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### **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)

OMB No 1545-0047

. ☑ Open to Public 등

_	rtment of the Treasury nal Revenue Service	► The organization may have to use a copy of this return to satisfy state reporting	g requirement to	Inspection
		dar year, or tax year beginning , 2011, and ending		10 11 11
В	Check if applicable	C	D Employer Iden	
	X Address change	Concho Valley Council, Inc.,	75-0800	
	Name change	Boy Scouts of America #741 104 Veterans Memorial Dr	E Telephone nun	
	Initial return	San Angelo, TX 76903-6400	(325)	555-7107
	Terminated			
	Amended return		G Gross receipts	
	Application pending		(a) Is this a group return for af	<b>⊢</b> ''' ⊨
		Came As C Above	(b) Are all affiliates included? If 'No,' attach a list (see in	structions) Yes
<u>!</u>	Tax-exempt status	X 501(c)(3) 501(c) ( ) ◄ (insert no.) 4947(a)(1) or 527		
<u>J</u>			(c) Group exemption number	
K	Form of organization	X Corporation Trust Association Other ► L Year of Formation	n 1935   M State of	legal domicile TX
<u>LFa</u>	rt Summar			
	1 Briefly descri	be the organization's mission or most significant activities <u>See Sched</u>	<u>ule "0"</u>	
8	- <b></b>			
Activities & Governance				
ķ	2 Check this bo	if the organization discontinued its operations or disposed of more		
ဗီ		ting members of the governing body (Part VI, line 1a).	e than 25% of its fiet a	55615
<b>න්</b>		dependent voting members of the governing body (Part VI, line 1b)	4	
it e		of individuals employed in calendar year 2011 (Part V, line 2a)	5	
흫	6 Total number	of volunteers (estimate if necessary)	6	1,2
ď	7a Total unrelate	ed business revenue from Part VIII, column (C), line 12	7a	
	<b>b</b> Net unrelated	business taxable income from Form 990-T [tre 34 [VED]	7b	
			Prior Year	Current Year
		and grants (Part VIII, line 1h) rice revenue (Part VIII, line 2g) ricome (Part VIII, column (A), lines 3, 42 and 7d)	357,391.	917,07
Revenue		rice revenue (Part VIII, line 2g) MAY 2 3 2012	186,868.	113,78
ě		icome (Part VIII, column (A), lines 3, 42 and 7d)	184,461.	48,44
ш.		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1de)	330,595.	246,35
		e – add lines 8 through 11 (must equal Part Mtt Column (A) Line 12)	1,059,315.	1,325,66
		milar amounts paid (Part IX, column (A), lines 1-3)		
		to or for members (Part IX, column (A), line 4)	522 702	527 20
စ္		er compensation, employee benefits (Part IX, column (A), lines 5-10)	522,792.	537,28
Expenses		fundraising fees (Part IX, column (A), line 11e)	PARTIES OF THE SECTION OF THE SECTIO	12
×	<b>b</b> Total fundrais	sing expenses (Part IX, column (D), line 25) ► 58,158.	t man thank on the one	A CONTRACTOR OF THE PARTY OF TH
ш	17 Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)	419,947.	391,15
	18 Total expens	es Add lines 13-17 (must equal Part IX, column (A), line 25)	942,739.	928, 43
	19 Revenue less	expenses. Subtract line 18 from line 12	116,576.	397,22
8 8			Beginning of Current Year	End of Year
a la	20 Total assets	(Part X, line 16)	1,706,314.	2,049,53
Net Assets or Fund Balancos	21 Total liabilitie	s (Part X, line 26).	137,318.	101,09
Š	22 Net assets or	fund balances Subtract line 21 from line 20	1,568,996.	1,948,44
Pa	rt II Signatur			, , , , , , , , , , , , , , , , , , , ,
			he best of my knowledge and b	pelief, it is true, correct, and
com	plete Declaration of pren	eclare that I have examined this return, including accompanying schedules and statements, and to the arer (other than officer) is based on all information of which preparer has any knowledge		
	1/4	My Ku	, ,	
Sig	n Signatu	re of officer	Date T	_
He		chard L Reque	וןיון כ	2
	Туре о	print name and title		
	Print/Type p	reparer's name Preparer's stignature Date	Check If	PTIN
Pai	id Mics	HARL HAMBY // S/15/	self-employed	P01027649
	eparer Firm's name	ACTOR MATERIAL CONTRACTOR OF THE PARTY OF TH		•
	e Only Firm's addr	sss ► 401 CYPRESS ST STE 303	Firm's EIN ► 20	

BAA For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

ABILENE, TX 79601-5146

TEEA0113L 08/18/11

Phone no

Form 990 (2011)

672-9323

X Yes

(325)

BAA	TEEA0102L 07/05/11			Form	990	(2011)
4e Total program service expenses ►	839,097.					
(Expenses \$	•	venue \$			)	
4d Other program services (Describe in	Schedule O.)		-			
<del>-</del>						
		<b></b>				
	moduling grants of P		<b>-</b> —			—′
4c (Code ) (Expenses \$	including grants of \$	) (Revenue	Ś			١
		<del></del>				
		<b></b>				
/ (САРОПОСО У	Including grants of \$\times_{		<b>-</b>			
4b (Code. ) (Expenses \$	including grants of \$	) (Revenue	\$			```
	rls_age_14-21_across_23_1/2_countie					
	velopment citizenship training and					
	839,097. including grants of \$					)
Section 501(c)(3) and 501(c)(4) organ others, the total expenses, and revent	service accomplishments for each of its three largest pro sizations and section 4947(a)(1) trusts are required to rejue, if any, for each program service reported	port the amount of	grants a	nd allo	catio	ns to
<del>-</del>		gram services, as i	neasure	d by ex	kpen:	ses
If 'Yes,' describe these changes on So		ogram services:	Ш	,	ك	
	on Schedule O g, or make significant changes in how it conducts, any pi	rogram services?	$\Box$	Yes	X	No
Form 990 or 990-EZ?  If 'Yes,' describe these new services of	on Schedule O		Ш	Yes	X	No
-	gnificant program services during the year which were n	ot listed on the price		V	⊽	N1 -
222 2242445 7			<b>-</b>			
1 Briefly describe the organization's mis See Schedule "O"						
	a response to any question in this Part III	· ·				
Part III Statement of Program Se	•					
Form 990 (2011) CONCIO VALLEY C		/5-0	80001	<u>/                                    </u>		age 2

	r		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	_5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u> </u>
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
t	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	11 b		X
c	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	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	11 d		X
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	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	11 f	Х	
12a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
	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	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
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 located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		<u>X</u>
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		<u>X</u>
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	Х	
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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	_	_X
Ł	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) Concho Valley Council, Inc.,

