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Department of the Treasury

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)

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

OMB No 1545-0047 Open to Public

	or the 2	2010 calendar year, or tax year beginning JUN 1, 2010 and en	ndina M	AY 31, 2011	wich dation
B c		C Name of organization	11	D Employer identific	cation number
ap	plicable	- Tarrio di digamenton			
· · · · ·	Address change	TEXAS INSTITUTE OF LETTERS			
	Name change	Doing Business As		23-7	068846
	Initial return		oom/suite	E Telephone number	
	Termin- ated	P.O. BOX 9032		940-	397-4123
	Amended return	City or town, state or country, and ZIP + 4		G Gross receipts \$	185,783.
	Applica- tion	WICHITA FALLS, TX 76308-9032		H(a) Is this a group re	
	pending	F Name and address of principal officer: JAMES HOGGARD		for affiliates?	Yes X No
			<u>6301</u>	H(b) Are all affiliates inc	luded? Yes No
		npt status: X 501(c)(3) 501(c)()	527	if "No," attach a	list. (see instructions)
		:▶ WWW.TEXASINSTITUTEOFLETTERS.ORG	1	H(c) Group exemption	
		rganization Corporation Trust X Association Other ►	L Year	of formation 1936 N	M State of legal domicile エン
		Summary	COCNIT	TE AND DEMA	DD EINE
AUIS Activities & Governance	1 B W	riefly describe the organization's mission or most significant activities: $\overline{ ext{TO}}$ RECENTING IN TEXAS	COGNI	ZE AND REWA	RD FINE
E	2 C	heck this box if the organization discontinued its operations or disposed	d of more	than 25% of its net as	ssets.
Š	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	14
20	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	8
es	5 To	otal number of individuals employed in calendar year 2010 (Part V, line 2a)		5	C
Ξŧ	6 T	otal number of volunteers (estimate if necessary)		6	0
Act Act	7 a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
<u> </u>	b N	et unrelated business taxable income from Form 990-T, line 34		7b	0.
٠			-	Prior Year	Current Year
Revenue		contributions and grants (Part VIII, line 1h)		29,480. 0.	33,850.
Revent		rogram service revenue (Part VIII, line 2g)		38,012.	31,928.
Re		evestment income (Part VIII, column (A), lines 3, 4, and 7d)	-	38,012.	0.
		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	67,492.	65,778.
_		otal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	40,820.	61,450
		irants and similar amounts paid (Part IX, column (A), lines 1-3)	- 	0.	01,430.
nses		enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Se		rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		otal fundraising expenses (Part IX, column (D), line 25)	0.		
Ě	1	other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	VED	12,867.	12,508.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		S 53,687.	73,958.
		levenue less expenses. Subtract line 18 from line 12	2040	13,805.	<8,180.
or		1 JAN 1	ZUIZ Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)		図 830,933.	822,753.
d As	21 T	otal liabilities (Part X, line 26)	ĻU℡	0.	0.
		let assets or fund balances. Subtract line 21 from line 20		2 830,933.	822,753.
Pε	rt II	Signature Block			
Unde	er penalt	ies of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the best of m	y knowledge and belief, it is
true,	correct,	and complete Declaration of preparer (other than officer) is based on all information of whic	ch preparer		
		James Hoff		* TANUA	My 10, 20 i 2
Sig	ו	Signature of officer		Date	-
Her	e i	JAMES HOGGARD, TREASURER		··· · · · · · · · · · · · · · · · · ·	·
		Type or print name and title		Data Charle F	DTIN
р		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	-	JOSEPH D. BAUER, CPA	/	/-/o-/ Z self-employs	eo
	<u> </u>	Firm's name HUPP, BAUER, HANSON & LEWIS P.C.		Firm's EIN	
026	Only	Firm's address 719 SCOTT AVE. 757E. 200		D	10_222 2102
<u></u>	Abe ID:	WICHITA FALLS / TX 76301-2606		Phone no 9	40-322-3103
		S discuss this return with the preparer shown above? (see instructions)			Yes No
0320	01 02-22	-11 LHA For Paperwork Reduction Act Notice, see the separate instruction	15.		Form 990 (2010

68,995.

