



MELTON & MELTON, L.L.P.
CERTIFIED PUBLIC ACCOUNTANTS

Boy Scouts of America
Sam Houston Area Council
2225 N. Loop West
Houston, TX 77008

DEAR CLIENT:

Enclosed are the original and one copy of the 2020 Exempt Organization return, as follows...

2020 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

The enclosed return(s) were prepared from your books and records without audit. You should review the return(s) to ensure there are no omissions or misstatements.

Any act of self-dealing, the making or retaining of excess business holdings, or jeopardizing investments, and the making of taxable expenditures may subject the foundation to penalty excise taxes of from 5% to 200% of the amount of prohibited transaction. Please contact us for further information if you have questions concerning any of these prohibited transactions.

The Internal Revenue Service may impose substantial penalties if certain foreign bank accounts or assets are not reported. Please inform us and do not file this return if you have signatory authority or a financial interest in any foreign bank accounts or assets.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions or if we may be of further assistance.

Very truly yours,

Melton & Melton, LLP

MELTON & MELTON L.L.P.
CERTIFIED PUBLIC ACCOUNTANTS

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING
December 31, 2020

Prepared for	Boy Scouts of America Sam Houston Area Council 2225 N. Loop West Houston, TX 77008
Prepared by	MELTON & MELTON, LLP 6002 ROGERDALE RD., SUITE 200 HOUSTON, TX 77072
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by November 15, 2021.

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2020, or fiscal year beginning _____, 2020, and ending _____, 20__

2020

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Taxpayer identification number 76-0239833
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Name and title of officer or person subject to tax
**MARVIN D. SMITH
CEO/SCOUT EXECUTIVE**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>10,581,577.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here ▶ <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here ▶ <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize MELTON & MELTON, LLP to enter my PIN 17306
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax  Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

76648617306
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns**.

ERO's signature ▶  Date ▶ 7 10 2021

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning and ending


B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL Doing business as		D Employer identification number 76-0239833
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2225 N. LOOP WEST	E Telephone number 713-659-8111	
	City or town, state or province, country, and ZIP or foreign postal code HOUSTON, TX 77008		G Gross receipts \$ 46,247,067.
	F Name and address of principal officer: MARVIN D. SMITH 2225 N. LOOP WEST, HOUSTON, TX 77008		H(a) Is this a group return for subordinates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No STMT 1 H(b) Are all subordinates included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶ 1761
J Website: ▶ WWW.SAMHOUSTONBSA.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶
L Year of formation: 1914			M State of legal domicile: TX

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O																									
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.																									
	3	Number of voting members of the governing body (Part VI, line 1a) 64																								
	4	Number of independent voting members of the governing body (Part VI, line 1b) 64																								
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a) 181																								
	6	Total number of volunteers (estimate if necessary) 10803																								
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.																								
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 0.																									
Revenue	<table border="1"> <thead> <tr> <th></th> <th>Prior Year</th> <th>Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td>7,181,027.</td> <td>6,366,650.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td>1,295,274.</td> <td>425,941.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td>18,131,883.</td> <td>2,588,978.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td>2,053,559.</td> <td>1,200,008.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td>28,661,743.</td> <td>10,581,577.</td> </tr> </tbody> </table>			Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	7,181,027.	6,366,650.	9 Program service revenue (Part VIII, line 2g)	1,295,274.	425,941.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,131,883.	2,588,978.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,053,559.	1,200,008.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,661,743.	10,581,577.						
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Tax Return Filed Electronically		Do Not Sign Here		Date
	Signature of officer: MARVIN D. SMITH, CEO/SCOUT EXECUTIVE Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name JOHN BJORNGJELD CPA	Preparer's signature 	Date 7 8 2021	Check if self-employed <input type="checkbox"/>	PTIN P01080718
	Firm's name ▶ MELTON & MELTON, LLP			Firm's EIN ▶ 74-1550819	
	Firm's address ▶ 6002 ROGERDALE RD., SUITE 200 HOUSTON, TX 77072			Phone no. 281-759-1120	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III X

1 Briefly describe the organization's mission:
SEE SCHEDULE O STATEMENT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 9,582,591. including grants of \$ 11,893.) (Revenue \$ 686,431.)
TRADITIONAL SCOUTING - SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 114,150. including grants of \$ _____) (Revenue \$ 72,791.)
LEARNING FOR LIFE/EXPLORING PROGRAMS - SEE SCHEDULE O

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **9,696,741.**

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		48
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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SAM HOUSTON AREA COUNCIL**

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	181
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-file (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
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 to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	N/A
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	N/A
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	N/A
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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line 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 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 on Schedule O.	1a	64		
b Enter the number of voting members included on line 1a, above, who are independent	1b	64		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		X	
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		X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		X	
13 Did the organization have a written whistleblower policy?	13		X	
14 Did the organization have a written document retention and destruction policy?	14		X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
a The organization's CEO, Executive Director, or top management official	15a		X	
b Other officers or key employees of the organization	15b		X	
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?	16a			X
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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ▶
DOUG DAVIES - 713-756-3367
2225 N LOOP W, HOUSTON, TX 77008

