
			Prior	Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,077,652	
	9	Program service revenue (Part VIII, line 2g)	-	480,64	651,182
9.6	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	25,078	12,193
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	328,739	401,318	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), I	ine	1,912,110	2,281,784
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		34,55!	<u> </u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		3 1 7 3 3 3	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines	5.5-		
\$		10)		1,229,34	1,282,774
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0
ੜੇ	ь	Total fundraising expenses (Part IX, column (D), line 25) ►234,215			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		724,63	829,079
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,988,53	2,140,712
	19	Revenue less expenses Subtract line 18 from line 12		-76,425	141,072
<u>ያ ያ</u>			Beginning	of Current	End of Year
net Assets of Fund Balances			Ye	ear	
8 E	20	Total assets (Part X, line 16)		2,559,906	
# D	21	Total liabilities (Part X, line 26)		327,205	
	22	Net assets or fund balances Subtract line 21 from line 20	•	2,232,70	1 2,373,773
	rt II	Signature Block			
mow		Ities of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete. Declaration of preparer (other than offi	cer) is based on a		
Sign	ı	Signature of officer	Dat		
Here		MIKE BALLEW SCOUT EXECUTIVE			
		Type or print name and title			
		Print/Type Preparer's signature Charles Wayne Barton		Check if self-	_ PTIN
Paid	-	preparer's name	[employed 🕨	
Prepa	arer				Firm's EIN
Use (Firm's address • 821 ESE LOOP 323 STE 460			Phone no • (903) 597-
		TYLER, TX 757019613			2021
1ay t	he IR	S discuss this return with the preparer shown above? (see instructions) .			┌Yes ┌No

1	Check if Sche	of Program Service Adule O contains a response organization's mission	Accomplishments to any question in this Part III		F
_		organization's mission			
_					
THEIF	R LIFETIME BY INST	Y SCOUTS OF AMERICA	IS TO PREPARE YOUNG PEOPLE LUES OF THE SCOUT OATH AND		RAL CHOICES OVER
	the prior Form 990 o	r 990-EZ?	rogram services during the year w		es 🗸 No
	•	ese new services on Schedu			
	services?		significant changes in how it cond		es 🗸 No
	If "Yes," describe the	se changes on Schedule O			
	Section 501(c)(3) ar	nd 501(c)(4) organizations	each of the organization's three la and section 4947(a)(1) trusts are venue, if any, for each program se	required to report the amount o	
 4a	(Code) (Expenses \$	1,784,432 including grants of \$) (Revenue \$)
	IS TO PREPARE YOUNG	PEOPLE TO MAKE ETHICAL AND M	EMBERS AND PARTICIPANTS IN 17 EAST T IORAL CHOICES OVER THEIR LIFETIME BY S IN THE COUNCIL DURING 2010 SEE PA	INSTILLING IN THEM THE VALUES OF T	HE SCOUT OATH AND
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program serv (Expenses \$	ices (Describe in Schedule including	e O) g grants of \$) (Revenue \$)
4e	Total program servi	ce expenses ⊧ \$	1,784,432		

Part TV	Checklist	of Re	auired	Schedules
	CIICCNIISE	01 110	uun cu	Schoules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i> complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20Ь		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2010)

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
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 12			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
ь	return	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		No
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		N o
	were not tax deductible?	6b		No
,	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	74	163	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Νο
•	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νο
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
LO -	Section 501(c)(7) organizations. Enter Instruction fees and capital contributions included on Part VIII. line 12			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νο
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
4⇒	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		No

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

Check if Schedule O contains a response to any question in this Part VI										. F	7
---	--	--	--	--	--	--	--	--	--	-----	---

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
3	other officer, director, trustee, or key employee?	2		N o
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
	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	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	130	162	
	The section in the section of the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its 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		Νo
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Upon request 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. See Additional Data Table			

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

(903) 597-7201

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, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization	•	elated o	rganı	ızatı	on c	ompen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi	((C) (che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) SEE ATTACHED SCHEDULE 1 Director	0 00	х						0	0	0
(2) MIKE BALLEW SCOUT EXECUTIVE	55 00				х			194,789	0	27,597
						<u> </u>				

\$100,000 in compensation from the organization **F**0

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

	(A) Name and Title	(B) Average hours per	1	tion ((D) Reportable compensation from the	(E) Reportable compensation from related	á	(F) Estima amount o compens	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	C	from t rganızatı relatı organıza	the on and ed
•								F			_		
_	Total from continuation sheet								104 700				27.507
<u> </u>	Total (add lines 1b and 1c) .							<u> </u>	194,789				27,597
	Total number of individuals (in \$100,000 in reportable compe					ted	above)) who	received more tha	n		_	
										-		Yes	No
	Did the organization list any fc on line 1a? <i>If</i> "Yes," complete S							ee,o •	r highest compens	ated employee	3		Νo
	For any individual listed on line organization and related organ individual										4	Yes	
	Did any person listed on line 1 services rendered to the organ		-				-		-	r individual for	5		Νο
S-6	ection B. Independent Co	ntractors											
	Complete this table for your five \$100,000 of compensation from	e highest comper		ndep	ende	ent c	ontrac	tors	that received more	than			
		(A) ame and business add							Descr	(B) option of services		(C Compen	
_													
_													
_											- 1		