Form 990 (2010)

Total program service expenses

Part IV Checklist of Required Schedules

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A		Х	v
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		Х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
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, 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 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 of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	444		х
	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 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
1	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	1	Х
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?		<u> </u>	ļ
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	The second secon	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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? If "Yes," complete Schedule F, Parts I and IV	14b	ļ	X
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	ļ		١
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	_ ا		v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	+	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		X
20-	complete Schedule G, Part III	19 20a	1	X
	Did the organization operate one or more hospitals? <i>If</i> "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	ZUa	+	+~
U	operate one or more hospitals must attach audited financial statements (see instructions)	20ь		
	about one of those hyperians most attach acouted intalloral statements (see instructions)		990	(2010)

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 in the			
	United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		X
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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04		
_	any tax-exempt bonds?	24c		
	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	25.		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	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	25b		х
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	230		-
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		<u> </u>	
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
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 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
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? If "Yes," complete Schedule L, Part IV	28c		X
29	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		1	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, 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	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	١.,		v
0.5	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	-	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	├	 ^
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			ļ
26				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		X
27	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
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		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	3,	 	 ^`` -
~	Note. All Form 990 filers are required to complete Schedule O	38	X	
				(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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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 2a 0			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
4a	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		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v
	any contributions that were not tax deductible?	6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
_	were not tax deductible?	6b		· · · · · · · · · · · · · · · · · · ·
7	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 services provided to the payor?	7a	:	х
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	"		
٠	to file Form 8282?	7c		Х
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders Cross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
122	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	.20		-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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.	1		
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			rae i
	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sect</u>	ion 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 14	4 I		
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</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		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			••
	governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			: i
	by the following:			
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 the			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
þ	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		X
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ĺ
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	}		
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		.,	ł
	ın Schedule O how this is done	12c	Х	- V
13	Does the organization have a written whistleblower policy?	13	ļ	X
14	Does the organization have a written document retention and destruction policy?	14	ļ	Х
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?	1	•	.,
	The organization's CEO, Executive Director, or top management official	15a		X
Ь	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe 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			v
	taxable entity during the year?	16a	ļ	X
ь	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	1		1
_	exempt status with respect to such arrangements?	16b		<u> </u>
	tion C. Disclosure			
17	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	e tor		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	and fina	ancial	
	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 organiz	ation:		
	JAMES HOGGARD - 940-397-4123			
	111 PEMBROKE LANE, WICHITA FALLS, TX 76301			

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 employees."
- 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	⊢ <u>`</u>			Position all that a		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	12	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
DARWIN PAYNE	2 00									
PRESIDENT	3.00	-	<u> </u>			<u> </u>		0.	0.	0.
FRITZ LANHAM					1					_
VICE PRESIDENT	3.00	<u> </u>	<u> </u>	ļ		<u> </u>	<u> </u>	0.	0.	0.
W. K. STRATTON			l							
SECRETARY	3.00	<u> </u>	<u> </u>	<u> </u>	<u> </u>	ļ	<u> </u>	0.	0.	0.
JAMES HOGGARD							ļ			
TREASURER	3.00	ļ.	_	<u> </u>	<u> </u>		ļ	0.	0.	0.
BETTY WIESEPAPE	1									
RECORDING SECRETARY	1.00	<u> </u>	ļ			<u> </u>		0.	0.	0.
TY CASHION			Ì							
COUNCILOR	1.00	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>		0.	0.	0.
ROBERT COMPTON										
COUNCILOR	1.00	<u> </u>	<u> </u>	_	ļ	ļ	<u> </u>	0.	0.	0.
FRANCES NEIDHARDT							ļ			
COUNCILOR	1.00	1	<u> </u>	<u> </u>	↓	_	1_	0.	0.	0.
KATE LEHRER										
COUNCILOR	1.00	<u> </u>	<u> </u>	ļ.,	_	<u> </u>	↓_	0.	0.	0.
JAN SEALE				Ì		1				
COUNCILOR	1.00	↓_	_	<u> </u>	$oxed{oxed}$	<u> </u>	ļ	0.	0.	0.
EMILY FOX GORDON									1	
COUNCILOR	1.00	1		ļ			1	0.	0.	0.
ANDRES TIJERINA					1					
COUNCILOR	1.00	↓_	ļ	<u> </u>	↓_	L	<u> </u>	0.	0.	0.
T. LINDSAY BAKER			1							
COUNCILOR	1.00	-	\perp		_	╄	ļ	0.	0.	0.
	-									
			-	T		-				
			.1	1	1		1	l	1	1