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

Check if Schedule O contains a response or note to any line 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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS O. VARNELL CEO/SCOUT EXECUTIVE & SECRETARY	55.00	X		X			451,811.	0.	116,693.	
(2) DOUGLAS C. DAVIES, JR. CONTROLLER	55.00				X		203,693.	0.	39,664.	
(3) THOMAS FRANKLIN CHIEF OPERATING OFFICER	55.00				X		184,366.	0.	28,627.	
(4) DUSTIN DUPUIS DIRECTOR OF FIELD SERVICES	55.00				X		130,099.	0.	21,654.	
(5) BRANDON LEWIS DIRECTOR OF SUPPORT SERVIC	55.00				X		112,987.	0.	38,349.	
(6) TRAVIS BRINER DIRECTOR OF DEVELOPMENT	55.00				X		118,879.	0.	20,581.	
(7) MICHAEL BLAKE ASSISTANT DIRECTOR OF DEVELOPMENT	55.00				X		101,845.	0.	12,417.	
(8) CHIEF ART ACEVEDO DIRECTOR	0.50	X					0.	0.	0.	
(9) DANIEL G. BELLOW VICE CHAIR - RELATIONSHIPS	0.50	X		X			0.	0.	0.	
(10) FORREST J. BJERKAAS COUNCIL COMMISSIONER	20.00	X		X			0.	0.	0.	
(11) NELSON R. BLOCK LEGAL COUNSEL	5.00	X		X			0.	0.	0.	
(12) JERI J. BROOKS DIRECTOR	0.50	X					0.	0.	0.	
(13) ALLEN D. BROWN VICE CHAIR - FINANCE	6.00	X		X			0.	0.	0.	
(14) MICHELLE RILEY-BROWN DIRECTOR	0.50	X					0.	0.	0.	
(15) VICTOR BURK DIRECTOR	2.00	X					0.	0.	0.	
(16) CHARLES A. CALDERWOOD DIRECTOR	2.00	X					0.	0.	0.	
(17) DIANE M. CANNON VICE CHAIR - PROGRAM	2.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) WILLIAM H. CAUDILL DIRECTOR	2.00	X					0.	0.	0.	
(19) DANIEL J. CHURAY DIRECTOR	2.00	X					0.	0.	0.	
(20) RICHARD A. CLAUSSEN DIRECTOR	1.00	X					0.	0.	0.	
(21) CRAIG W. COLLINS DIRECTOR	1.00	X					0.	0.	0.	
(22) BRADLEY W. CORSON DIRECTOR	1.00	X					0.	0.	0.	
(23) DAVID E. CREASEY DIRECTOR	0.50	X					0.	0.	0.	
(24) CHARLES D. DAVIDSON DIRECTOR	0.75	X					0.	0.	0.	
(25) GEORGE A. DEMONTROND, III DIRECTOR	0.80	X					0.	0.	0.	
(26) TRACY L. DIETERICH DIRECTOR	1.00	X					0.	0.	0.	
1b Subtotal							1,303,680.	0.	277,985.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,303,680.	0.	277,985.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
W. T. BYLER 15203 LILLJA ROAD, HOUSTON, TX 77060	CONSTRUCTION SERVICES	5,539,518.
KINGHAM DALTON WILSON LTD, 5858 WESTHEIMER RD, SUITE 150, HOUSTON, TX 77057	CONSTRUCTION SERVICES	2,653,273.
QUALITY CUSTOM HOMES P.O. BOX 1381, COLDSRING, TX 77331	CONSTRUCTION SERVICES	2,291,296.
FORNEY CONSTRUCTION, 8945 LONG POINT, SUITE 200, HOUSTON, TX 77055	CONSTRUCTION SERVICES	738,258.
AD DISPLAY SIGN SYSTEMS INC 27255 KATY FREEWAY, KATY, TX 77494	CONSTRUCTION SERVICES	314,271.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOHN W. DUTCH DIRECTOR	0.50	X						0.	0.	0.
(28) RODNEY W. EADS DIRECTOR	2.50	X						0.	0.	0.
(29) JEFFREY B. EARLY DIRECTOR	0.50	X						0.	0.	0.
(30) RICHARD A. EICHLER DIRECTOR	0.50	X						0.	0.	0.
(31) BRIAN W. FOSTER VICE CHAIR - FIELD OPERATIONS	15.00	X		X				0.	0.	0.
(32) STEWART W. GAGNON DIRECTOR	2.00	X						0.	0.	0.
(33) ADRIAN GARCIA DIRECTOR	0.50	X						0.	0.	0.
(34) RAYMOND T. GARCIA DIRECTOR	0.50	X						0.	0.	0.
(35) DR. KIMBERLY H. GOSSETT DIRECTOR	0.25	X						0.	0.	0.
(36) L. BRADLEY HANCOCK DIRECTOR	0.50	X						0.	0.	0.
(37) MARGERY HARRIS DIRECTOR	0.50	X						0.	0.	0.
(38) SHAD A. HIGDON DIRECTOR	0.50	X						0.	0.	0.
(39) JUDGE DAVID HITTNER DIRECTOR	1.00	X						0.	0.	0.
(40) LIONEL R. JELLINS VICE CHAIR - SCOUTREACH & DIVERSITY	2.00	X		X				0.	0.	0.
(41) DAVID R. KLEIN DIRECTOR	2.00	X						0.	0.	0.
(42) MARC J. KREBS DIRECTOR	0.50	X						0.	0.	0.
(43) KENDRA LEE DIRECTOR	0.50	X						0.	0.	0.
(44) STEPHEN P. MACH DIRECTOR	0.25	X						0.	0.	0.
(45) T. FRANKLIN MYERS DIRECTOR	0.50	X						0.	0.	0.
(46) MIKE NARVAEZ DIRECTOR	0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) ADAM R. OGLESBY DIRECTOR	3.00	X						0.	0.	0.
(48) STEVEN D. OLDHAM TREASURER	2.00	X		X				0.	0.	0.
(49) DANIEL H. PEARS DIRECTOR	0.50	X						0.	0.	0.
(50) MARC G. PORTAL, PH.D. DIRECTOR	0.50	X						0.	0.	0.
(51) JEAN-FRANCOIS POUPEAU DIRECTOR	0.50	X						0.	0.	0.
(52) JAY R. PRYOR DIRECTOR	0.50	X						0.	0.	0.
(53) ERIN P. ROBERTS ASSISTANT TREASURER	1.00	X		X				0.	0.	0.
(54) DEBORAH A. ROLLINSON VICE CHAIR - MEMBERSHIP	15.00	X		X				0.	0.	0.
(55) ROBERT H. ROY, JR. DIRECTOR	4.00	X						0.	0.	0.
(56) L. ALLEN SANDERS DIRECTOR	0.50	X						0.	0.	0.
(57) ALBERTO SANTOS, JR. VICE CHAIR - REAL ESTATE	1.00	X		X				0.	0.	0.
(58) CHARLES E. SCHNEIDER VICE CHAIR - DEVELOPMENT	1.00	X		X				0.	0.	0.
(59) L. E. SIMMONS IMMEDIATE PAST CHAIR	1.50	X		X				0.	0.	0.
(60) STEPHEN D. STRAKE DIRECTOR	0.30	X						0.	0.	0.
(61) RICHARD E. TAUBER DIRECTOR	0.30	X						0.	0.	0.
(62) TRENT D. TELLEPSEN DIRECTOR	0.50	X						0.	0.	0.
(63) FRANK D. TSURU DIRECTOR	3.00	X						0.	0.	0.
(64) DAVID VAN KLEECK DIRECTOR	1.00	X						0.	0.	0.
(65) JOHN B. WALKER DIRECTOR	2.00	X						0.	0.	0.
(66) JUDSON B. WALKER DIRECTOR	0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	1,023,958.				
	b Membership dues	1b					
	c Fundraising events	1c	142,765.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,287,718.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	3,912,209.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 90,252.				
	h Total. Add lines 1a-1f			6,366,650.			
Program Service Revenue	2 a CAMPING INCOME	Business Code					
		900099	246,927.	246,927.			
	b ACTIVITIES INCOME	900099	179,014.	179,014.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			425,941.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,245,701.			3,245,701.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	33,912,583.			
			(ii) Other				
				34,569,306.			
				-656,723.			
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
d Net gain or (loss)			-656,723.		-656,723.		
8 a Gross income from fundraising events (not including \$ 142,765. of contributions reported on line 1c). See Part IV, line 18	8a		51,397.				
			79,677.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			-28,280.		-28,280.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		1,911,514.				
			1,016,507.				
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory			895,007.		895,007.		
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code					
		110000	333,281.	333,281.			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			333,281.				
12 Total revenue. See instructions			10,581,577.	759,222.	0.	3,455,705.	