Partiv 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 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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? <i>If 'Yes,' complete Schedule J</i>	23	_	X
<b>24</b> a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	- · · -	
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	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		Х
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		Х
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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	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):			V
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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>	<u>X</u>
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_		X
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		_X_
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	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	35b		Х
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		Χ_
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990	(2011)

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1b 5 5 b Enter the number of Forms W-26 included in line 1a Enter -0- if not applicable 1b 0 C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return.  1b if at least one is reported on line 28, od the organization file all required federal employment tax returns?  1b if at least one is reported on line 28, od the organization file all required federal employment tax returns?  1b if at least one is reported on line 28, od the organization file at required federal employment tax returns?  1b if at least one is reported on line 28, od the organization file at part of the following the service of the complex of the compl	Pa	Check if Schedule O contains a response to any question in this Part V			П
be Enter the number of Forms W-20 included in line 1a Enter -0- if not applicable  Colf the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2e Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return.  1b if at least one is reported on line 2b, did the organization file all required federal employment tax returns?  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 unreaded business gross income of \$1,000 or more dump the year?  3b If Yes' has it filed a Form 990-T for this year? If Wo, 'provide an explanation in Schedule O  4a At any time duming the calendar year, did the organization have an interest in, or a significant excountly.  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization in party to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes', to the Sa of Sb, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to important the promote of the foreign country.  5c If Yes, to import the development of the form 8896-17  5c If Yes, to import the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If Yes, did the organization organization in excess of \$75 made partly as a contribution and partly for goods and services provided?  5c If Yes, did the organization include with every solicitation and exp				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) winnings to prize winners?  2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, field for the calendar year ending with or within the year covered by this return.  3 b It a least one is reported on line 2a, did the organization file all required federal employment tax returns?  3 b Did the organization have unrelated business gross income of \$1,000 or more during the year?  4 b It Wes has it filed a Form 990-T for this year? If No. 'provide an explanation in Schedule O  4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a bif Wes', enter the name of the foreign country;  5 es instructions for falling requirements for Form 10 F 90-22 1. Report of Foreign Bank and Financial Accounts  5 a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year?  5 a Was 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?  5 b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6 b If Yes, indicate the number of Forms 8282 filed during the year  7 b If Yes, indicate the number of Forms 8282 filed during the year  8 b If Yes, indicate the number of Forms 8282 filed during the year  9 b If Yes, indicate the number of Forms 8282 filed during the year  10 b the organization received a contribution of qualified intellectual property, did the organization file Form 8897  9 a Yes, indicate the number of Forms 8282 filed during the year  10 b the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899  11 b Yes, if did the organization notify the donor of the value of the good of services p		,			
(gambing) winnings to prize winners?  2 a 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.  15 bil at least one is reported on ine 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3 bil file seas not be reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3 bil files from 990-T for this year? If No. Transmittal organization in Schedule O  3 bil files from 990-T for this year? If No. Transmittal organization in Schedule O  3 bil files from 990-T for this year? If No. Transmittal organization in Schedule O  3 bil files from 990-T for this year? If No. Transmittal files from 990-T for this year?  5 a Mas the organization for thing requirements for Form TD F 90-22 1. Report of Foreign Bank and Financial Accounts  5 a Was the organization face organization file from 8886-T?  5 a Was the organization and a was organized and a party to a prohibited tax sheller transaction?  5 bil files, to line 5 a ro 5b, did the organization file if was or is a party to a prohibited tax sheller transaction?  5 bil files, to line 5 a ro 5b, did the organization file if organization shell were not lax deductible?  5 c c c c c c c c c c c c c c c c c c	1	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State learnests, filled for the calendar year ending with or within the year covered by this return.  b) If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions)  3a Did the organization have unrelated business gloss income of \$1,000 or more during the year?  3a X  b) If Yes has it filed a Form 990-T for this year? If No. Provide an explanation in Schedule O  3b A 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 accounts for the foreign country.  See instructions for filing requirements for Form TD F90.22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization at sale shelter transaction?  5a Was the organization and the organization that it was or is a party to a prohibited any shelter transaction?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible?  6b If Yes, did the organization neclude with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  6c Did the organization in the properties of the value of the goods or services provided?  7b If Yes, did the organization more the value of the goods or services provided?  7a X  7b X  7c X  4d If Yes, indicate the number of Forms 8282 filled during the year  8 If Yes, did the organization medium the year and	•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u> </u>	<del></del>	ļ
ments, filed for the calendar year ending with or within the year covered by this return.      A   15			1 c	Х	ļ
Note. If the sum of lines Ia and 2 as greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a 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 toreign country (such as a bank account, contin, securities account, or other innancial accounts) 5 a Was the organization aparty to a prohibited tax shelter fransaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter fransaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction? 5 a Was the organization aparty to a prohibited tax shelter transaction? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductible? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions and twee not tax deductible? 7 to granizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 9 to Was, indicate the number of Forms 8292 (filed during the year and the promise of the organization shall may receive deductible ontributions under section 170(c). 9 to Was, indicate the number of Forms 8292 (filed during the year and the promise of the organization shall may receive a payment in excess of \$75 made partity as a contribution and partity for goods and services provided? 9 to Was, indicate the number of Forms 8292 (filed during the year) 9 to Was, indicate the number of Forms 8292 (filed during the year) 9 to Was, indicate the number of Forms 8292 (filed during the year) 9 to Was, indicate the number of Forms 8292 (filed during the year) 9 to Was, ind	2	a 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 15			
3a Dd the organization have unrelated business gross income of \$1,000 or more during the year?  bil "Yes' has it field a Form 990-T for this year? If "No," provide an explanation in Schedule O  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).  bil "Yes', either the name of the foreign country: b  See instructions for filing requirements for Form TD F90-22 I, Report of Foreign Bank and Financial Accounts  Sa Was the organization for the foreign country: b  See instructions for filing requirements for Form TD F90-22 I, Report of Foreign Bank and Financial Accounts  Sa Was the organization flave annual gross receipts that are normally greater than \$100,000, and did the organization file form 8886-T?  6a 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?  6b If "Yes," to line 8 or 5 b, did the organization file Form 8886-T?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  b If "Yes," indicate the number of Forms 8822 filed during the year  c Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  for If If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  7 If If the organization receive any time, directly or indirectly, or a personal benefit contract?  7 If If the organization receive an	I	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
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Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?	i	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
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c Enter the amount of reserves on hand  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X	1	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X	(		}		ļ
<del>-   -   -   -   -   -   -   -   -   -  </del>			14a		Х
			14b		