Part VIII Statement of Revenue			(B) Related or	(C) Unrelated	(D)
			exempt function revenue	business revenue	excluded from tax under
					512, 513, or 514
## ## 1a Federated campaigns 1a	143,823				
b Membership dues 1b					
ري و C Fundraising events 1c	163,753				
च्च d Related organizations 1d	83,420				
E Government grants (contributions)					
b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	826,095				
Total. Add lines 1a-1f		1,217,091			
	6-4-	1,211,001			
Busines 2a LEARNING FOR LIFE	ss Code	2 24-	2 21-		
g 2a LEARNING FOR LIFE B CAMPING	900099 721210	3,217 228,360	3,217 228,360		
c ACTIVITIES	900099	419,605			
Ž d					
Busines 2a LEARNING FOR LIFE b CAMPING c ACTIVITIES d e All other program service revenue g Total. Add lines 2a-2f					
f All other program service revenue					
g Total. Add lines 2a-2f		651,182			
3 Investment income (including dividends, interest		651,162			
and other similar amounts)	ŀ	12,193			12,19
4 Income from investment of tax-exempt bond proceeds	<u> </u>	0			
5 Royalties	ŀ	0			
	rsonal				
6a Gross Rents					
b Less rental expenses					
c Rental income					
or (loss) d Net rental income or (loss)		0			
	ther				
7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)		0			
Sa Gross income from fundraising events (not including \$ 163,753 of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b					
* a	452,731				
b Less direct expenses b c Net income or (loss) from fundraising events	323,839	128,892			128,89
9a Gross income from gaming activities See Part IV, line 19 . a		120,032			120,0
b Less direct expenses b					
c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less					
returns and allowances .					
a h lang and a said a la	383,918				
b Less cost of goods sold b c Net income or (loss) from sales of inventory •	236,854	147,064			147,06
	ss Code	217,004			, 50
11a OIL & GAS WKING INTEREST	211110	54,819		54,819	
	900099	26,099	26,099	·	
b MISCELLANEOUS	110000	41,135	_3,333		41,13
C FORESTRY INCOME	110000	3,309			3,30
d All other revenue		3,309			3,30
e Total. Add lines 11a-11d		125,362			
12 Total revenue. See Instructions					
		2,281,784		54,819 orm 990 (2	

Dor-					Page 10
Pal	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must li other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	Скрепзез	general expenses	Схрепзез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	28,859	28,859		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	28,839	20,039		
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	194,789	154,889	11,684	28,216
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			· ·
7	Other salaries and wages	795,619	632,649	47,722	115,248
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	71,030	54,015	7,281	9,734
9	Other employee benefits	140,676	105,317	15,131	20,228
10	Payroll taxes	80,660	65,001	4,585	11,074
а	Fees for services (non-employees) Management	0	,	,	, <u>, </u>
Ь	Legal	0			
c	Accounting	14,650	9,083	5,128	439
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	79,252	73,407	1,712	4,133
17	Travel	100,002	91,282	2,545	6,175
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2-,-22	3,212	
19	Conferences, conventions, and meetings	72,037	69,881	2,100	56
20	Interest	0			
21	Payments to affiliates	31,294	26,087	1,784	3,423
22	Depreciation, depletion, and amortization	79,841	71,348	2,487	6,006
23	Insurance	41,758	37,231	1,326	3,201
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	SUPPLIES	242,243	237,640	1,057	3,546
b	RENTAL & MAINTENANCE	36,713	35,771	276	666
c	RECOGNITION AWARDS	27,036	22,491		4,545
d	PRO FESSIO NAL FEES	29,314	18,192	10,119	1,003
е	Postage and Shipping	23,197	12,602	4,849	5,746
f	All other expenses	51,742	38,687	2,279	10,776
25	Total functional expenses. Add lines 1 through 24f	2,140,712	1,784,432	122,065	234,215
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			874,515	1	987,198
	2	Savings and temporary cash investments		600,000	2	600,000	
	3	Pledges and grants receivable, net		78,074	3	146,650	
	4	Accounts receivable, net			45,226	4	31,293
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key e	mployees, and			
		Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	ploye	rs, and			
¥.		Schedule L				6	0
Assets	7	Notes and loans receivable, net				7	0
ď	8	Inventories for sale or use			115,430	8	120,267
	9	Prepaid expenses and deferred charges			82,851	9	15,135
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	2,141,024			
	b	Less accumulated depreciation	10b	1,432,503	763,810	10c	708,521
	11	Investments—publicly traded securities			11	0	
	12	Investments—other securities See Part IV, line 11	•		12	0	
	13	Investments—program-related See Part IV, line 11		13	0		
	14	Intangible assets			14	0	
	15	Other assets See Part IV, line 11		15	7,980		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,559,906	16	2,617,044		
	17	Accounts payable and accrued expenses .			51,126	17	62,896
	18	Grants payable				18	
	19	Deferred revenue			63,981	19	5,270
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule	D.			21	_
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	_
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D	•		212,098	25	175,105
	26	Total liabilities. Add lines 17 through 25			327,205	26	243,271
-S		Organizations that follow SFAS 117, check here ► ✓ and complete through 29, and lines 33 and 34.	ete lir	nes 27			
uc	27	Unrestricted net assets			1,532,969	27	1,553,424
<u>छ</u>	28	Temporarily restricted net assets		699,732		820,349	
Fund Balances	29	Permanently restricted net assets		355,752	29	020,040	
nn	29	·		dat a		29	
		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	ı comp	Diete			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
ds s	32	Retained earnings, endowment, accumulated income, or other ful				32	
Net #	33	Total net assets or fund balances			2,232,701	33	2,373,773
ž	34	Total liabilities and net assets/fund balances			2,559,906		2,617,044
ı		rotal habilities alla liet assets/lulla balalites			2,339,906	54	2,017,044