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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).

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	11,893.	11,893.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,303,680.	1,149,063.	61,273.	93,344.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,885,460.	3,424,401.	182,850.	278,209.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	1,021,529.	896,311.	49,650.	75,568.
10 Payroll taxes	467,744.	410,904.	22,537.	34,303.
11 Fees for services (nonemployees):				
a Management				
b Legal	272,172.	189,813.	53,999.	28,360.
c Accounting	92,688.	64,641.	18,389.	9,658.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	15,575.			15,575.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	207,116.	155,233.	51,883.	
12 Advertising and promotion	108,993.	98,214.	4,273.	6,506.
13 Office expenses	408,279.	310,591.	3,985.	93,703.
14 Information technology				
15 Royalties				
16 Occupancy	836,072.	769,221.	26,507.	40,344.
17 Travel	150,833.	131,292.	5,315.	14,226.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,827.	17,272.	979.	1,576.
20 Interest				
21 Payments to affiliates	85,270.	85,270.		
22 Depreciation, depletion, and amortization	1,456,346.	1,408,791.	18,857.	28,698.
23 Insurance	273,676.	262,352.	4,490.	6,834.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSES	153,571.	138,383.	6,020.	9,168.
b EQUIPMENT RENT & MAINTENANCE	118,082.	104,720.	5,298.	8,064.
c RECOGNITION AWARDS	50,229.	35,620.	893.	13,716.
d PRINTING & PUBLICATIONS	44,138.	30,754.	732.	12,652.
e All other expenses	2,291.	2,002.	115.	174.
25 Total functional expenses. Add lines 1 through 24e	10,985,464.	9,696,741.	518,045.	770,678.
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 if following SOP 98-2 (ASC 958-720)

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year			(B) End of year	
Assets	1 Cash - non-interest-bearing	54,435.	1		20,337.	
	2 Savings and temporary cash investments	13,352,659.	2		14,895,194.	
	3 Pledges and grants receivable, net	6,638,171.	3		5,735,329.	
	4 Accounts receivable, net	478,325.	4		237,594.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7 Notes and loans receivable, net			7		
	8 Inventories for sale or use	33,865.	8		63,387.	
	9 Prepaid expenses and deferred charges	92,571.	9		209,675.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	92,994,136.	10a			
	b Less: accumulated depreciation	18,108,579.	10b			
	11 Investments - publicly traded securities	68,453,428.	10c		74,885,557.	
	12 Investments - other securities. See Part IV, line 11	89,559,207.	11		83,082,708.	
	13 Investments - program-related. See Part IV, line 11	462,856.	12		84,292.	
	14 Intangible assets		13			
	15 Other assets. See Part IV, line 11	1,431,760.	14			
16 Total assets. Add lines 1 through 15 (must equal line 33)	180,557,277.	15		1,445,774.		
		16		180,659,847.		
Liabilities	17 Accounts payable and accrued expenses	7,074,179.	17		767,970.	
	18 Grants payable		18			
	19 Deferred revenue	175,974.	19		149,686.	
	20 Tax-exempt bond liabilities		20			
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21			
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22			
	23 Secured mortgages and notes payable to unrelated third parties		23			
	24 Unsecured notes and loans payable to unrelated third parties		24			
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,514,795.	25		1,934,775.	
	26 Total liabilities. Add lines 17 through 25	9,764,948.	26		2,852,431.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27 Net assets without donor restrictions	87,186,542.	27		89,413,265.	
	28 Net assets with donor restrictions	83,605,787.	28		88,394,151.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29 Capital stock or trust principal, or current funds		29			
	30 Paid-in or capital surplus, or land, building, or equipment fund		30			
	31 Retained earnings, endowment, accumulated income, or other funds		31			
	32 Total net assets or fund balances	170,792,329.	32		177,807,416.	
33 Total liabilities and net assets/fund balances	180,557,277.	33		180,659,847.		