(A) Name and title	(B) Average hours per	(cl	(C) Positi (check all th				ly)	(D) Reportable compensation	(E) Reportable compensatio	n	(F) Estimated amount of			
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional frustee	Institutional flustee Officer Key employee Highest compensated		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC		s comper		tion e ion ed	
						_								
1 b Sub-total c Total from continuation sheets to Part	t VII, Section A	<u> </u>	I	l	<u> </u>	>		0.		0.			0.	
d Total (add lines 1b and 1c) 2 Total number of individuals (including but compensation from the organization		nose	liste	ed a	bov	e) wl	no re	0 • eceived more than \$100),000 in reportab	0 . le			0.	
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on		3	Yes	No X	
 For any individual listed on line 1a, is the and related organizations greater than \$ Did any person listed on line 1a receive 	150,000? <i>If</i> "Yes	," cc	mpl	ete .	Sch	edul	e J t	for such individual		i	4		х	
rendered to the organization? If "Yes," of Section B. Independent Contractors							Cial	ed organization or indiv			5	:	х	
1 Complete this table for your five highest the organization. NONE	compensated in	dep	ende	ent c	ont	racte	ors t	that received more than	\$100,000 of con	npens	ation f			
Name and busing	ess address							Description of	services	C	ompe		n	
								· · · · · · · · · · · · · · · · · · ·			•			
														
Total number of independent contractor \$100,000 in compensation from the org		not I	ımıte	ed to		ose li	sted	d above) who received r	more than			000		

र का		4	Statement of Never			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gifts, grants ar amounts	1 a)	Federated campaigns Membership dues Fundraising events Related organizations	1a 1b 1c 1d	13,200. 14,650.				
Contributions, gifts, grants and other similar amounts		•	Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines	ts, and ve 1f	6,000.				***************************************
ة ق	ŀ	<u>1</u>	Total. Add lines 1a-1f			33,850.			
Program Service Revenue	2 8				Business Code				
že e		b					-		
ΕŞ		_							
PA		d a							
윤	•	∂ •	All other program service reve	anue.			-		
	,		Total. Add lines 2a-2f	aride	•				
\dashv	3	_	Investment income (including	dividends inter					
	٠		other similar amounts)	dividends, inter-	>	31,933.			31,933.
	4		Income from investment of ta	y-exempt bond i	•				· · · · · · · · · · · · · · · · · · ·
	5		Royalties	A CACITIFE BOILD I	>		-		
	3		noyanies	(ı) Real	(II) Personal				
}	6 :	2	Gross Rents	(i) Hear	(ii) i cisoriai				
	_		Less: rental expenses				,		
			Rental income or (loss)					.	
			Net rental income or (loss)	L		ĺ	1		1
İ			Gross amount from sales of	(i) Securities	(II) Other				
			assets other than inventory	120,000.					
l		b	Less: cost or other basis	<u>-</u>					
			and sales expenses	120,005.	,				
Į		C	Gain or (loss)	<5.	.>				
		d	Net gain or (loss)			<5.	> <5.	>	
enne			Gross income from fundraisin including \$	g events (not					
Other Revenu			contributions reported on line Part IV, line 18	a					
₹			Less: direct expenses	, t		-			1
			Net income or (loss) from fun		<u> </u>			 	+
	9	а	Gross income from gaming a						
			Part IV, line 19	8		1			
			Less: direct expenses	.	"└ <u></u>	†			
			Net income or (loss) from gar Gross sales of inventory, less	-					
	10	a	and allowances						
		h	Less: cost of goods sold	ē t		-			
					` <u> </u>	†			
		<u>.</u>	Net income or (loss) from sale	•	1			-	
	11	_	Miscellaneous Reven		Business Code	4			
		a b					 	 	+
				· · · · ·		 	 	 	
		c d	All other revenue				 	 	
			Total. Add lines 11a-11d			-	1	 	
	12		Total revenue. See instructions			65,778.	<5.	> 0	. 31,933.
0320		_				1 22,7,70	-5	<u>'</u>	Form 990 (2010)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	olete column (A) but are i		e columns (B), (C), and (L	
	ot include amounts reported on lines 6b, 3b, 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				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	61,450.	61,450.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			<u>-</u> -	
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	800.		800.	
đ	Lobbying	,			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion	713.		713.	
13	Office expenses	2,071.		2,071.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel		<u>-</u> -		
18	Payments of travel or entertainment expenses				1
	for any federal, state, or local public officials	7 5 4 5	7 5/5		
19	Conferences, conventions, and meetings	7,545.	7,545.	-	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance Other expenses Itemize expenses not covered				
24	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 0)				
а	PRINTING & POSTAGE	534.		534.	<u> </u>
b	COUNCIL EXPENSES	513.		513.	
c	BOOTH RENTAL	250.		250.	
d	BOX RENTAL	70.		70.	
e	BANK CHARGES	12.		12.	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	73,958.	68,995.	4,963.	0.
26	Jaint costs. Check here ► If following SOP	,		1,,,,,,,	<u>.</u>
	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				
		· · · · · · · · · · · · · · · · · · ·	······································	·	·