Ра	Check if Schedule O contains a response to any question in this Part XI			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2.2	281,78
2	Total expenses (must equal Part IX, column (A), line 25)	2			140,71
3	Revenue less expenses Subtract line 2 from line 1	3		1	L41,07
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,2	232,70
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		2,3	373,77
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O	.	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		Νo

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

		OF AMERICA NREA COUNCIL	75-0808767						
Pa	rt I	Reason for Public Charity Status (All organizations must complete this par		ns					
The	organiz	zation is not a private foundation because it is (For lines 1 through 11, check only one box							
1	Γ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	Г	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state							
5	Γ	An organization operated for the benefit of a college or university owned or operated by a g	overnmental unit d	escribed	in				
_	_	section 170(b)(1)(A)(iv). (Complete Part II)	A \/\						
6 7	√ 	A federal, state, or local government or governmental unit described in section 170(b)(1)(An organization that normally receives a substantial part of its support from a government			مناطنت				
,	1*	described in section 170(b)(1)(A)(vi) (Complete Part II)	ar diffe or from the g	jenerar p	ивпс				
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)							
9	Γ	An organization that normally receives (1) more than 331/3% of its support from contribut	tions, membership	fees, and	gros	ss			
		receipts from activities related to its exempt functions—subject to certain exceptions, and	(2) no more than 3	3 3 1/3% o	f				
		its support from gross investment income and unrelated business taxable income (less se	ction 511 tax) from	busines	ses				
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part I	II)						
10	Γ	An organization organized and operated exclusively to test for public safety Seesection 50	9(a)(4).						
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the function one or more publicly supported organizations described in section 509(a)(1) or section 50 the box that describes the type of supporting organization and complete lines 11e through a Type I b Type II c Type III - Functionally integrated	9(a)(2) See sectio 11h	•	(3).	Check			
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by other than foundation managers and other than one or more publicly supported organization section 509(a)(2)	·						
f		If the organization received a written determination from the IRS that it is a Type I, Type I check this box	I or Type III suppo	orting org	janiza	ation,			
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons?		_					
		(i) a person who directly or indirectly controls, either alone or together with persons descr	` '		res	No			
		and (III) below, the governing body of the the supported organization?	<u> </u>	11g(i)					
		(ii) a family member of a person described in (i) above?	⊢	L1g(ii)					
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	1	l1g(iii)					
h		Provide the following information about the supported organization(s)							

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organizati col (i) list your gove	Is the organization in col (i) listed in your governing document?		ofy the on in your t?	(vi) Is the organization in col (i) organized in the U S ?		(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

S	ection A. Public Support	<u> </u>			, ,				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,185,89	9 1,354,12	8 1,335,865	1,159,477		1,148,515	6,183,884	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0	
4	Total. Add lines 1 through 3	1,185,89	9 1,354,12	8 1,335,865	1,159,477		1,148,515	6,183,884	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included							44,174	
	on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public Support. Subtract line 5 from line 4							6,139,710	
S	ection B. Total Support	1	1	·	I				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	010	(f) Total	
7	A mounts from line 4	1,185,899	1,354,128	1,335,865	1,159,477	1	.,148,515	6,183,884	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	197,337	50,619	36,487	27,742		15,502	327,687	
9	Net income from unrelated business activities, whether or not the business is regularly carried on		105,380	116,350	50,809		54,819	327,358	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	488,598	655,552	792,476	857,640	1	.,061,200	3,855,466	
11	Total support (Add lines 7 through 10)							10,694,395	
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12		3,855,466	
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	l, thırd, fourth, or f	ıfth tax year as a	501(c)(3) organı	zation,	
_S	ection C. Computation of Pul								
14	Public Support Percentage for 201	0 (line 6 column	(f) divided by line	11 column (f))		14		57 410 %	
15	Public Support Percentage for 200	9 Schedule A, Pa	rt II, line 14			15		58 870 %	
b	33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2009. If the organization did not check the 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 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 measurements in Part IV how the organization measurements organization 10%-facts-and-circumstances test	tion meets the "f ets the "facts and	acts and circums I circumstances"	tances" test, che test The organiz	ck this box and s i ation qualifies as	t op here. a publicl	Explain y suppor	ted ▶┌	
18	15 is 10% or more, and if the organization Explain in Part IV how the organization Private Foundation If the organization	nization meets th tion meets the "f	e "facts and circi acts and circums	umstances" test, o tances" test The	check this box an organization qua	ld stop h e lifies as	ere. a publicly	<i>′</i> ▶ ┌	
10	instructions	ion ala not check	a box on time 13	, 100, 100, 1700	170, CHECK CHIS	DOX allu	266	▶ □	

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15		
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 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 line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493206001131

OMB No 1545-0047

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.