Form **990** (2020)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,581,577.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,985,464.
3	Revenue less expenses. Subtract line 2 from line 1	3	-403,887.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	170,792,329.
5	Net unrealized gains (losses) on investments	5	7,418,974.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	177,807,416.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form **990** (2020)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9172503.	10568993.	8138683.	7181027.	6366650.	41427856.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9172503.	10568993.	8138683.	7181027.	6366650.	41427856.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						41427856.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	9172503.	10568993.	8138683.	7181027.	6366650.	41427856.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1172398.	1587797.	2372780.	2350770.	3245701.	10729446.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1304155.	634,944.	650,863.	669,691.	333,281.	3592934.
11 Total support. Add lines 7 through 10						55750236.
12 Gross receipts from related activities, etc. (see instructions)					12	14,321,732.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).....	14	74.31 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	78.62 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described in line 11a above?		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		Yes	No
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
2a			
2b			
3a			
3b			

BOY SCOUTS OF AMERICA

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

BOY SCOUTS OF AMERICA

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

Multiple horizontal lines for providing supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

Employer identification number

76-0239833

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HARRY E. BOVAY, JR. FOUNDATION 1801 SMITH STREET SUITE 300 HOUSTON, TX 77002-8084	\$ 480,187.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	FRANK TSURU 11 HEDWIG CIR HOUSTON, TX 77024	\$ 151,018.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	SMALL BUSINESS ADMINISTRATION 409 3RD ST, SW WASHINGTON, DC 20416	\$ 1,287,718.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	UNITED WAY OF GREATER HOUSTON P.O. BOX 3247 HOUSTON, TX 77253-3247	\$ 981,384.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CONTRIBUTIONS LESS THAN 2% OF LINE 1(H) P.O. BOX 924528 HOUSTON, TX 77292-4528	\$ 3,376,091.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	MISC NONCASH CONTR < 2% OF LN 1(H) P.O. BOX 924528 HOUSTON, TX 77292-4528	\$ 90,252.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	MISC NONCASH CONTR < 2% OF LN 1(H) _____ _____ _____	\$ 90,252.	12/31/20
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **BOY SCOUTS OF AMERICA**
SAM HOUSTON AREA COUNCIL **Employer identification number**
76-0239833

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- | | |
|---|--|
| a <input type="checkbox"/> Public exhibition | d <input type="checkbox"/> Loan or exchange program |
| b <input type="checkbox"/> Scholarly research | e <input type="checkbox"/> Other _____ |
| c <input type="checkbox"/> Preservation for future generations | |
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	82,435,022.	75,428,579.	79,802,990.	76,292,864.	74,918,958.
b Contributions	725,740.	1,339,497.	1,504,609.	1,656,666.	1,902,571.
c Net investment earnings, gains, and losses	9,930,435.	9,393,377.	-2,204,271.	5,146,761.	2,668,162.
d Grants or scholarships					
e Other expenditures for facilities and programs	4,207,636.	3,252,802.	3,207,688.	2,874,722.	2,790,510.
f Administrative expenses	612,660.	473,629.	467,061.	418,579.	406,317.
g End of year balance	88,270,901.	82,435,022.	75,428,579.	79,802,990.	76,292,864.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 16.7300 %
- b** Permanent endowment 83.2700 %
- c** Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|-------------------------------------|
| (i) Unrelated organizations | | <input checked="" type="checkbox"/> |
| (ii) Related organizations | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		13,982,582.		13,982,582.
b Buildings		39,277,760.	9,485,679.	29,792,081.
c Leasehold improvements		8,957,292.	2,977,459.	5,979,833.
d Equipment		1,246,128.	997,736.	248,392.
e Other		29,530,374.	4,647,705.	24,882,669.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				74,885,557.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CUSTODIAN ACCOUNTS	1,934,775.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,934,775.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	18,000,551.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	7,418,974.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	7,418,974.
3	Subtract line 2e from line 1	3	10,581,577.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	10,581,577.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	10,985,464.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	10,985,464.
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	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	10,985,464.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

USE OF ENDOWMENT FUNDS

PERMANENT ENDOWMENT FUNDS ARE DIVIDED USE FUNDS WITH THE PRINCIPLE USED ONLY FOR THE EARNING OF INCOME. SUCH INCOME IS USED TO SUPPORT ASSORTED PROGRAMS AND GENERAL OPERATIONS.

TERM ENDOWMENT FUNDS ARE DIVIDED USE FUNDS WITH THE PRINCIPLE RESTRICTED FOR INCOME EARNING AND PERMANENT IMPROVEMENTS AT CAMP STRAKE, THE INCOME FROM TERM ENDOWMENT FUNDS IS USED FOR OPERATIONS AT CAMP STRAKE.

ALL OTHER ENDOWMENT FUNDS ARE USED TO SUPPORT GENERAL PROGRAM SERVICES AND

Part XIII Supplemental Information (continued)

TO INVEST FOR SUPPORT OF FUTURE GENERAL PROGRAM SERVICES.