Form 990 (2011) Concho Valley Council, Inc., 75-0800617 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section 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 40 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 40 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? See Schedule O 6 X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? See Schedule O 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O Х stockholders, or other persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Х 12a 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in X Schedule O how this is done 12c See Schedule O X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a **b** Other officers of key employees of the organization See Schedule O 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 taxable entity during the year? X 16a b If 'Yes,' did the organization follow 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 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 X 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 during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization: San Angelo TX 76903 (325) 655-7107 ► David Thompson 104 Veterans Memorial Drive

orm <b>990</b> (2011)	Concho	Valley	Council,	Inc.
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75-0800617

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(C)	
(A) Name and title Name and title  Name and title  Name and title  Average hours per week per week  Average hours per week per we	(F) Estimated amount of other compensation
(describe hours for related organizations in Schedule O)  (describe hours for related organizations in Schedule O)  (W-2/1099-MISC)  (W-2/1099-MISC)  (W-2/1099-MISC)	from the organization and related organizations
_(1) Will Allison	
<u>Director</u> 0 X 0. 0	. 0.
(2) Daniel Anderson	
Council Comm 0 X X 0. 0	. 0.
_(3)_Brandon_Barker	
Treasurer 0 X X 0. 0	. 0.
_(4) Gary Burt	
Director	. 0.
(5) Brad Bradley	
Director         0 X         0.         0	. 0.
(6) Judge Mike Brown	
	. 0.
(7) Robert Chandler	
<u>Director</u> 0 X 0. 0	. 0.
_(8) David Creek	1
	. 0.
(9) Joseph Cordova	
Director 0 X 0.	. 0.
(10) Jeff DeLoach	
Director 0 X 0.	. 0.
(11) William Dillard	
Amistad Distr 0 X 0.	. 0.
(12) Don Griffis	
VP Finance 0 X X X 0.	. 0.
(13) James Huffman	
VP Endowment 0 X X X 0.	. 0.
(14) Ted Hogan	
Director 0 X 0. 0	. 0.

Form 990 (2011) Concho Valley Council, In		•	F	, mla			200	l Highest Com	75-080061		F	Page 8
Part VII   Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								(COI	<u> 10 </u>			
(A) Name and title	(B) Average hours per	box.	, unle:	Pos heck ss pe	ition more rson lirecto	than is boti or/trus	h an tee)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of othe compensation		ther
	week (describ e hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fr org ar	rom the janization of relate anization	on ed
	organi- zations in Sch O)	Jstee	trustee		16	pensated						
(15) Jon Mark Hogg VP Admin	0	х		X				0.	0.			0.
(16) Gary Humphreys Director	0	Х						0.	0.			0.
(17) G Michael Jenike  VP - Membership	0	х		х				0.	0.			0.
(18) Kyle Sharp Wahinkto Lodge	0	х						0.	0.			0.
(19) Allen Moody Director	0	Х						0.	0.			0.
(20) Robert Nunley Director	0	X						0.	0.			0.
(21) Dr. Dean K Paret Director	0	X										
(22) Keith Southerland				v				0.	0.			0.
VP Program (23) Joe Robinette	0	X		X				0.	0.			0.
Director (24) Joe Will Ross	0	Х						0.	0.		<del></del>	0.
President (25) Rick Reeve	0	Х		X				0.	0.			0.
Scout Executive  1b Sub-total	40	X		X				98,079.	0. 0.	-		<u>0.</u> 0.
c Total from continuation sheets to Part VII, Section	Δ						<b>•</b>	98,079.	0.			0.
d Total (add lines 1b and 1c)	^						<b>•</b>	98,079.	0.			0.
2 Total number of individuals (including but not limite	d to the	ose I	liste	d ab	ove	) wh	o re	•	\$100,000 of report	able co	npens	
from the organization   0												
											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	ndıvıdu	al	•	,		,				3		X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portabl han \$1	e co 50,0	mpe 00?	ensa If 'Y	ition ∕es'	and com	oth oplet	er compensation te Schedule J for	from	4		X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of	ompen comple	satio	on fr	om . Iule	any <i>J fo</i>	unre	elate	ed organization or person	ındıvıdual	5		X
Section B. Independent Contractors												
1 Complete this table for your five highest compensation from the organization Report compe	ed inde	epen for	iden the	t coi cale	ntra enda	ctors r yea	tha ar e	at received more t inding with or with	han \$100,000 of in the organization	s tax ye	ar	
(A) Name and business addres	s							Description		Compe	C) ensatio	on
	<del></del>											
2 Total number of independent contractors (including	but no	t lım	uted	to f	hose	e list	ed a	bove) who receive	ed more than			
\$100,000 in compensation from the organization												

Га	t viii   Statement of Revenue		(A)	(B)	(C)	(D)
:			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
's, c	1a Federated campaigns. 1a	80,919.		revende		312, 313, 01 314
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b	00/323.				
g Š	c Fundraising events 1c					
FIS	d Related organizations 1d					
<u>_</u>	e Government grants (contributions) 1 e					
S S						
	f All other contributions, gifts, grants, and similar amounts not included above	36,158.				
E O	g Noncash contributions included in Ins 1a-1f: \$	,				
ਨੁ₹	h Total. Add lines 1a-1f	<b>&gt;</b>	917,077.			
UE	Bus	iness Code				
KE	2a Camping Revenue	·	61,242.	61,242.		
2	b Activity Revenue		52,541.	52,541.		· · · · · ·
Š	c		·			
SER	d					
Ψ	e					
PROGRAM SERVICE REVENUE	f All other program service revenue					
PR.	g Total. Add lines 2a-2f	<b>&gt;</b>	113,783.			
	3 Investment income (including dividends, inter	est and				
	other similar amounts)		48,448.	-43,153.		91,601.
	4 Income from investment of tax-exempt bond	· •				
	5 Royalties	<b>•</b>				
		ii) Personal				
	6a Gross rents 101, 338.					
	b Less, rental expenses		*			
	c Rental income or (loss) 101, 338.	<b>•</b>	101 220	<u></u>	<del></del>	101 220
	(1) Coourthus	(II) Other	101,338.			101,338.
	7a Gross amount from sales of assets other than inventory	(ii) Other				
	, <u> </u>		<i>;</i>		*	
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)				**	
	d Net gain or (loss)					
UE	8a Gross income from fundraising events (not including \$					
	of contributions reported on line 1c)					
OTHER REVEN	•	313,059.				
HEF	· · · · · · · · · · · · · · · · · · ·	96,329.				
Ö	c Net income or (loss) from fundraising events	, 	116,730.			
	9a Gross income from gaming activities See Part IV, line 19					
	<b>b</b> Less. direct expenses <b>b</b>					
	c Net income or (loss) from gaming activities	•				
	10a Gross sales of inventory, less returns and allowances a	80,389.				
	<b>b</b> Less: cost of goods sold <b>b</b>	55,063.				
	c Net income or (loss) from sales of inventory	•	25,326.	25,326.		
		iness Code				
	11a Other Revenue		2,960.		*****	2,960.
	b		<del> </del>		· <del></del>	ļ
	c					
	d All other revenue					
;	e Total. Add lines 11a-11d	•	2,960.			10- 00-
	12 Total revenue. See instructions	▶	1,325,662.	95,956.	0.	195,899.

#### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a re		T		
Do l 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	98,079.	77,816.	4,865.	15,398.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	308,775.	294,916.	5,662.	8,197.
7	Other salaries and wages		-		
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	97,078.	87,960.	2,813.	6,305.
10	Payroll taxes	33,355.	30,320.	936.	2,099.
11	Fees for services (non-employees)				· ·
	a Management				
1	<b>L</b> egal [				
	C Accounting.				
	d Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	g Other	30,876.	16,701.	13,017.	1,158.
	Advertising and promotion				,
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	56,357.	54,377.	532.	1,448.
17	Travel	87,898.	84,909.	922.	2,067.
	Payments of travel or entertainment expenses for any federal, state, or local public officials	5.,556.	51,555		
19	Conferences, conventions, and meetings	33,494.	31,358.	256.	1,880.
20	Interest	1,778.	1,615.	50.	113.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	35,430.	32,100.	1,027.	2,303.
23	Insurance	18,302.	17,465.	258.	579.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				, -
	a_Supplies	67,838.	64,074.	116.	3,648.
1	Recognition Awards	14,799.	9,638.	88.	5,073.
	Telephone	11,106.	10,427.	210.	469.
	d Miscellaneous Expense	9,036.	4,420.	116.	4,500.
1	e All other expenses.	24,236.	21,001.	314.	2,921.
25	Total functional expenses. Add lines 1 through 24e	928,437.	839,097.	31,182.	58,158.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ►				
	SOP 98-2 (ASC 958-720)			L	

Pa	<u>ırt X</u>	Balance Sheet				
				(A) Beginning of year		( <b>B)</b> End of year
	1	Cash non-interest-bearing .		74,017.	1	277,887.
	2	Savings and temporary cash investments	31,120.	2	16,926.	
	3	Pledges and grants receivable, net		31,547.	3	196,210.
	4	Accounts receivable, net .		4,687.	4	10,688.
	5	Receivables from current and former officers, directo and highest compensated employees. Complete Part	rs, trustees, key employees, II of Schedule L		5	
	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contisponsoring organizations of section 501(c)(9) voluntal organizations (see instructions)	ributing employers and		6	
A S	7	Notes and loans receivable, net			7	
A S S E T S	8	Inventories for sale or use		39,768.	8	33,387.
T S	9	Prepaid expenses and deferred charges	_	27,205.	9	14,970.
	10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	1,770,853.			
	ь	Less accumulated depreciation	10b 1,316,243.	365,347.	10 c	454,610.
	11	Investments — publicly traded securities		1,132,623.	11	1,044,859.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	İ		15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	1,706,314.	16	2,049,537.
	17	Accounts payable and accrued expenses		52,729.	17	41,633.
	18	Grants payable		18		
	19	Deferred revenue		35,400.	19	23,759.
Ļ	20	Tax-exempt bond liabilities			20	
A B	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21	
I L I T	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified pe of Schedule L	stees, key employees, rsons. Complete Part II		22	*
- 1	23	Secured mortgages and notes payable to unrelated the	nird parties		23	
S	24	Unsecured notes and loans payable to unrelated third	'	,	24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	· .	49,189.	25	35,702.
	26	Total liabilities. Add lines 17 through 25		137,318.	26	101,094.
N E T		Organizations that follow SFAS 117, check here ▶	X and complete lines			
Ť		27 through 29 and lines 33 and 34.	_			
Ş	27	Unrestricted net assets		1,302,123.	27	1,297,836.
ANNEFS	28	Temporarily restricted net assets		47,020.	28	426,754.
	29	Permanently restricted net assets	219,853.	29	223,853.	
R		Organizations that do not follow SFAS 117, check he	ere ► and complete			
Ę		lines 30 through 34.	<del></del>			
FUZD	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipm		31		
Ĺ	32	Retained earnings, endowment, accumulated income			32	
BALAZCES	33	Total net assets or fund balances .	•	1,568,996.	33	1,948,443.
Š	34	Total liabilities and net assets/fund balances		1,706,314.	34	2,049,537.
BA					1	Form <b>990</b> (2011)

BAA

Form 990 (2011)

Forn	1 <b>990</b> (	2011) Concho Valley Council, Inc., 75-08	80 <u>0617</u>		Pa	ge 12
Pai	t XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response to any question in this Part XI				. X
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	<u>1,3</u> ;	25,6	62.
2	Total	expenses (must equal Part IX, column (A), line 25)	2	92	28,4	<u>37.</u>
3	Reve	nue less expenses. Subtract line 2 from line 1	3		97,2	
4	Net a	essets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>1,5</u>	<u>68,9</u>	<u>96.</u>
5	Othe	r changes in net assets or fund balances (explain in Schedule O) See Schedule O	5		<u> 17,7</u>	<u>78.</u>
6	colur	essets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, nn (B))	6	1,9	48,4	43.
Pa	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response to any question in this Part XII			,	
			_		Yes	No
1	Acco	unting method used to prepare the Form 990 <sup>.</sup> Cash X Accrual Other				
	If the	organization changed its method of accounting from a prior year or checked 'Other,' explain checked of accounting from a prior year or checked of the control of the change of the control				
2	a Were	the organization's financial statements compiled or reviewed by an independent accountant?	L	2a		X
ı	<b>b</b> Were	the organization's financial statements audited by an independent accountant?		2b	X	
•	o If 'Ye	es' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the w, or compilation of its financial statements and selection of an independent accountant?	audit,	2c	Х	
	If the	e organization changed either its oversight process or selection process during the tax year, explain chedule O.				
•		es' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued rate basis, consolidated basis, or both	a no t			
		Separate basis Consolidated basis X Both consolidated and separate basis	-			
3		result of a federal award, was the organization required to undergo an audit or audits as set forth in the St Act and OMB Circular A-133?	ıngle	3a		X
	b If 'Ye or au	es,' did the organization undergo the required audit or audits? If the organization did not undergo the requil Idits, explain why in Schedule O and describe any steps taken to undergo such audits	red audit	3Ь		
BAA	\		-	Form	990 (	2011)