	me of the organization	ii 330. F See separate ilistructions.	Emple	oyer identification number			
BOY	SCOUTS OF AMERICA						
	T TEXAS AREA COUNCIL	in de la colle di cita e		808767			
Ρā	organizations Maintaining Donor Adv organization answered "Yes" to Form 990,		nas c	or Accounts. Complete if the			
	organization answered Tes to Form 550,	(a) Donor advised funds	(1	b) Funds and other accounts			
1	Total number at end of year	• •		-			
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?						
6							
Pa	rt II Conservation Easements. Complete if t	the organization answered "Yes" to	Form	990, Part IV, line 7.			
2	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualifie easement on the last day of the tax year	or pleasure) Preservation of an A	ertıfıed				
				Held at the End of the Year			
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
c	Number of conservation easements on a certified histor	rıc structure ıncluded ın (a)	2c				
d	Number of conservation easements included in (c) acqu						
3	Number of conservation easements modified, transferre	ed, released, extinguished, or terminated	by the	e organization during			
	the taxable year 🛌						
4	Number of states where property subject to conservation	on easement is located 🛌					
5	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?	he periodic monitoring, inspection, handl	ling of	violations, and Yes No			
6	Staff and volunteer hours devoted to monitoring, inspec	ting and enforcing conservation easeme	ents du	ring the year 🛌			
7	A mount of expenses incurred in monitoring, inspecting,	, and enforcing conservation easements	during	the year ► \$			
8	Does each conservation easement reported on line $2(d+170(h)(4)(B)(i))$ and $170(h)(4)(B)(ii)$?) above satisfy the requirements of sect	ion	┌ Yes			
9	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						
Par	TIII Organizations Maintaining Collections Complete if the organization answered "Ye		r Oth	er Similar Assets.			
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIV, the text of the footnote to its finan	16, not to report in its revenue statemen r public exhibition, education or research	h ın fur				
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub 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, historic following amounts required to be reported under SFAS 1		financ	ıal gaın, provide the			

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Ar	t, His	stori	<u>cal T</u>	<u>reasu</u>	res, or Oth	ner	Similar Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing	that are	e a significan	t us	e of its collection	ו	
а	Public exhibition		d	Γ	Loan	orexch	nange program	ms			
b	Scholarly research		e	Γ	Othe	er					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furth	er the o	rganızatıon's	exe	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,				ımı		Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	orgar	nization		"Ye	s" to Form 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	forc	ontrıb	utions o	r other asset	s n	ot _	Yes	Г No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able				A		
_								_	A mou	ınt	
c c	Beginning balance						10	-			
d	Additions during the year						10	-+			
e f	Distributions during the year						10	-+			
f	Ending balance		_				11	r	-		
2a	Did the organization include an amount on Fo		ie 21?	1					i_	Yes	│ No
	If "Yes," explain the arrangement in Part XIV				1 113 4				71.4.1.4.0		
Pa	rt V Endowment Funds. Complete	f the organizatio (a)Current Year)Prior						Neour V	ears Back
1a	Beginning of year balance	(a) Current Tear	()	JEHOL	i eai	(c) w	J rears back	(u)	lilee reals back (e	Ji Oui Ti	ears back
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships					+					
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end halance held	 as						I		
a	Board designated or quasi-endowment	r end balance neld	us								
b	Permanent endowment										
c 3a	Term endowment F Are there endowment funds not in the posse:	ssion of the organiz	ation	that :	ara ha	ld and a	dministered f	ort	he		
Ju	organization by	ston of the organiz	.ucion	tildt (110 110	ia ana a	ammisterea i	0, 1	110	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
	If "Yes" to 3a(II), are the related organizatio	•						•	3b		<u></u>
4	Describe in Part XIV the intended uses of th										
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	See F	orm '	990, Pa	irt X, line 19	<u>0.</u>			
	Description of investment					or other estment)	(b)Cost or oth basis (other)		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land						388,4	31			388,431
b	Buildings						828,0	87	687,615		140,472
c	Leasehold improvements						185,4	20	139,286		46,134
d	Equipment						208,3	376	137,311		71,065
e	Other	<u> </u>					530,7	10	468,291		62,419
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c).	.)			▶		708,521
									Schedule D (F	orm 9	90) 2010

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	,	
Part VIII Investments—Program Related. See		<u>. </u>
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(D) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value
(4)	× 1011	(D) Book value
Tabal (Column (h) should equal Form 000, Park V cal (P) line 1	E)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
OTHER	3,721	
CUSTODIAL ACCOUNTS	171,384	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	175,105	

_	Total revenue (Form 990, Part VIII, column (A), line 12)	+	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	 urn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	1	
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per R	<u>eturn</u>
1	Total expenses and losses per audited financial statements	₁	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	+	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b	1	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Par	t XIV Supplemental Information		
Con	nplete this part to provide the descriptions required for Part II, lines $3,5,$ and $9,$ Part III, lines 1 a and $4,$ P	art IV , Iır	es 1b and 2b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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 X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part X	Part X FIN48 Footnote	UNDER FIN 48, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THE POSITION WILL BE SUSTAINED THE IMPLEMENTATION OF FIN 48 HAD NO IMPACT ON THE EAST TEXAS AREA COUNCIL'S FINANCIAL STATEMENTS THE COUNCIL DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS NO INTEREST OR PENALTIES WERE ACCRUED AS OF JANUARY 1, 2009, AS A RESULT OF THE ADOPTION OF FIN 48 FOR THE YEAR ENDED DECEMBER 31, 2010 THERE WERE NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN ITS FINANCIAL STATEMENTS
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	INVESTMENT IN EAST TEXAS BOY SCOUT FOUND \$282061

DLN: 93493206001131

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding **Fundraising or Gaming Activities**

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

Open to Public Inspection

Name of the organization BOY SCOUTS OF AMERICA **Employer identification number**

EAST TEXAS AREA COUNCIL					75-0808767	
Part I Fundraising Ac	tivities. Complet	e if the o	rganıza	tion answered "Yes"	to Form 990, Part IV	, line 17.
 Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have or key employees listed in If "Yes," list the ten higher to be compensated at lease 	licitations s a written or oral agre Form 990, Part VII st paid individuals oi	eement wit) or entity r entities (e f g th any ind in conne fundraise	Solicitation of no Solicitation of go Solicitation of go Special fundraisii Iividual (including office ction with professional	n-government grants vernment grants ng events ers, directors, trustees fundraising services? ents under which the fui	
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity		er have ody or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			.			