PART X, LINE 2:

FIN 48 DISCLOSURE

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC"), EXCEPT ON NET INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES. THE ORGANIZATION IS CLASSIFIED AS A PUBLIC CHARITY AND CURRENTLY HAS NO UNRELATED BUSINESS INCOME. THE ORGANIZATION IS ALSO EXEMPT FROM STATE INCOME TAX. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED.

THE ORGANIZATION ASSESSES WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION OF THE TECHNICAL MERITS OF THE POSITION, ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION. IF THE TAX POSITION DOES NOT MEET THE MORE LIKELY THAN NOT RECOGNITION THRESHOLD, THE BENEFIT OF THE TAX POSITION IS NOT RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS. THE ORGANIZATION RECORDED NO ASSETS OR LIABILITIES FOR UNCERTAIN TAX POSITIONS OR UNRECOGNIZED TAX BENEFITS. WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO U.S. FEDERAL OR STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2017.

BOY SCOUTS OF AMERICA

Schedule G (Form 990 or 990-EZ) 2020

SAM HOUSTON AREA COUNCIL

76-0239833 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SPORTING CLAYS (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	194,162.			194,162.
	2 Less: Contributions	142,765.			142,765.
	3 Gross income (line 1 minus line 2)	51,397.			51,397.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	19,730.			19,730.
	7 Food and beverages	2,632.			2,632.
	8 Entertainment	345.			345.
	9 Other direct expenses	56,970.			56,970.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				79,677.
11 Net income summary. Subtract line 10 from line 3, column (d)				-28,280.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Revenue	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

BOY SCOUTS OF AMERICA

Schedule G (Form 990 or 990-EZ) 2020 SAM HOUSTON AREA COUNCIL

76-0239833 Page 3

- 11 Does the organization conduct 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 formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility		13a	%
b 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 ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

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 retain the state gaming license? Yes No
- 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 ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: MARCIA FELDMAN & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 41 TIEL WAY, HOUSTON, TX 77019

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

**Employer identification number
76-0239833**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 3** Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) 2020

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MEMBERSHIP, CAMPSHIP, AND VARIOUS UNIFORM FEES - VARIOUS	221	11,345.	547.	FAIR MARKET VALUE	FREE CAMPSHIP, BOOKS, FOOD, UNIFORMS & TRANSPORTATION

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART III, COLUMN (B)

GRANTS ARE PROVIDED TO COVER THE COST OF THE \$24 MEMBERSHIP, CAMPSHIP, AND UNIFORMS FEES FOR APPROXIMATELY 221 YOUTH THE YEAR. THERE ARE NO ELIGIBILITY OR INCOME REQUIREMENTS FOR THESE FUNDS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization **BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL** Employer identification number **76-0239833**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2020

**BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL**

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) THOMAS O. VARNELL CEO/SCOUT EXECUTIVE & SECRETARY	(i)	384,727.	50,000.	17,084.	102,038.	14,655.	568,504.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DOUGLAS C. DAVIES, JR. CONTROLLER	(i)	190,899.	12,000.	794.	24,509.	15,155.	243,357.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) THOMAS FRANKLIN CHIEF OPERATING OFFICER	(i)	171,833.	12,000.	533.	19,373.	9,254.	212,993.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DUSTIN DUPUIS DIRECTOR OF FIELD SERVICES	(i)	117,125.	12,000.	974.	13,032.	8,622.	151,753.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BRANDON LEWIS DIRECTOR OF SUPPORT SERVIC	(i)	100,067.	12,000.	920.	27,284.	11,065.	151,336.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3

THE BOARD OF DIRECTORS OF SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA HAS A COMPENSATION AND BENEFITS COMMITTEE TO DISCHARGE ITS RESPONSIBILITIES WITH RESPECT TO COMPENSATION OF THE CEO/SCOUT EXECUTIVE AND OTHER EMPLOYEES OF THE COUNCIL.

THE COMPENSATION AND BENEFITS COMMITTEE IS COMPRISED OF AT LEAST THREE DIRECTORS, INCLUDING THE CHAIRMAN OF THE BOARD WHO SERVES AS CHAIRMAN OF THE COMMITTEE AND ONLY MEMBERS OF THE BOARD DETERMINED TO BE "INDEPENDENT" SERVE ON THE COMMITTEE.

IN CARRYING OUT ITS PURPOSE, THE COMPENSATION AND BENEFITS COMMITTEE ANNUALLY REVIEWS AND USES THE BOY SCOUTS OF AMERICA'S COMPENSATION PROGRAM TO ASSURE AN INTERNALLY CONSISTENT AND EXTERNALLY COMPETITIVE COMPENSATION PROGRAM IN ORDER TO ATTRACT, RETAIN AND MOTIVATE QUALIFIED EXECUTIVE MANAGEMENT AND OTHER KEY EMPLOYEES AND PROVIDE INCENTIVE FOR THE ATTAINMENT OF THE COUNCIL'S STRATEGIC GOALS AND OBJECTIVES. THE BOY SCOUTS OF AMERICA'S COMPENSATION PROGRAM HAS BEEN REVIEWED BY GRANT THORNTON AND GRANT THORNTON PREPARED A REPORT DATED OCTOBER 7, 2016,

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

THAT STATED THE TOTAL COMPENSATION PROGRAM AND POLICIES DEVELOPED BY THE BSA NATIONAL COUNCIL FOR LOCAL COUNCIL SCOUT EXECUTIVES (BOTH IN AGGREGATE AND BY COMPONENT) ARE CONSISTENT WITH MARKET PRACTICE.