Part X **Balance Sheet** (A) Beginning of year End of year 1 Cash · non-interest-bearing 1 214,898. 81,713. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 7 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10c 10b b Less: accumulated depreciation 616,035. 741,040 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 822,753. 830,933. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D iabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities. Complete Part X of Schedule D 0. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here

X
and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Ō. 31 31 Paid in or capital surplus, or land, building, or equipment fund 830,933. 822,753. 32 32 Retained earnings, endowment, accumulated income, or other funds 830,933. 822,753. 33 Total net assets or fund balances 830,933. 822,753. Total liabilities and net assets/fund balances

Form 990 (2010)

Form	990 (2010) TEXAS INSTITUTE OF LETTERS	23-7	068846	Pag	ge 1 <u>2</u>
Par	TXI 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			78.
2	Total expenses (must equal Part IX, column (A), line 25)	2			58.
3	Revenue less expenses. Subtract line 2 from line 1	3			80.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	830) <u>,9</u>	33.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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	822	2 , 7	53.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
ь	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d					
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?	-	3a		Х
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

2010

Open to Public Inspection

Name of the organization

TEXAS INSTITUTE OF LETTERS

Employer identification number 23-7068846

Part I	⊟ Reason f	or Public Chari	ty Status (All organiza	ations mus	t complete	e this part.	.) See insti	ructions.						
The orga	anization is not a	private foundation b	pecause it is: (For lines 1	through 1	1, check c	nly one bo	ox.)							
1 🗀	- 1		, or association of churc					•						
2	A school desc	cribed in section 170	0(b)(1)(A)(ii). (Attach Sch	nedule E.)										
3	-		al service organization d		n section	170(b)(1)(A)(iii).							
4			perated in conjunction v					(b)(1)(A)(iii). Enter th	ne hospital'	s nam	e,		
	city, and state		,	•			·		•	•				
5 🗀			penefit of a college or un	iversity ow	ned or op	erated by	a governn	nental unit	describe	ed in				
•		b)(1)(A)(iv). (Comple					J							
e [_		ent or governmental unit	described	lın sectio	n 170/b\/1	λ(Δ)(ν)							
6 L 7 X			eives a substantial part of					r from the	general n	ublic desci	ıbed ı	n		
, (4)				or its supp	on nom a	governino	intai oiint o	1 110111 1110	g0110.0. p					
• _	_	section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
8 -	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from													
9	-	-												
		•	ctions - subject to certa											
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.													
	_	509(a)(2). (Complete	· ·				- 500/-\/4							
10 -			erated exclusively to tes						4 4 1		.			
11			erated exclusively for th									or		
			tions described in section). See sec	tion 509(a	a)(3). Cne	ck the box	tnat			
			organization and comple								SAL			
_	a		- ,,		e III - Func	•	-		a	Type III - C		_		
e			t the organization is not									n		
			han one or more publicly						(a)(1) or s	section 509	(a)(2).			
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	ıt ıt ıs a ⊺y _l	pe I, Type	II, or Type	e III				_		
		rganization, check th												
g			rganization accepted an								r			
	(i) A perso	n who directly or ind	rectly controls, either al-	one or tog	ether with	persons d	lescribed i	ın (iı) and (i	iii) below,	l l	Yes	No		
	the gove	erning body of the su	upported organization?							11g(i)				
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)				
	(iii) A 35% d	controlled entity of a	person described in (i) of	or (II) above	∍?					11g(iii)				
h	Provide the f	ollowing information	about the supported org	ganızatıon	(s).									
(i) Na	me of supported	(ii) EIN	(iii) Type of		rganization			(vI) is organization		(vii) An	nount o	f		
	organization	, ,	organization (described on lines 1-9	in col (i) lis		organizat		(i) organiz U S	ed in the	sup	port			
			above or IRC section	governing	document?	(i) of your	support	US	2					
			(see instructions))	Yes	No	Yes	No	Yes	No					
-														
				1			1	ļ						
				<u> </u>	<u> </u>			1						
				-		İ								
-	· · · ·			 				 						
		1	1				1							