TEEA0112L 07/06/11

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

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Total

Concho Valley Council, Inc., Boy Scouts of America #741

Employer Identification number 75-0800617

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(bX1)(AX)iii) Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives. (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Functionally integrated Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization 11 g (i) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (i) Name of supported organization (iv) is the organization in olumn (i) listed in (v) Did you notify the organization in column (i) of your support? (ii) EIN (III) Type of organization (vi) Is the (vii) Amount of support (described on lines 1-9 above or IRC section (see Instructions)) organization in column (i) organized in the your governing document? No Yes No (A) **(B)** (C) (D) **(E)** 

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

Schedule A (Form 990 or 990-EZ) 2011

### 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.)

Sec	tion A. Public Support							
begi	ndar year (or fiscal year nning in) ►	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	369,918.	377,878.	325,519.	357,391.	917,077.	2,347,783.	
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	369,918.	377,878.	325,519.	357,391.	917,077.	2,347,783.	
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)						0.	
	<b>Public support.</b> Subtract line 5 from line 4						2,347,783.	
<u>Sec</u>	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total	
7	Amounts from line 4	369,918.	377,878.	325,519.	357,391.	917,077.	2,347,783.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	252,403.	-45,228.	316,893.	285,799.	149,846.	959,713.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV	11,886.	9,879.	14,401.	7,632.	11,080.	54,878.	
11	Total support. Add lines 7 through 10	* .	-	₹ - ?	* *	,	3,362,374.	
12	Gross receipts from related active	ities, etc (see inst	ructions)			12	0.	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, o	r fifth tax year as	a section 501(c)(	3)	
	tion C. Computation of Pu							
	Public support percentage for 20	•		e 11, column (f))		14	69.83%	
15	Public support percentage from	2010 Schedule A,	Part II, line 14.			15	61.88%	
16 a	16a 33-1/3% support test — 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
b	33-1/3% support test — 2010. If the and stop here. The organization	the organization di qualifies as a pub	id not check a boo licly supported or	x on line 13 or 16 ganization	oa, and line 15 is	33-1/3% or more,	check this box	
1 <b>7</b> a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances	test, check this	box and stop her	<b>e.</b> Explain in Part	IV how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est The organiza	s' test, check this ition qualifies as a	box and <b>stop her</b> a publicly support	e. Explain in Part ed organization	IV how the ►	
18 BAA	Private foundation. If the organi	zation did not che	ck a box on line 1	13, 16a, 16b, 17a	·		structions	

### 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	tion A. Public Support						
	dar year (or fiscal yr beginning in)►	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	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 a 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						
c	Add lines 7a and 7b			-			
8	Public support (Subtract line 7c from line 6)	· · · · · · · · · · · · · · · · · · ·			data water to be a second	** (	
	tion B. Total Support					1	
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, 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						
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						,
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
14	organization, check this box and			nd, third, fourth, o	r fifth tax year as	a section 501(c)(3	3) ▶ □
Sec	tion C. Computation of Pu						
15	Public support percentage for 20	)11 (line 8, columi	n (f) divided by lin	e 13, column (f))		15	ક
16	Public support percentage from	2010 Schedule A,	Part III, line 15			16	%
Sec	tion D. Computation of Inv	estment Incor	ne Percentage				
17	Investment income percentage f	or <b>2011</b> (line 10c,	column (f) divide	d by line 13, colu	mn (f))	17	9
18	Investment income percentage f	•	• • •	-		18	8
19 a	33-1/3% support tests – 2011. I				ind line 15 is mor		
	is not more than 33-1/3%, check	this box and sto	<b>p here.</b> The organ	zation qualifies a	s a publicly supp	orted organization	▶ 📗
t	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%	6, check this box a	and <b>stop here.</b> The	e organization qu	alifies as a public	ly supported organ	3-1/3%, and ►
_20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	<b>&gt;</b>

Part IV	Supplemental Inform Part II, line 17a or 17 (See instructions).	nation. Complete th	is part to provide to 12. Also complete	he explanations req this part for any ac	ured by Part II, lir dditional informatio	Page <b>4</b> ne 10; nn.
- <b></b>						
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#### **SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Cor	ncho Valley Council, Inc., y Scouts of America #741			75-0800617
	rt   Organizations Maintaining Dono	r Advised Funds or Other Sim	nilar Funds or Acc	
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) F	unds 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 dor funds are the organization's property, subject	nor advisors in writing that the assets to the organization's exclusive legal (	s held in donor advised control?	Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor adv	grant funds can be usor, or for any other	□Yes □ No
Pai	rt II   Conservation Easements. Compl		ed 'Yes' to Form 9	<u></u>
1	Purpose(s) of conservation easements held by			50, 1 art 10, line 7.
•	Preservation of land for public use (e.g., r		• •	ally important land area
	Protection of natural habitat	· H	servation of a certified	•
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation cont	ribution in the form of	a conservation easement on the
			_## <b>I</b>	Held at the End of the Tax Year
ä	a Total number of conservation easements		2a	
I	b Total acreage restricted by conservation ease	ments	2b	
•	c Number of conservation easements on a certi	fied historic structure included in (a).	2c	
(	d Number of conservation easements included i structure listed in the National Register	n (c) acquired after 8/17/06, and not	on a historic 2d	
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished,	or terminated by the or	ganization during the
4	Number of states where property subject to co	onservation easement is located 🕨		
5	Does the organization have a written policy re and enforcement of the conservation easement	garding the periodic monitoring, inspints it holds?	ection, handling of viol	ations, Yes No
6	Staff and volunteer hours devoted to monitorii	ng, inspecting, and enforcing conserv	vation easements durin	g the year
7	Amount of expenses incurred in monitoring, in \$	nspecting, and enforcing conservation	n easements during the	e year
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(i)?	n line 2(d) above satisfy the requirem	nents of section	Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements			
Pai	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treas wered 'Yes' to Form 990, Part	sures, or Other Sin	nilar Assets.
1;	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its final	s held for public exhibition, education	n, or research in furthei	nt and balance sheet works of rance of public service, provide,
I	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report in it eld for public exhibition, education, or	ts revenue statement a research in furtheranc	nd balance sheet works of art, e of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X			►\$ ►\$
	If the organization received or held works of a amounts required to be reported under SFAS	116 (ASC 958) relating to these item	ar assets for financial ( is:	gain, provide the following
	a Revenues included in Form 990, Part VIII, line	e 1		<b>&gt;</b> \$
	b Assets included in Form 990, Part X			▶\$