PART II, COLUMN (B) (III)

THE BOY SCOUTS OF AMERICA, A SEPARATE ENTITY, MAINTAINS A BENEFIT RESTORATION PLAN WHICH IS A NON-QUALIFIED DEFERRED COMPENSATION PLAN FOR KEY EXECUTIVES. IN 2020, THE CONTRIBUTION TO THE BENEFIT RESTORATION PLAN BY THE BOY SCOUTS OF AMERICA AND REPORTABLE AS OTHER COMPENSATION FOR THOMAS O. VARNELL, CEO/SCOUT EXECUTIVE, WAS \$0. OTHER REPORTABLE COMPENSATION FOR THOMAS O. VARNELL, CEO/SCOUT EXECUTIVE, INCLUDES \$10,165 AND \$6,919 IN TAXABLE VALUE OF GROUP TERM LIFE INSURANCE BENEFITS AND TAXABLE VALUE OF PERSONAL USE OF AUTOMOBILE, RESPECTIVELY.

PART II, COLUMN (C)

FOR EACH EMPLOYEE LISTED, THIS COLUMN INCLUDES THE INCREASE IN THE ACTUARIAL VALUE OF THE BENEFIT ACCRUAL IN THE BOY SCOUTS OF AMERICA RETIREMENT PLAN AS CALCULATED BY THE BOY SCOUTS OF AMERICA, A SEPARATE

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

ENTITY, BUT REQUIRED TO BE REPORTED BY THE SAM HOUSTON AREA COUNCIL ON
 ITS FORM 990. THE INCREASE IN THE ACTUARIAL VALUE OF THE BENEFIT
 ACCRUAL REPORTED IN PART II, COLUMN (C) WHICH IS REPORTABLE
 COMPENSATION FOR THOMAS O. VARNELL, CEO/SCOUT EXECUTIVE, WAS \$93,488.
 EMPLOYER MATCHING CONTRIBUTIONS TO THE SAM HOUSTON AREA COUNCIL 403(B)
 THRIFT PLAN ARE ALSO INCLUDED IN THIS COLUMN.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **BOY SCOUTS OF AMERICA
SAM HOUSTON AREA COUNCIL** Employer identification number **76-0239833**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	4	5,265.	ACTUAL SALES PRICE
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	2,528.	HI-LOW VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial	X	2	52,711.	FAIR MARKET VALUE
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (SUPPLIES)	X	59	29,748.	ACTUAL COST
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2020

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization	BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number	76-0239833
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MISSION OF THE BOY SCOUTS OF AMERICA IS TO PREPARE YOUNG PEOPLE TO
MAKE ETHICAL CHOICES OVER THEIR LIFETIMES BY INSTILLING IN THEM THE
VALUES OF THE SCOUT OATH AND LAW.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE CORPORATION SHALL PROMOTE, WITHIN THE TERRITORY COVERED BY THE
CHARTER FROM TIME TO TIME GRANTED IT BY THE BOY SCOUTS OF AMERICA AND
IN ACCORDANCE WITH THE CONGRESSIONAL CHARTER, BYLAWS, POLICIES AND
REGULATIONS OF THE BOY SCOUTS OF AMERICA, THE SCOUT PROGRAM OF
PROMOTING THE ABILITY OF BOYS AND YOUNG MEN AND WOMEN TO DO THINGS FOR
THEMSELVES AND OTHERS, TRAINING THEM IN SCOUTCRAFT, AND TEACHING THEM
PATRIOTISM, COURAGE, SELF-RELIANCE, AND KINDRED VIRTUES, USING THE
METHODS WHICH ARE NOW IN COMMON USE BY THE BOY SCOUTS OF AMERICA.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE SCOUTING PROGRAM IS COMPRISED OF THE FOLLOWING:

LION SCOUTS - A FUN INTRODUCTION TO THE SCOUTING PROGRAM FOR
KINDERGARTEN-AGE YOUTH EAGER TO GET GOING! LIONS DO ADVENTURES WITH
THEIR ADULT PARTNERS AND OTHER LIONS EVERY MONTH. THIS PROGRAM
INTRODUCES YOUTH AND THEIR FAMILIES TO SCOUTING AND THE OUTDOORS AS IT
BUILDS A FOUNDATION OF CHARACTER. A LION DEN IS PART OF THE CUB SCOUT
PACK.

Name of the organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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TIGER SCOUTS - ONE-YEAR, FAMILY-ORIENTED PROGRAM FOR A GROUP OF TEAMS, EACH CONSISTING OF A FIRST-GRADE (OR 7-YEAR-OLD) BOY OR GIRL AND AN ADULT PARTNER (USUALLY A PARENT). A TIGER DEN IS PART OF THE CUB SCOUT PACK.

CUB SCOUTING - FAMILY- AND COMMUNITY-CENTERED APPROACH TO LEARNING CITIZENSHIP, COMPASSION, AND COURAGE THROUGH SERVICE PROJECTS, CEREMONIES, GAMES, AND OTHER ACTIVITIES PROMOTING CHARACTER DEVELOPMENT AND PHYSICAL FITNESS.

SCOUTS BSA (FORMERLY NAMED BOY SCOUTS) - WITH THE SCOUT OATH AND SCOUT LAW AS GUIDES, AND THE SUPPORT OF PARENTS AND RELIGIOUS AND NEIGHBORHOOD ORGANIZATIONS, SCOUTS DEVELOP AN AWARENESS AND APPRECIATION OF THEIR ROLE IN THEIR COMMUNITY AND BECOME WELL-ROUNDED YOUNG MEN AND WOMEN THROUGH THE ADVANCEMENT OF THE PROGRAM. SCOUTS PROGRESS IN RANK THROUGH ACHIEVEMENTS, GAIN ADDITIONAL KNOWLEDGE AND RESPONSIBILITIES, AND EARN MERIT BADGES THAT INTRODUCE A LIFELONG HOBBY OR A REWARDING CAREER.