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

Pa	rt II	Fundraising Events. Components than \$15,000 on Form				
			(a) Event #1 POPCORN SALES (event type)	(b) Event #2 DISTINQUISHED CITIZEN AWARD (event type)	(c) O ther Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
Φ	1	Gross receipts	425,899	157,173	33,412	616,484
Revenue	2	Less Charitable contributions		138,138	25,615	163,753
	3	Gross income (line 1 minus line 2)	425,899	19,035	7,797	452,731
	4	Cash prizes	131,539			131,539
မှာ	5	Non-cash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages				
<u>D</u> reg	8	Entertainment				
Δ	9	Other direct expenses .	165,468	19,035	7,797	192,300
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)	🛌	323,839
	11	Net income summary Combine lin				128,892
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
enses	2	Cash prizes				
pen	3	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
₽ B	5	Other direct expenses				
	6	Volunteer labor	ΓYes % ΓNο	Γ Yes % Γ No	┌ Yes % ┌ No	
		Direct expense summary Add lines	-			
	8	Net gaming income summary Comb	ille illies I alia / ili colu		<u> </u>	I .
9		er the state(s) in which the organiza				
a b		the organization licensed to operate No," Explain				· I Yes I No
10a b		re any of the organization's gaming li Yes," Explain			the tax year?	Tyes TNo

11	Does the organization operate ga	aming activities with nonmembers?		Г үе	s Γ_{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity		
	formed to administer charitable (jaming?		Г _{Yе}	s Γ_{No}
13	Indicate the percentage of gamin	ng activity operated in			
а	The organization's facility			1	
b	An outside facility			,	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	d	
	Name 🟲				
	Address 🟲				
15a		ntract with a third party from whom th		_	_
					s No
ь		ning revenue received by the organizated by the third party 🟲 \$	ation > \$ and the		
c	If "Yes," enter name and address	5			
	Name 🟲				
	Address 🟲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation l	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а		er state law to make charitable distrib		_	_
p.				· Ye	s No
D		required under state law distributed activities during the tax year - \$	to other exempt organizations or spent		
Par		<u>-</u>	r responses to question on Schedul	e G (see	
	Identifier	ReturnReference	Explanation		

Schedule I

(Form 990)

Department of the Treasury

DLN: 93493206001131

OMB No 1545-0047

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

Attach to Form 990

Inspection

Internal Revenue Service Employer identification number Name of the organization BOY SCOUTS OF AMERICA 75-0808767 EAST TEXAS AREA COUNCIL Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be 1 (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization section grant valuation non-cash assistance or assistance cash or government ıf applıcable assistance (book, FMV, appraisal, other)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) REG FOR LOW INCOME	318	3,707			
(2) REG FOR LEARNING FOR LIFE	98	1,239			
(3) REG FOR HISPANIC OUTREACH	1331	19,567			
(4) REG FOR AFRICAN AMERICAN	338	3,098			
(5) HISPANIC OUTREACH DIRECTOR	5	1,214			
(6) FEES FOR 3R DAD & LAD	1	34			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Grantmaker's Description		AMOUNTS PAID ARE PRIMARILY FOR REGISTRATION FEES PAID TO THE NATIONAL BOY SCOUTS OF AMERICA
of How Grants are Used		FOR INDIVIDUALS WHO MEET THE QUALIFICATIONS

Schedule I (Form 990) 2010

DLN: 93493206001131

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organizati	on
BOY SCOUTS OF AMERICA	
EAST TEXAS AREA COUNCIL	

Employer identification number

75-0808767

Pa	It I Questions Regarding Compensation	n			
				Yes	Νo
1a		ovided any of the following to or for a person listed in Form I to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses described.	rganızatıon follow a written policy regarding payment or ribed above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive		2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all t				
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	payment from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	, line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"		7		No
8	Were any amounts reported in Form 990, Part VII,				
		n Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$?	e rebuttable presumption procedure described in Regulations	9		No

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ	
(1) MIKE BALLEW	(I) (II)	194,789			18,602	8,995	222,386		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O

As Filed Data -

DLN: 93493206001131

OMB No 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Name of the organization BOY SCOUTS OF AMERICA EAST TEXAS AREA COUNCIL

(Form 990 or 990-EZ)

Employer identification number 75-0808767

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE REQUIRED DOCUMENTS ARE PROVIDED UPON REQUEST

DLN: 93493206001131

2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
BOY SCOUTS OF AMERICA
EAST TEXAS AREA COUNCIL

ENDINORM
TO STANDARD TO STANDA

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country	(d) te Total income)	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations (Complete the tax year.)	If the organizatio	n answered "Yes"	on Form 990, Part	t IV, line 34 becau		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		g) 512(b)(13 trolled nization
(1) EAST TEXAS BOY SCOUT FOUNDATION						Yes	No
1331 E FIFTH ST	SUPPORT THE EAST TEXAS AREA COUNCIL BOY SCOUTS OF	TX	501(C)(3)	11a	N/A		No
TYLER, TX 75701 75-6015667	AMERICA					<u> </u>	
						+	
For Drivery Ast and Denoviyork Deduction Ast Notice and the Instruct	hiana fan Farm 200	Cat No E	01357		Schodulo D /	Farm 000	\