Schedule D (Form 990) 2011 Conch					75-080			Page 2
Part III Organizations Maintai	ning Collection	s of Art, Histo	rical Treasures	<u>, or Other</u>	Similar Ass	ets (co	<u>əntınu</u>	<u>ed)</u>
3 Using the organization's acquisition items (check all that apply):	on, accession, and	other records, che	eck any of the follow	wing that are	e a significant u	se of its	collec	tion
a Public exhibition			or exchange program	ms				
<b>b</b> Scholarly research		e U Other						
c Preservation for future general Provide a description of the organ		s and explain how	thev further the or	oanization's	exempt purpos	e in		
Part XIV								
assets to be sold to raise funds ra						Yes		No
Part IV Escrow and Custodial line 9, or reported an a	Arrangements amount on Form	. Complete if t n 990, Part X,	he organization line 21.	answered	d 'Yes' to For	m 990	i, Part	∶IV,
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or c	ther intermediary	for contributions or	other asse	ts not [	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and coi	nplete the followi	ng table			Amount		<u>.</u>
c Beginning balance				10	-	Alliouill		
d Additions during the year				10	·			
e Distributions during the year				16	- <del> </del>			
f Ending balance				11				
2a Did the organization include an ai	mount on Form 990	, Part X, line 21?				Yes		No
<b>b</b> If 'Yes,' explain the arrangement								
Part V   Endowment Funds. Co		ganization ans						
. <u>.</u>	(a) Current year	(b) Prior year			Three years back	(e) F	Four years	s back
1a Beginning of year balance	776,938				779,791.			
<b>b</b> Contributions	333,436	. 98,0	00. 1,	000.	2,818.	1		
c Net investment earnings, gains, and losses	-10,451	. 83,5	48. 100,	426.	-158,285.			Í
d Grants or scholarships	-45,411				-39,868.	1		
e Other expenditures for facilities and programs					0.			
f Administrative expenses	-9,071	5,3	044,	898.	-5,841.	T	<del>,,,</del>	
g End of year balance	1,045,441	· ·			578,615.	, ,		
2 Provide the estimated percentage	of the current yea	r end balance (lin	e 1g, column (a)) h	eld as:	-			
a Board designated or quasi-endow	ment 🟲	8						
<b>b</b> Permanent endowment ▶	%							
c Temporarily restricted endowmen		%						
The percentages in lines 2a, 2b,	and 2c should equa	I 100%						
3a Are there endowment funds not in organization by	n the possession of	the organization	that are held and a	ıdmınıstered	for the	Г	Yes	No
(i) unrelated organizations						3a(i)	X	'''
(ii) related organizations						3a(ii)		Х
<b>b</b> If 'Yes' to 3a(ıı), are the related o	rganizations listed	as required on So	hedule R?			3b		
4 Describe in Part XIV the intended	•	•		Part XIV	•			
Part VI Land, Buildings, and E								
Description of property		st or other basis investment)	(b) Cost or other basis (other)		ccumulated preciation	( <b>d</b> ) E	Book va	alue
1 a Land			195,94	<del></del>			195	,944.
<b>b</b> Buildings			950,93		885,921.		65	,013.
c Leasehold improvements			275,21	- +	247,965.			<u>,247.</u>
<b>d</b> Equipment			91,51		55,973.			,538.
e Other			257,25	2.	126,384.			<u>,868.</u>
Total. Add lines 1a through 1e (Column	n (d) must equal F	orm 990, Part X,	column (B), line 10	(c) )				<u>,610.</u>
BAA					Sched	ule <b>D</b> (F	orm 99	90) 2011

	-0800617	Page <b>4</b>
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	325,662.
2 Total expenses (Form 990, Part IX, column (A), line 25)		928,437.
3 Excess or (deficit) for the year Subtract line 2 from line 1		397,225.
4 Net unrealized gains (losses) on investments		-1,902.
5 Donated services and use of facilities .		
6 Investment expenses .		
7 Prior period adjustments.		
8 Other (Describe in Part XIV.) See Part XIV		-15,876.
9 Total adjustments (net) Add lines 4 through 8		-17,778.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		379,447.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
1 Total revenue, gains, and other support per audited financial statements		323,760.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments 2a -1, 902.		
b Donated services and use of facilities 2b	1	
c Recoveries of prior year grants.	1	
d Other (Describe in Part XIV)	1.	
e Add lines 2a through 2d	2e	-1,902.
3 Subtract line 2e from line 1		,325,662.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	J	, 525, 662.
a Investment expenses not included on Form 990, Part VIII, line 7b		
	1 1	
b Other (Describe in Part XIV) c Add lines 4a and 4b	1.5.4	
	<b>4c</b> 5 1	225 ((2
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		,325,662.
Part XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per		020 720
1 Total expenses and losses per audited financial statements	1	939,720.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	•   ]	
a Donated services and use of facilities 2a	4 4	
b Prior year adjustments	l ' "	
c Other losses 2c	L	
d Other (Describe in Part XIV.) See Part XIV 2d 11,283.	المنتخب	
e Add lines 2a through 2d	2e	11,283.
3 Subtract line 2e from line 1	3	928,437.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	1	
b Other (Describe in Part XIV ) . 4b	,** 1 <sub>\si</sub>	
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	928,437.
Part XIV   Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete any additional information.	', lines 1b and 2 e this part to pi	2b; ovide
Part_V_ Line 4 - Intended Uses_Of Endowment Fund		
Income_from_the_endowment_funds_is_used_to_fund_the_operations_of_the	e Council	_ Each
endowment_has_an_annual_spending_rate_that_is_distributed_from_the_ea	arnings_of	_the
endowment_to_the_operating_accounts_of_the_council_to_supplement_the	fundraisi	.ng.,
grants, program_fees and other_income_to the Council	- <del></del>	
Part X - FIN 48 Footnote		
The Organization adopted the provisions of FASB_ASC_740-10-25, which	requires	<u>that a _</u>
tax position be recognized or derecognized based on a "more likely the	han not" Schedule <b>D</b> (F	orm 990\ 2011

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Schedule D (Form 990) 2011 Concho Valley Council, Inc.,	75-0800617	Page 5
Part XIV Supplemental Information (continued)		
Part X - FIN 48 Footnote (continued)	·	
standard. This applies to tax positions taken or expected to be	taken in a tax	
return. The Organization does not believe its December 31, 2011	financial stateme	en <u>ts</u>
include_any_uncertain_tax_positions		<del>-</del>
<b></b>	·	<b>-</b> -
		<b></b>
<del>-</del>		
		<b>-</b>
	· <b></b>	
		<b>-</b>