VENTURING - PROVIDES EXPERIENCES TO HELP YOUNG MEN AND WOMEN, AGES 13 OR 14 WITH COMPLETION OF THE EIGHTH GRADE THROUGH AGE 20, BECOME MATURE, RESPONSIBLE, CARING ADULTS. YOUNG PEOPLE LEARN LEADERSHIP SKILLS AND PARTICIPATE IN CHALLENGING OUTDOOR ACTIVITIES, INCLUDING HAVING ACCESS TO BOY SCOUT CAMPING PROPERTIES, A RECOGNITION PROGRAM, AND YOUTH PROTECTION TRAINING.

STARTING IN 2018, FAMILIES CAN CHOOSE TO SIGN UP THEIR SONS AND

Name of the organization	BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number	76-0239833
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DAUGHTERS WHO ARE AGES 5-10 FOR CUB SCOUTS. CHARTERED ORGANIZATIONS MAY CHOOSE TO ESTABLISH A NEW GIRL PACK, ESTABLISH A PACK THAT CONSISTS OF GIRL DENS AND BOY DENS OR REMAIN AN ALL-BOY PACK. CUB SCOUT DENS WILL BE SINGLE GENDER - ALL BOYS OR ALL GIRLS. USING THE SAME CURRICULUM AS THE BOY SCOUTING PROGRAM, SCOUTS BSA LAUNCHED IN FEBRUARY 2019, ENABLING ALL ELIGIBLE YOUTH AGES 11-17, TO EARN THE EAGLE SCOUT RANK. SCOUTS BSA IS A SINGLE GENDER - ALL-GIRL TROOPS OR ALL-BOY TROOPS. THIS UNIQUE APPROACH ALLOWS THE ORGANIZATION TO MAINTAIN THE INTEGRITY OF THE SINGLE-GENDER MODEL WHILE ALSO MEETING THE NEEDS OF TODAY'S FAMILIES.

THE SAM HOUSTON AREA COUNCIL SERVED 23,662 REGISTERED YOUTH IN THE TRADITIONAL SCOUTING PROGRAMS. IT IS ESTIMATED THAT 36% OF THESE YOUTH ARE CONSIDERED "AT RISK."

THE SAM HOUSTON AREA COUNCIL IS COMMITTED TO ENSURING THAT ALL YOUNG PEOPLE HAVE AN OPPORTUNITY TO JOIN SCOUTING, REGARDLESS OF THEIR CIRCUMSTANCES, NEIGHBORHOOD, OR ETHNIC BACKGROUND. OUR SCOUTREACH INITIATIVE GIVES SPECIAL LEADERSHIP AND EMPHASIS TO ECONOMICALLY CHALLENGED YOUTH VIA NON-TRADITIONAL METHODS. THROUGH CARING, WELL-TRAINED, PAID LEADERSHIP AND WITH NEIGHBORHOOD PARTNERS WHO WILL PROVIDE A SAFE, REGULAR MEETING PLACE, SCOUTREACH DELIVERS A SCOUTING PROGRAM TO OUR MOST NEEDY YOUTH IN HOUSTON'S INNER-CITY NEIGHBORHOODS AND ENCOURAGES PARENTAL INVOLVEMENT, BUT IS FULLY SUBSIDIZED BY THE COUNCIL'S ANNUAL OPERATING BUDGET. IN 2020, THIS AMOUNTED TO \$729,859.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

Name of the organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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EXPLORING IS A WORKSITE-BASED PROGRAM. IT IS PART OF LEARNING FOR LIFE'S CAREER EDUCATION PROGRAM ALSO FOR YOUNG MEN AND WOMEN WHO ARE 14 (AND HAVE COMPLETED THE EIGHTH GRADE) THROUGH 20 YEARS OLD.

EXPLORING'S PURPOSE IS TO PROVIDE EXPERIENCES THAT HELP YOUNG PEOPLE MATURE AND TO PREPARE THEM TO BECOME RESPONSIBLE AND CARING ADULTS.

EXPLORERS ARE READY TO INVESTIGATE THE MEANING OF INTERDEPENDENCE IN THEIR PERSONAL RELATIONSHIPS AND COMMUNITIES. EXPLORING IS BASED ON A UNIQUE AND DYNAMIC RELATIONSHIP BETWEEN YOUTH AND THE ORGANIZATIONS IN THEIR COMMUNITIES. LOCAL COMMUNITY ORGANIZATIONS INITIATE A SPECIFIC EXPLORER POST BY MATCHING THEIR PEOPLE AND PROGRAM RESOURCES TO THE INTERESTS OF YOUNG PEOPLE IN THE COMMUNITY. THE RESULT IS A PROGRAM OF ACTIVITIES THAT HELPS YOUTH PURSUE THEIR SPECIAL INTERESTS, GROW, AND DEVELOP. EXPLORING PROGRAMS ARE BASED ON FIVE AREAS OF EMPHASIS: CAREER OPPORTUNITIES, LIFE SKILLS, CITIZENSHIP, CHARACTER EDUCATION, AND LEADERSHIP EXPERIENCE. IN 2020, THE SAM HOUSTON AREA COUNCIL HAD 593 YOUTH IN 45 EXPLORING POSTS PARTICIPATING IN THE EXPLORING PROGRAM.