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) end-of-year sssets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j) General or managing partner?		(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	y) re of f-year sets		(h) Percentage ownership

(6)

Part V	Transactions With Related Organizations (Complete if the organization answered	"Yes" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)			
Not e.	Complete line 1 if any entity is listed in Parts II, III or IV			_		Yes	No
1 During th	he tax year, did the orgranization engage in any of the following transactions with one or more related o	rganızatıons lısted ın Part	s II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity							No
b Gift, grant, or capital contribution to other organization(s)							No
c Gıft, g	c Gift, grant, or capital contribution from other organization(s)						
d Loans or loan guarantees to or for other organization(s)							No
e Loans	s or loan guarantees by other organization(s)			- -	1e		No
f Sale o	of assets to other organization(s)			:	1f		No
g Purch	nase of assets from other organization(s)				1g		No
h Excha	ange of assets				1h		No
i Lease	of facilities, equipment, or other assets to other organization(s)			_	1i		No
j Lease	of facilities, equipment, or other assets from other organization(s)			-	1j	Yes	
k Perfo	rmance of services or membership or fundraising solicitations for other organization(s)			Ī	1k		No
I Perfor	mance of services or membership or fundraising solicitations by other organization(s)				11		No
m Sharır	ng of facilities, equipment, mailing lists, or other assets			Ţ	1m		No
n Sharı	n Sharing of paid employees						No
o Reiml	bursement paid to other organization for expenses				10		No
p Reimb	bursement paid by other organization for expenses				1р		No
q Other	r transfer of cash or property to other organization(s)			<u></u>	1q		No
r Other	r Other transfer of cash or property from other organization(s)						No
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this lin	e, including covered relat	ionships and transacti	ıon thresholds			
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(c Method of deter Invo	minii	ng amo	ount
(1) EAST TEXA	AS BOY SCOUT FOUNDATION	J J	7,800	FMV			
(2) EAST TEXA	AS BOY SCOUT FOUNDATION	С	83,420	FMV			
(3)							_
(4)							
(5)							

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

I Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The volunteer Council President appoints a qualified compensation committee to review the Scout Executive's goals, accountability, and written performance evaluation to determine the compensations. The compensations are approved by the Council President in consultation with our National Boy Scout of America representative to insure consistency and comparison to other Scout Councils. The Council President brings the Compensation Committee's recommendations for compensation to the volunteer Executive Committee for final approval.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	THE OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST POLICY STATEMENT ANNUALLY

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	THE BOARD OF DIRECTORS APPROVES THE AUDITED FINANCIAL STATEMENTS FROM WHICH THE FORM 990 IS PREPARED THE FORM 990 IS PROVIDED FOR REVIEW BEFORE FILING TO THE TREASURER, ASSISTANT TREASURER, AUDIT COMMITTEE, AND THE EXECUTIVE BOARD COMMITTEE

Identifier	Return Reference	Explanation	
	Reference	Client Note 1 - PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS ADDITIONAL INFORMATION IN 2010, THE EAST TEXAS AREA COUNCIL SERVED 14,283 YOUTH THROUGH-OUT 17 COUNTIES IN EAST TEXAS CUB SCOUTS (BOYS AGES 7 TO 10) MEET IN WEEKLY DENS AND ON A MONTHLY BASIS WITH THEIR PACK FAMILY GROUP ACTIVITIES ARE SHARED EMPHASIS IS PLACED ON COOPERATION, TEAMWORK, AND THE CUB SCOUT MOTTO, "DO YOUR BEST" AS BOYS ADVANCE THROUGH RANKS AND MEET REQUIREMENTS THEY ARE ENCOURAGED AND RECOGNIZED WITH BADGES 5,413 CUB SCOUTS WERE MEMBERS BOY SCOUTS (BOYS AGES 11 TO 17) MEET IN WEEKLY MEETINGS CONDUCTED BY YOUTH LEADERS THEY CAMP AND EXPERIENCE OTHER OUTDOOR ADVENTURES WHICH ARE INTEGRATED WITH A COMPREHENSIVE ADVANCEMENT PROGRAM BETHEY AND SELECTION OF THE SELECTION OF THE PROGRAM SET OF THE PROGR	
<u> </u>		,,	