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

## Supplemental Information Regarding Fundraising or Gaming Activities

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Name of the organization Concho Valle	v Council.	Inc				Employer identifica	ation number
Boy Scouts o	f America	#741 <i>*</i>				75-080061	7
Part Fundraising Activities. Comp Form 990-EZ filers are not re	olete if the orga	nization ar	nswered 'Y art.	res' to Form 990, Part I	V, line 1	7.	
1 Indicate whether the organization							
a Mail solicitations			е	$\Box$			
b Internet and email solicitation	c		f	Solicitation of gove	_	_	
<del></del>	3		-	<b>—</b>		grants	
c Phone solicitations			g	Special fundraising	events		
d In-person solicitations				d 1 A 1 d 1 d 1			
2a Did the organization have a writte employees listed in Form 990, Pa	n or oral agreel rt VII) or entity	ment with in connect	any individual tion with n	duai (including oπicers, professional fundraising	director	s, trustees or K	ey Yes X No
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	he organization	uues (iunc	araisers) p	oursuant to agreements	under w	nich the fundra	iser is to be
(i) Name and address of individual	(ii) Activity		fundraiser	(iv) Gross receipts	(v) Ar	nount paid to	(vi) Amount paid to
or entity (fundraiser)	(1)	have custor	dy or control		or i	retained by)	(or retained by)
	1	of contr	ibutions?			aiser listed in	organization
			T			olumn (i)	
		Yes	No				
1							
	1	1					
2							
3							
_							
4							
5							
6							
7							
8							
9							
		<del> </del>	<del> </del>		-		
10							
Total			<u> </u>				0.
3 List all states in which the organiz or licensing	zation is registe	red or lice	nsed to so	olicit contributions or ha	s been	notified it is exe	empt from registration
		<b></b>		<b></b>			
<del></del>							
	<del>-</del>					<del>-</del>	
	<del>-</del>					<del>-</del>	

		Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts great the state of the st	the organization ar event contributions	swered 'Yes' to For	75-080 rm 990, Part IV, Iir on Form 990-EZ,	ne 18, or reported		
RES		g c c r c c g c c	(a) Event #1 Popcorn Sales (event type)	(b) Event #2 Claybird Shoot (event type)	(c) Other events  1 (total number)	(d) Total events (add column (a) through column (c))		
MCZM <m2< td=""><td>1</td><td>Gross receipts</td><td>233,439.</td><td>60,255.</td><td>15,835.</td><td>309,529.</td></m2<>	1	Gross receipts	233,439.	60,255.	15,835.	309,529.		
Ē	2	Less: Charitable contributions						
	3	Gross income (line 1 minus line 2)	233,439.	60,255.	15,835.	309,529.		
	4	Cash prizes						
	5	Noncash prizes						
DIRECT	6	Rent/facility costs						
	7	Food and beverages						
E P	8	Entertainment						
EXPERSES	9	Other direct expenses	157,881.	29,538.	6,604.	194,023.		
, ,	10	Direct expense summary Add lines 4 thr	-		<b>&gt;</b>	194,023. 115,506.		
Pai	11 <u>till</u>	Net income summary Combine line 3, co Gaming. Complete if the organiza	tion answered 'Yes	s' to Form 990, Pari	IV, line 19, or rep			
		\$15,000 on Form 990-EZ, line 6a.		435 114 11 11 1		AD Table		
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))		
Ĕ	1	Gross revenue						
E	2	Cash prizes						
D P E N S E S	3	Non-cash prizes	_					
C S T E S	4	Rent/facility costs						
	5	Other direct expenses				2005 7 18 5 18 6 18 6 18 6 18 6 18 6 18 6 18 6		
	6	Volunteer labor	Yes % No	Yes%	Yes %			
	7 Direct expense summary Add lines 2 through 5 in column (d)							
	8	Net gaming income summary Combine I	ines 1, column (d) and	line 7	<b>&gt;</b>			
á	ls tl	er the state(s) in which the organization opne organization licensed to operate gaming lo,' explain	g activities in each of th	ese states?		Yes No		
		re any of the organization's gaming license 'es,' explain:	·		=	Yes No		

SCITE	edule G (Form 990 or 990-E2) 2011 Colletto Valley Council, Inc.,	190080-0	<u>. / </u>	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming?	med to	Yes	No
13	Indicate the percentage of gaming activity operated in:	1 1		
	The organization's facility	13a		*
t	An outside facility .	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	records		
	Name •		- <b>-</b>	
	Address •			<b>-</b>
ŧ	a Does the organization have a contact with a third party from whom the organization receives gaming revenue of If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ and the of gaming revenue retained by the third party ► \$  If 'Yes,' enter name and address of the third party:		Yes	No
	Name •			
	Address ►			 
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to reta state gaming license?	l	Yes	No
١	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or	spent in the	•	
	organization's own exempt activities during the tax year • \$	had David 1	l 0	
irai	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicathis part to provide any additional information (see instructions).	able. Also	, line 2 comp	b, lete
		<del></del> -		
	···			
			_	

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

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service

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.

open to Public

Name of the organization Concho Valley Council, Inc.,	Employer Identification number
Boy Scouts of America #741	75-0800617
Form 990, Part I, Line 1 - Mission	
It is the mission of the council to promote through organizat	tion, and cooperation
with other agencies, the ability of boys to do things for the	emselves and others, to
train them in Scoutcraft, and to teach them patriotism, coura	age, self-reliance, and
kindred_virtues, using the methods which are now in common_us	se by Boy Scouts, by
placing_emphasis_upon_the_Scout_Oath_and_Law_for_character_de	evelopment, citizenship
training and physical fitness.	
Form 990, Part III, Line 1 - Organizational Mission	
It is the mission of the council to promote through organizat	tion, and cooperation
with other agencies, the ability of boys to do things for the	emselves and others, to
train them in Scoutcraft, and to teach them patriotism, cours	age, self-reliance, and
kindred_virtues, using the methods_which are now in common_us	se by Boy Scouts, by
placing emphasis upon the Scout Oath and Law for character de	evelopment, citizenship
training and physical fitness.	
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholde	r
Active members may elect members of the governing body, and	approve significant
decisions of the governing body.	
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing E	Body
Active members may elect members at large, regular members of	f the executive board,
and officers of the corporation other than the Scout executive	ve.
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members	or Shareholders
Active members may vote at the annual meeting to receive and	approve financial
statements as of the close of its most recent complete fisca	l year and other such
business as may come before the meeting. Active members may	also vote in regular and
special meetings on matters including but not limited to whe	ther to merge with
another council or councils.	