IN 2020, SCOUTING SHOWED ITS RESILIENCE IN SOUTHEAST TEXAS. NAVIGATING THROUGH A GLOBAL PANDEMIC THAT AFFECTED OUR LOCAL AREA, STATE, NATION, AND WORLD, THE BENEFITS OF SCOUTING WERE STILL PRESENT AND EFFECTIVE TO OUR AREA'S YOUTH. THE PROGRAMS OF SCOUTING CONTINUE TO OFFER VARIED OPPORTUNITIES TO TEACH YOUTH TO BE STRONG IN CHARACTER, HAVE SELF-CONFIDENCE, AND GROW IN THEIR LEADERSHIP ABILITIES.

THE SAM HOUSTON AREA COUNCIL ALSO ACCOMPLISHED THE FOLLOWING DURING 2020:

* 24,735 TOTAL YOUTH SERVED

Name of the organization BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number 76-0239833
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- * 10,803 REGISTERED ADULT VOLUNTEER LEADERS
- * 753 CUB SCOUT PACKS, SCOUTS BSA TROOPS, AND VENTURING CREWS
- * CUB SCOUTS PARTICIPATED IN A CAMPING EXPERIENCE
- * SCOUTS BSA MEMBERS AND VENTURERS PARTICIPATED IN A LONG-TERM CAMPING OR HIGH ADVENTURE EXPERIENCE
- * 9,924 CUB SCOUT RANKS EARNED
- * 5,902 SCOUTS BSA MEMBERS RANKS EARNED
- * 908 SCOUTS BSA MEMBERS ATTAINED RANK OF EAGLE SCOUT
- * 345,181 ESTIMATED COMMUNITY SERVICE HOURS PROVIDED
- * ACHIEVED GOLD LEVEL STATUS IN THE BSA NATIONAL JOURNEY TO EXCELLENCE PROGRAM

AS A KEY MEASURE OF OUR COMMUNITY SERVICE AND FINANCIAL HEALTH, THE SAM HOUSTON AREA COUNCIL WAS AWARDED THE DESIGNATION AS AN ACCREDITED CHARITY BY THE BETTER BUSINESS BUREAU, EARNED THE SEAL OF TRANSPARENCY GOLD LEVEL BY GUIDESTAR, AND ACHIEVED A 4-STAR RATING BY CHARITY NAVIGATOR, THE HIGHEST POSSIBLE RATING FOR THE 8TH CONSECUTIVE YEAR.

FORM 990, PART VI, SECTION B, LINE 11B:

A DRAFT OF FORM 990 AND ALL RELATED SCHEDULES IS INITIALLY PRESENTED TO THE AUDIT COMMITTEE FOR THEIR REVIEW WHERE VARIOUS ASPECTS OF THE FORM ARE EXPLAINED AND DISCUSSED IN DETAIL. ANY PROPOSED CHANGES BY THE AUDIT COMMITTEE ARE INCLUDED IN FINAL DRAFT WHICH IS PRESENTED TO THE GOVERNING BOARD FOR THEIR REVIEW AND COMMENTS WHICH ARE THEN SUMMARIZED AND FORWARDED TO THE AUDIT COMMITTEE FOR PROPOSED INCLUSION IN THE FILING COPY. THE AUDIT COMMITTEE APPROVES THE FINAL COPY OF THE FORM 990 BEFORE IT IS FILED WITH THE IRS.

Name of the organization	BOY SCOUTS OF AMERICA SAM HOUSTON AREA COUNCIL	Employer identification number	76-0239833
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FORM 990, PART VI, SECTION B, LINE 12C:

THE GOVERNANCE BOARD MAINTAINS A CONFLICT OF INTEREST POLICY TO PREVENT INSTITUTIONAL OR PERSONAL INTERESTS OF BOARD MEMBERS, OFFICERS, AND STAFF OF SAM HOUSTON AREA COUNCIL (THE "COUNCIL") FROM INTERFERING IN THE PERFORMANCE OF THEIR DUTIES AND TO SEE THAT THERE IS NO PERSONAL, PROFESSIONAL, OR POLITICAL GAIN AT THE EXPENSE OF THE COUNCIL. THE POLICY REQUIRES DISCLOSURE OF ANY CONFLICTS OF INTEREST AND THE RECUSAL OF ANY INTERESTED PARTY IN A RELATED DECISION. A YEARLY CONFLICT OF INTEREST QUESTIONNAIRE IS REQUESTED TO BE FILLED OUT AND RETURNED BY EACH PARTY COVERED BY THIS POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS OF SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA (THE "COUNCIL") HAS CREATED A COMPENSATION AND BENEFITS COMMITTEE CONSISTING OF AT LEAST THREE INDEPENDENT DIRECTORS INCLUDING THE CHAIRMAN OF THE BOARD. THE COMMITTEE REVIEWS AND USES THE BOY SCOUTS OF AMERICA'S COMPENSATION PROGRAM TO ASSURE AN INTERNALLY CONSISTENT AND EXTERNALLY COMPETITIVE COMPENSATION PROGRAM TO ATTRACT, RETAIN, AND MOTIVATE QUALIFIED EXECUTIVE MANAGEMENT AND OTHER KEY EMPLOYEES AND PROVIDE INCENTIVE FOR THE ATTAINMENT OF THE COUNCIL'S STRATEGIC GOALS AND OBJECTIVES.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOLLOWING DOCUMENTS ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST: ALL DOCUMENTS AS REQUIRED BY FEDERAL, STATE, AND LOCAL LAWS INCLUDING, BUT NOT LIMITED TO, IRS FORM 990 AND, IF APPLICABLE, IRS FORM 990-T, THE ANNUAL REPORT, AUDITED FINANCIAL STATEMENTS, AND THE CONFLICT OF INTEREST POLICY.