1	Mr Bart Austin		1331 E Fifth St, Tyler Texas 75701
2	Mr Jeff Austın III		1331 E Fifth St, Tyler Texas 75701
3	Mr Bill Bellenfant		1331 E Fifth St, Tyler Texas 75701
4	Mr Farrar Bentley		1331 E Fifth St, Tyler Texas 75701
5	Dr Andrew Bentley		1331 E Fifth St, Tyler Texas 75701
6	Mrs Maryann Bentley		1331 E Fifth St, Tyler Texas 75701
7	Judge Bascom Bentley III		1331 E Fifth St, Tyler Texas 75701
8	Mr Leo Berman		1331 E Fifth St, Tyler Texas 75701
9	Mr Shane Best		1331 E Fifth St, Tyler Texas 75701
10	Dr Aaron Blackwelder		1331 E Fifth St, Tyler Texas 75701
11	Mr Mike Brannon		1331 E Fifth St, Tyler Texas 75701
12	Mrs Ina Brundrett		1331 E Fifth St, Tyler Texas 75701
13	Mr Larry Burks		1331 E Fifth St, Tyler Texas 75701
14	Mr David Bush		1331 E Fifth St, Tyler Texas 75701
15	Mr Chad Cargile		1331 E Fifth St, Tyler Texas 75701
16	Mr Ronnie Collins		1331 E Fifth St, Tyler Texas 75701
17	Mrs Beverly Collins		1331 E Fifth St, Tyler Texas 75701
18	Mr Jim Cousineau		1331 E Fifth St, Tyler Texas 75701
19	Mr Bryan Cyr		· · · · · · · · · · · · · · · · · · ·
20	Mr Terrence Dixon		1331 E Fifth St, Tyler Texas 75701
21	Mr Jeff Doran		1331 E Fifth St, Tyler Texas 75701
			1331 E Fifth St, Tyler Texas 75701
22	Mr Myles Elbel		1331 E Fifth St, Tyler Texas 75701
23	Mr Dwight Fennell	Council Describent	1331 E Fifth St, Tyler Texas 75701
24	Mr Lee Gibson	Council President	1331 E Fifth St, Tyler Texas 75701
25	Mr Robert Gonzalez		1331 E Fifth St, Tyler Texas 75701
26	Mr Carroll Greenwaldt		1331 E Fifth St, Tyler Texas 75701
27	Ms Marsha Harrison		1331 E Fifth St, Tyler Texas 75701
28	Mr Zelton Harvey		1331 E Fifth St, Tyler Texas 75701
29	Mr David Harwood		1331 E Fifth St, Tyler Texas 75701
30	Mr Billy Hibbs, Jr		1331 E Fifth St, Tyler Texas 75701
31	Mr Roddey Hogan		1331 E Fifth St, Tyler Texas 75701
32	Mr Ronnie Horsley	Vice-president	1331 E Fifth St, Tyler Texas 75701
33	Mr David Hudson		1331 E Fifth St, Tyler Texas 75701
34	Mr Charles Ireland		1331 E Fifth St, Tyler Texas 75701
35	Mr Ray Jackson		1331 E Fifth St, Tyler Texas 75701
36	Mr David Jones		1331 E Fifth St, Tyler Texas 75701
37	Mr Nathan Jones		1331 E Fifth St, Tyler Texas 75701
38	Mr Michael McNally	Foundation President	1331 E Fifth St, Tyler Texas 75701
39	Mr Byron Meads		1331 E Fifth St, Tyler Texas 75701
40	Mr Tım Meads	Vice-president	1331 E Fifth St, Tyler Texas 75701
41	Mr Andrew Melontree		1331 E Fifth St, Tyler Texas 75701
42	Mr Sam Mezayek		1331 E Fifth St, Tyler Texas 75701
43	Mr John Minton	Attorney	1331 E Fifth St, Tyler Texas 75701
44	Mr Foster Murphy		1331 E Fifth St, Tyler Texas 75701
45	Mr Mike Northcutt	Vice-president	1331 E Fifth St, Tyler Texas 75701
46	Mr Milton O'Neal		1331 E Fifth St, Tyler Texas 75701

47	Mr Joe Odom		1331 E Fifth St, Tyler Texas 75701
48	Ms Tina Peavy		1331 E Fifth St, Tyler Texas 75701
49	Mr James Perkins		1331 E Fifth St, Tyler Texas 75701
50	Mr Roy Price		1331 E Fifth St, Tyler Texas 75701
51	Mr Greg Richbourg	Treasurer	1331 E Fifth St, Tyler Texas 75701
52	Mr VG Rollins		1331 E Fifth St, Tyler Texas 75701
53	Mr Steven Roosth		1331 E Fifth St, Tyler Texas 75701
54	Ms Doris Sharp	Vice-president	1331 E Fifth St, Tyler Texas 75701
55	Frank Shockley	•	1331 E Fifth St, Tyler Texas 75701
56	Dr David Shows		1331 E Fifth St, Tyler Texas 75701
57	Ms Stancy Simpson		1331 E Fifth St, Tyler Texas 75701
58	Mr Bob Skorkowsky		1331 E Fifth St, Tyler Texas 75701
59	Mr Buddy Sloan	Commissioner	1331 E Fifth St, Tyler Texas 75701
60	Mr Bill Smialek		1331 E Fifth St, Tyler Texas 75701
61	Mr Pat Stacey	Vice-president	1331 E Fifth St, Tyler Texas 75701
62	Mr Gene Stewart	Vice-president	1331 E Fifth St, Tyler Texas 75701
63	Judge Bill Stoudt	•	1331 E Fifth St, Tyler Texas 75701
64	Mr Bill Teague		1331 E Fifth St, Tyler Texas 75701
65	Ms Linda Thomas	Past President	1331 E Fifth St, Tyler Texas 75701
66	Ms Lynn Vincent		1331 E Fifth St, Tyler Texas 75701
67	Dr Patrick Walker		1331 E Fifth St, Tyler Texas 75701
68	Mr Jesse Wicks		1331 E Fifth St, Tyler Texas 75701
69	Mr Robert Wilson		1331 E Fifth St, Tyler Texas 75701
00	WII TODOIT WIISON		1001 ET Hill Ot, Tyler Texas 70701

All persons listed on this schedule not specifically identified otherwise are trustees. No officer, director, or trustee on this schedule receives compensation, contributions to employee benefit plans and deferred compensation plans, nor do they have an expense account or allowance

2010

FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

CLIENT 23060

BOY SCOUTS OF AMERICA EAST TEXAS AREA COUNCIL

75-0808767

5/23/11

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PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

ADDITIONAL INFORMATION.