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

Schedule A (Form 990 or 990-EZ) 2010

Total

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.)

Sec	tion A. Public Support									
Cale	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.")	30,607.	36,015.	25,449.	29,480.	33,850.	155,401.			
2	Tax revenues levied for the organ-									
	ızatıon'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				_		<u> </u>			
4	Total. Add lines 1 through 3	30,607.	36,015.	25,449.	29,480.	33,850.	155,401.			
5	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)									
6	Public support. Subtract line 5 from line 4						155,401.			
Se	ction 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	30,607.	36,015.	25,449.	29,480.	33,850.	155,401.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	37,793.	43,302.	39,166.	38,012.	31,928.	190,201.			
9	Net income from unrelated business									
	activities, whether or not the			1						
	business is regularly carned on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV.)	, , , , , , , , , , , , , , , , , , ,	<u> </u>			<u> </u>	245 600			
11	Total support. Add lines 7 through 10						345,602.			
12	• • • •	•	•			12				
13	First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	. —			
	organization, check this box and sto	p here			 -		▶□			
	ction C. Computation of Pub				 -		44.97 %			
	Public support percentage for 2010 (•	column (f))		14				
15	,, ,			40	14 - 99 1/90/	15				
16	a 33 1/3% support test - 2010.If the c				14 IS 33 1/3% OF IT	iore, check this bu	× and ► X			
	stop here. The organization qualifies b 33 1/3% support test - 2009. If the o		_		lung 15 to 33 1/304	or more check th				
					IIIIe 13 IS 33 1/370	or more, check ti	▶ □			
17	and stop here. The organization qua				13 16a ar 16h a	and line 14 is 1004	or more			
17	7a 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 - 2009.If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
		-								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
18			=							
-10	r mate loundation. If the organization	on did not check a	150x on line 15, 10	a, 100, 17a, 01 17		-	0 or 990-FZ) 2010			

Schedule A (Form 990 or 990-EZ) 2010 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.)

Sec	ction A. Public Support						
Cale	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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b				<u> </u>		
_8	Public support (Subtract line 7c from line 6)			<u> </u>	<u></u>		<u> </u>
Se	ction B. Total Support			· 			
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ı	b Unrelated business taxable income					1	
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	c Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12)	<u></u>	1	<u> </u>	<u> </u>		<u> </u>
14	First five years. If the Form 990 is fo	or the organization'	s first, second, th	ird, fourth, or fifth t	tax year as a secti	on 501(c)(3) organ	ization,
_	check this box and stop here						
	ction C. Computation of Pub					T T	
15		• • • • • • • • • • • • • • • • • • • •	•	column (f))		15	<u>%</u>
16				<u> </u>		16	%
	ection D. Computation of Inve					14-1	
17	, ,	•	•	ine 13, column (t))		17	%
18	, 3					18	%
19	a 33 1/3% support tests - 2010. If the						17 is not
	more than 33 1/3%, check this box		-				▶ 🗀
	b 33 1/3% support tests - 2009. If the						. —
20	line 18 is not more than 33 1/3%, ch		_			-	
20	Private foundation. If the organizati	on did not check a	LOOK OH IINE 14, 1	a, ur iau, check i	uns ook and see if	เอเเนตเเดเร	