Boy Scouts of America #741	75-0800617
Form 990, Part VI, Line 11b - Form 990 Review Process	
A complete copy of the Council's Form 990 is reviewed primarily	by the controller,
the audit committee and the Scout Executive. A copy is also for	erwarded to the
National Boy Scouts of America representative for review.	·
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	flicts
If any matter is discussed at any meeting where any executive h	poard or committee
member_who has an interest is present, he or she discloses to t	the chairman of the
meeting his or her interest in the matter to be voted on. He of	or she does not vote
on the matter and may be asked to leave the meeting during the	discussion and
voting.	·
Annually, a conflict of interest form is completed whereby all,	if any, conflicts of
interest are documented.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers	s & Key Employees
Each year the council President appoints an independent compens	ation and benefits
committee whose responsibility is to establish a compensation p	oackage for key
employees based on performance reviews conducted by the Scout E	xecutive using data
as to comparable compensation for similarly qualified persons i	n functionally
comparable positions at similarly situated organizations. There	e is contemporaneous
documentation and record keeping with respect ot the deliberati	ons and decisions
regarding the compensation arrangement.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
If the governing documents (articles of incorporation, bylaws,	and constitution) and
policies of the Council are subject to the Federal public discl	osure rules (or state
public disclosure rules), these documents will be made publicly	available as
applicable law may require. Otherwise, the governing documents	and policies will be
provided to the public at the discretion of management.	<b></b>

Schedule <b>O</b> (Form 990 or 990-EZ) 2011	Page 2
Name of the organization Concho Valley Council, Inc., Boy Scouts of America #741	Employer Identification number 75-0800617
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available (c	continued)
The following documents are available for public inspection at	the Council's Service
Center located at 104 Veterans Memorial Dr., San Angelo, TX 769	903 or on the
Organization's web site at http://cvcbsa.org/ All documents as	required by federal,
state, and local law, including but not limited to the IRS Form	n 990 and if
applicable, the IRS Form 990T; annual report; audited financial	l statements; minutes
of the Executive Board meetings.	
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2011

# Schedule A, Part IV - Supplemental Information Concho Valley Council, Inc., Boy Scouts of America #741

Page 5

75-0800617

Part II, Line 10 - Other Income

Nature and Source	2011	2010	2009	2008	2007
Other Income	11,080.	7,632.	14,401.	9,879.	11,886.
Total	\$ 11,080.	\$ 7,632.	\$ 14,401.	\$ 9,879.	\$ 11,886.

2011 Schedule D, Part XIV - Supplemer  Concho Valley Council, Inc Boy Scouts of America #74	
Schedule D, Part XI, Line 8 Other Changes In Net Assets Or Fund Balances	
Provision for uncollectible pledges Provision for uncollectible pledges	\$ -1,201. -14,675. \$ -15,876.
Schedule D, Part XIII, Line 2d Other Expenses And Losses Per Audited F/S	
Charter and national service fee	Total \$ 11,283. \$ 11,283.

2011	
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### **Schedule O - Supplemental Information**

Page 2

Concho Valley Council, Inc., Boy Scouts of America #741

75-0800617

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

Net Unrealized Gains or Losses on Investments Provision for uncollectible pledges Provision for uncollectible pledges

	\$ -1,902.
	-1,201.
	 -14,675.
Total	\$ -17,778.

#### **Form 990**

### **Continuation Sheet for Form 990**

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

Employler Identification number

Concho Valley Council, Inc., 75-0800617

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees										
(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)		Reportable compensation from	Reportable compensation from	Estimated amount of other				
	hours per week	Individual trustee or director	Insti	Officer	Key employee	함	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
		/idua	putro	ěř	emp	loyed	Ter .	(11-2/1033/111100)	(** 2 1035 141100)	organization and related
		2 5	nalt		oloye	Ę "	 			organizations
		stee	Institutional trustee		i di	Highest compensated employee				
			ě			) ře				
Julie Seay										
VP Marketing		Х		X				0.	0.	0.
William Scott		1			l					
VP Properties		<u>X</u>	<u> </u>	X	<u> </u>			0.	0.	0.
Ben Campagna									_	_
Legal Counsel	<u> </u>	X			<u> </u>			0.	0.	0.
Harold Sharp		١								•
Amangi Trl Dist		<u> </u>		_	<b> </b> -			0.	0.	0.
Danny Williams	-	١.,								•
Amistad Distr		<u> </u>	_	<u> </u>				0.	0.	0.
Bo Strickland	-	٠,								0
Director		X	_			-		0.	0.	0.
William Wiedenfeld, Jr	1	v								0
Director White	<del></del> -	X	$\vdash$	⊢				0.	0.	0.
Jerry White	1	X							0	0
Director John Gilbreath	-	_^		_				0.	0.	0.
Director	-	X						0.	0.	0.
John Mayer	-	_^		-	$\vdash$					
Director	1	x				ļ		0.	0.	0.
Richard Ervin	<b></b>	_^			<del> </del>	<del>                                     </del>		0.	····	
Director	1	x						0.	0.	0.
George W Pride	1-	_ <u>~</u>		-	<del> </del>			0.		
Director	1	X				ļ		0.	0.	0.
David Cummings		<del>  ``</del>						<del>-</del>		
Director	1	X						0.	0.	0.
David Doran		<del></del>								
Director	1	Х						0.	0.	0.
Michael McShan			_	-						
Director	1	Х						0.	0.	0.
	1									
	1	1								
				L			L			
						t				
			L							
	1									
		<u></u>					<u> </u>			

### (Rev January 2012)

Application for Extension of Time To File an **Exempt Organization Return** 

OMB No 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box. X 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 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 Partil 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 Part I only 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. Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or Concho Valley Council, Inc., print Boy Scouts of America #741 X 75-0800617 File by the due date for filing your return See instructions Number, street, and room or suite number. If a P O box, see instructions Social security number (SSN) 104 Veterans Memorial Dr City, town or post office, state, and ZIP code. For a foreign address, see instructions San Angelo, TX 76903-6400 01 Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For **Application** Return Return Code Is For Code 07 Form 990 01 Form 990-T (corporation) Form 990-BL Form 1041-A 80 Form 990-EZ 01 Form 4720 09 10 Form 990-PF 04 Form 5227 11 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) Form 8870 • The books are in the care of ► David Thompson Telephone No ►\_(325)\_655-7107\_\_\_\_\_ 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, I. If it is for part of the group, check this box and attach a list with the names and EINs of all members check this box the extension is for 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 , 20 12 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 11 or tax year beginning \_\_\_\_, 20 \_\_\_, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a \$ 0. nonrefundable credits 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

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

payments made Include any prior year overpayment allowed as a credit

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