IN 2010, THE EAST TEXAS AREA COUNCIL SERVED 14,283 YOUTH THROUGH-OUT 17 COUNTIES IN EAST TEXAS.

CUB SCOUTS (BOYS AGES 7 TO 10) MEET IN WEEKLY DENS AND ON A MONTHLY BASIS WITH THEIR PACK. FAMILY GROUP ACTIVITIES ARE SHARED. EMPHASIS IS PLACED ON COOPERATION, TEAMWORK, AND THE CUB SCOUT MOTTO, "DO YOUR BEST". AS BOYS ADVANCE THROUGH RANKS AND MEET REQUIREMENTS THEY ARE ENCOURAGED AND RECOGNIZED WITH BADGES. 5,413 CUB SCOUTS WERE MEMBERS.

BOY SCOUTS (BOYS AGES 11 TO 17) MEET IN WEEKLY MEETINGS CONDUCTED BY YOUTH LEADERS. THEY CAMP AND EXPERIENCE OTHER OUTDOOR ADVENTURES WHICH ARE INTEGRATED WITH A COMPREHENSIVE ADVANCEMENT PROGRAM. EMPHASIS IS ON DEVELOPING SELF-CONFIDENCE, MAKING DECISIONS, AND LEADERSHIP SKILLS. THEY MUST MEET REQUIREMENTS TO EARN MERIT BADGES IN SPECIFIC AREAS. THE PROGRAM IS STRUCTURES AROUND DEVELOPING CHARACTER, CITIZENSHIP, AND PERSONAL FITNESS QUALITIES. 2,718 YOUTH PARTICIPATED.

EXPLORING (YOUNG MEN AND WOMEN AGES 14-20) IS A WORK-SITE BASED PROGRAM PROVIDING YOUNG MEN AND WOMEN WITH PRACTICAL KNOWLEDGE OF AND EXPERIENCE IN A CAREER OF THEIR INTEREST. IT PREPARES YOUNG PEOPLE FOR THE WORKFORCE AND EDUCATES THEM ON THE NEED FOR STAYING IN SCHOOL. THERE WERE 441 EXPLORERS.

LEARNING FOR LIFE (KINDERGARTEN-12TH GRADES) HELPS YOUTH DEVELOP SOCIAL AND LIFE SKILLS, PROVIDES CAREER EDUCATION, ASSISTS IN CHARACTER DEVELOPMENT, AND HELP YOUTH FORMULATE POSITIVE PERSONAL VALUES. 4,969 STUDENTS PARTICIPATED.

VENTURING (YOUNG MEN AND WOMEN AGES 14-20) IS A PROGRAM FOR YOUNG MEN AND WOMEN THAT PROVIDES POSITIVE EXPERIENCES TO HELP YOUNG PEOPLE MATURE AND PREPARES THEM TO BECOME RESPONSIBLE, CARING ADULTS. THE PROGRAM EMPHASIZES LEADERSHIP DEVELOPMENT, CITIZENSHIP, OUTDOOR AND HIGH-ADVENTURE ACTIVITIES, LIFE-SKILLS DEVELOPMENT, AND OTHER AREAS OF INTEREST TO CREW MEMBERS. THERE WERE 742 VENTURERS.

THE HISPANIC OUTREACH PROGRAM HAS GROWN TO 1079 YOUTH IN 2010 AND THE AFRICAN-AMERICAN OUTREACH PROGRAM HAD 567 YOUTH PARTICIPATE IN 2009.

A TOTAL OF 3,127 ADULT VOLUNTEERS WERE ROLE MODELS TO THE YOUNG PEOPLE.

- 1,245 BOY SCOUTS ATTENDED SUMMER CAMP AND WINTER CAMP. WHILE ATTENDING CAMP, SCOUTS HAVE THE OPPORTUNITY TO PARTICIPATE IN PHYSICALLY AND INTELLECTUALLY CHALLENGING ACTIVITIES, TAKE HEALTHY RISKS, LEARN TO ACCEPT CHALLENGES, BECOME SOCIALLY ADEPT, AND GAIN A POSITIVE SENSE OF SELF-WORTH AND USEFULNESS.
- 581 CUB SCOUTS LEARNED TO "DO THEIR BEST" DURING SIX WEEK-LONG DAY CAMPS.
- 6,466 RANK ADVANCEMENTS AND MERIT BADGES WERE EARNED BY SCOUTS.
- 117 YOUNG MEN EARNED THE HIGHEST HONOR IN THE BOY SCOUTS, THE RANK OF EAGLE SCOUT.
- 230 BOYS EARNED THE HIGHEST HONOR AVAILABLE TO CUB SCOUTS, THE ARROW OF LIGHT AWARD.
- 1,933 CUB SCOUTS SPENT QUALITY TIME INTERACTING WITH A PARENT DURING TWELVE MOM & ME AND DAD & LAD CAMPOUTS.

IN ADDITION, THOUSANDS OF COMMUNITY SERVICE HOURS WERE PROVIDED THROUGH EAGLE SCOUT SERVICE PROJECTS, THE GOOD TURN FOR AMERICA INITIATIVE, SCOUTING FOR FOOD, AND MANY OTHER COMMUNITY PROJECTS.