	_							OMB No 1545-0047	
(Form 990)			Grants and Governments	Other Assistance, and Individuals	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	. sə		2010	
Department of the Treasury Internal Revenue Service		Comple	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	n answered "Yes" to Fo ► Attach to Form 990.	' to Form 990, Par m 990.	t IV, line 21 or 22.		Open to Public Inspection	ļ
Name of the organization	TEXAS	INSTITUTE OF	LETTERS				Er	Employer identification number 23-7068846	b l
Part ! General!		nd Assistance		- -					
1 Does the organ	Does the organization maintain records to substantiate the amount of	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	n Yes X No	٥
	criteria used to award the grants of assistance ? Docume in Dart IV the occanization's procedures for monitoring the use of grant funds in the United States.	stance : cediires for monit	nand the use of grant t	funds in the United	d States.				,
Part # Grants a	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	Governments and	Organizations in the	United States. C	omplete if the orga	Inization answered "Y	es* to Form 990, Part IV	line 21, for any	lΓ
1	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	55,000. Check this	box if no one recipient	t received more th	an \$5,000. Part II	can be duplicated if a	dditional space is neede	•	-1
1 (a) Name and a	1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
							-		
									1
i i	Enter total number of section 501(c)(3) and government organizations	nd government org	ganizations						
-1	Enter total number of other organizations	8		:				A	9
LHA For Paperwor	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2010)	<u>5</u>

Page 2

23-7068846

TEXAS INSTITUTE OF LETTERS

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2010)

Part III Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INDIVIDUAL AWARDS TO RECOGNIZE ACHIEVEMENTS IN	14	23,450.	0		
GRANT TO THE UNIVERISTY OF TEXAS FOR THE CONTINUED	-	86	o		
DEVELOFIED OF WALLENG SALEDS THE LEGISLY CO.					
part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	
ļZI	S AND MOI	NITORS ITS	GRANTS.		

GENERALLY GRANTS TO INDIVIDUALS ARE AWARDED BASED ON COMPETITIVE

THREE MEMBERS OF THE WRITTEN COMPOSITIONS SUBMITTED FOR CONSIDERATION.

GOVERNING BODY JUDGE THE LETTERS RECEIVED AND DETERMINE WHO WILL

THE RECEIVE THE GRANTS ACKNOWLEDGING THEIR EXEMPLARY WRITING SKILLS. A CHECK IS THEN BE GOVERNING BODY DETERMINES THE AMOUNT OF THE GRANT.

GIVEN TO THE WINNER

Schedule I (Form 990) (2010)

SCHEDULE O (Form 990 or 990-EZ)

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.

2010
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

TEXAS INSTITUTE OF LETTERS

Employer identification number 23-7068846

FORM 990, PART VI, SECTION B, LINE 11: AT THIS TIME THE ORGANIZATION'S
GOVERNING BODY DOES NOT REVEIW FORM 990 PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: SEE A COPY OF THE CONFLICTS OF
INTEREST POLICY ATTACHED.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST
FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:
DARWIN PAYNE - 2633 LAKE OAKS ROAD, WACO, TX 767101016
FRITZ LANHAM - 8905 BELL MOUNTAIN DRIVE, AUSTIN, TX 78730
W. K. STRATTON - 9021 GUNNISON DR, DALLAS, TX 75231
JAMES HOGGARD - 111 PEMBROKE LANE, WICHITA FALLS, TX 76301
BETTY WIESEPAPE - 1706 N. CHEYENNE, RICHARDSON, TX 75080
TY CASHION - 14 HAWKSEYE PLACE, THE WOODLANDS, TX 77391
ROBERT COMPTON - 199 COUNTY RD 508, NACOGDOCHED, TX 75961
FRANCES NEIDHARDT - 321 N. GRAND AVE., SHERMAN, TX 75090
KATE LEHRER - 2955 BONNEY BRIAR, BEAUMONT, TX 77707
JAN SEALE - 400 SYCAMORE AVE., MCALLEN, TX 78501
EMILY FOX GORDON - P.O. BOX 609, ROUND ROCK, TX 78680
ANDRES TIJERINA - 7748 HWY 290 W., AUSTIN, TX 78736
T. LINDSAY BAKER - 567 N. GIBBONS, ARGYLE, TX 76226

EXHIBIT A

CONFLICTS OF INTEREST POLICY TEXAS INSTITUTE OF LETTERS, INC.

Article I Purpose

The purpose of this Conflict of Interest Policy is to protect Texas Institute of Letters. Inc (the "Organization") interest when it is contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the Organization or might result in a possible "excess benefit transaction" as such term is defined by the Internal Revenue Service. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations

Article II Definitions

l Interested Person

Any director, principal officer, or member of a committee with delegated powers from the board of Directors (the "Board"), who has a direct or indirect financial interest, as defined below. Is an interested person

2 Financial Interest

A person has a financial interest if the person has, directly or indirectly, through business investment, or family

- a An ownership or investment interest in any entity with which the Organization has a transaction or arrangement,
- b. A compensation arrangement with the Organization or with any entity or individual with which the Organization has a transaction or arrangement, or
- c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Organization is negotiating a transaction or arrangement

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial

A financial interest is not necessarily a conflict of interest. Under Article III. Section 2. a person who has a financial interest may have a conflict of interest only if the appropriate Board or committee decides that a conflict of interest exists.

Article III Procedures

1 Duty to Disclose

In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with Board delegated powers considering the proposed transaction or arrangement

2 Determining Whether a Conflict of Interest Exists

After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the Board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board or committee members shall decide if a conflict of interest exists. The remaining Board or committee members may delay such decision for a reasonable period of time necessary for them to conduct any due diligence and/or retain professional advice regarding the matter

3 Procedures for Addressing the Conflict of Interest

- a An interested person may make a presentation at the Board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest
- b The chairperson of the Board of committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction of arrangement
- c After exercising due diligence, the Board or committee shall determine whether the Organization can obtain with reasonable efforts a more advantageous transaction of arrangement from a person or entity that would not give rise to a conflict of interest
- d If a more advantageous transaction or airangement is not reasonably possible under circumstances not producing a conflict of interest, the Board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement

4 Violations of the Conflicts of Interest Policy

- a. If the Board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose
- b. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the Board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action

Article IV Records of Proceedings

The minutes of the Board and all committees with Board delegated powers shall contain.

a. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the

financial interest, any action taken to determine whether a conflict of interest was present and the Board's or committee's decision as to whether a conflict of interest in fact existed b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

Article V Compensation

- a A voting member of the Board who receives compensation, directly or indirectly, from the Organization for services is precluded from voting on matters pertaining to that member's compensation.
- b A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Organization for services is precluded from voting on matters pertaining to that member's compensation
- c No voting member of the Board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Organization, either individually or collectively, is prohibited from providing information to any committee regarding compensation

Article VI Annual Statements

Each director, principal officer and member of a committee with Board delegated powers shall annually sign a statement which affirms such person

- a Has received a copy of the conflicts of interest policy,
- b Has read and understands the policy.
- c Has agreed to comply with the policy, and
- d. Understands the Organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Article VII Periodic Reviews

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, periodic reviews shall be conducted. The periodic reviews shall, at a minimum, include the following subjects

- a. Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm's length bargaining.
- b Whether partnerships, joint ventures, and arrangements with management organizations conform to the Organization's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inuiement, impermissible private benefit or in an excess benefit transaction

Article VIII Use of Outside Experts

When conducting the periodic reviews as provided for in Article VII the Organization may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the Board of its responsibility for ensuring periodic reviews are conducted.

Form, **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

 $ightharpoons \overline{X}$ • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. **Employer identification number** Type or Name of exempt organization print 23-7068846 TEXAS INSTITUTE OF LETTERS File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your P.O. BOX 9032 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions WICHITA FALLS, TX 76308-9032 0 | 1 Enter the Return code for the return that this application is for (file a separate application for each return) Return **Application** Return **Application** Code Is For Code Is For 01 Form 990-T (corporation) 07 Form 990 Form 1041-A 08 Form 990-BL Form 4720 09 03 Form 990-EZ Form 990-PF Form 5227 10 Form 6069 11 05 Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) 12 06 Form 8870 JAMES HOGGARD • The books are in the care of ▶ 111 PEMBROKE LANE - WICHITA FALLS, TX 76301 Telephone No. ► 940-397-4123 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box 🕨 ... If it is for part of the group, check this box 🕨 ... and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until JANUARY 15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 2010 MAY 31, 2011 ► X tax year beginning JUN 1, , and ending Initial return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3ь \$ Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, 0. by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Paperwork Reduction Act Notice, see Instructions.