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SCHEDULE G (Form 990 or 990-EZ)

## Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complète if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,

Informal Revenue Service	if the organization entered more tha  ► Attach to Form 990 or Form 990-5	n \$15,	000 or	r Form 990-EZ, line	6a.		nspection
Name of the organization	Attach to Form 990 G Tolin 990 L		<u> </u>	-parate manucuons	E		ntification number
<del>-</del>	al Testing Service	,			- 1	L-0534479	
Part 1 Fundraising Activities required to complete this p	S. Complete if the organization answers	ered "Y	'es" to	Form 990, Part IV, I	ine 17. F	orm 990-EZ	filers are not
<del></del>	alsed funds through any of the followi	no acto	vitios	Check all that apply			
Mail solicitations	·	_		overnment grants	•		
b Internet and email solicitation				nment grants			
c Phone solicitations	g Special						·
d h-person solicitations			•				
2 a Did the organization have a writte	n or oral agreement with any individua	l (inclu	ding o	fficers, directors, tru	stees or		· · · · · · · · · · · · · · · · · · ·
	, Part VII) or entity in connection with p			-		Yes	
b If "Yes," list the ten highest paid in compensated at least \$5,000 by the	ndividuals or entities (fundraisers) purs he organization.	ivant t	gåle,	ements under which	the fun	draiser is to	pa
		CHIT	Did		(v) An	ount paid	44) 6
(i) Name and address of Individual	(ii) Activity	have c	Did asser ustody	(Iv) Gross receipts from activity	to (or retained by) fundraiser listed in col (i)	etained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)		contrib	itrol of ulicins?			organization	
		Yes	No	,			
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	JUL 17 2014					·	
	IRS OGDEN, UT	AH					
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<del></del>	<del></del>	<del>-   </del>	<b>-</b>	<del></del>	· ·	<del></del>	<del></del>
Total	*** <u></u> <u></u> . <u></u>	· · · · · · ·	. 🕨	·			
<ol> <li>List all states in which the organize or licensing.</li> </ol>	ation is registered or licensed to solicit	contri	oution	s or has been notifie	dit is ex	empt from r	egistration
***					<u> </u>		·
				<del></del>			<del></del>
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LHA Paperwork Reduction Act Notice	ce, see the Instructions for Form 990	or 99	3-EZ.		Sci	redule G (Far	m 990 or 990-EZ) 2012

Sche	dul	e G (Form 980 or 990-EZ) 2012 Educátional				34479 Page 2
Pa	rt)					
		of fundraising event contributions and gro	oss income on Form 990	EZ, lines 1 and 6b. List e	verits with gross receip	its greater than \$5,000.
		,	, (a) Event #1	(b) Event#2	(c) Other events	(d) Total events
			ETS.Cares	ETS Cares	None	''
		,	Campaign-Car Show	Campaign-Trenton T	0	(add col. (a) through
		· ·	(event type)	(event typé)	(total number)	col. (c))
9			(402.11.19)	()	(10121.1701.10217	<del></del>
Reverine		,		6 777		12 650
毫	1	Gross receipts	6,142.	6,517.		12,659.
- 1			_	1 _ 1		
- 1	2	Less: Contributions	0.	. 0.	<u> </u>	
ļ						
اب	3	Gross income (line 1 minus line 2)	6,142.	6,517.	<del></del>	12,659.
	4	Cash prizes			<b>.</b>	
						,
	5	Noncash prizes	1			
8		7, 12. (2			<u> </u>	
č	6	Rent/facility costs	1			}
Š	ŭ			<del>                _  </del>	**	
Direct Expenses	7	Mandahal havenan				
Ę,	7	Food and beverages		<del> </del>	<u> </u>	<del></del>
٥	_	<b>1</b>			•	
	_	Entertainment		<del> </del>	<del>-,                                    </del>	2 (25
	ð	Other direct expenses		3,675.		3,675.
		Direct expense summary. Add lines 4 through		***************************************		3,675)
	11	Net income summary, Combine line 3, colum	n (d), and line 10,	· ****** ***** ***********************	Commission of the Commission o	8,984.
Pa	irt I	III Gaming. Complete If the organization	answered "Yes" to Form	n 990, Part IV, line 19, or r	ebouted wore theu	
		\$15,000 on Form 990-EZ, line 6a.				
Q			(a) Bingo (b) Pull tabs/instant		(c) Other garning	(d) Total gaming (add
둜			(5) 0.11.90	bingo/progressive bingo	(a) other garting	col. (a) through col. (c))
Revenue					,	
Œ	1	Gross revenue				
						, ,
	2	Cash prizes	,			
S	-				,	<del></del>
96.	2	Noncash prizes				1
Direct Expenses	٦	restrocor prices	<del></del>	<del> </del>	<del> </del>	
泵		55 - 4 K - 374			,	
ă	4	Rent/facility costs		<del></del>		<del></del>
	_	<b></b>		1 .		
	5	Other direct expenses	<u> </u>	<del></del>	1	
	١.	<b>.</b>	Yes%	I — — I	Yes%	[m] 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	6	Voluntéer labor	L No	No	L No	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		,				
	7	Direct expense summary. Add lines 2 throug	n 5 in ćolumn (d)	••• •••••• • • • • • • • • • • • • • • •	>	( )
	8	Net gaming income summary. Combine line	1, column d, and line 7	3/33-2013113113111111111111111111111111111		1
9	En	nter the state(s) in which the organization open	ates gaming activities:			
		the organization licensed to operate gaming a		states?		Yes No
		"No," explain:				
•		Tro, explain.	<del>,</del>		<del></del>	
	_			***************************************	<del></del>	<del></del>
<b>.</b> -				A CONTRACTOR OF THE CONTRACTOR		T Tuest Test
		ere any of the organization's gaming licenses	revoked, suspended or t	erminated during the tax	year? ,. ,	Yes No
k	) If	"Yes," explain:				
	_	<u> </u>			<del></del>	<del> </del>
•	_				<del></del>	<del></del>
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Sch	edula G (Form 990 or 990-EZ) 2012 Educational Testing Service	21-0634479	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	L 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 operated in:	1	
	The organization's facility	13a	%
ь	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	rds:	-
	Name ►	<u> </u>	
	Address > ,		
159	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount	ount	
	of gaming revenue retained by the third party > \$		
č	If "Yes," enter name and address of the third party:		
		,	•
•	Name ►	·	<del></del>
	Address >	~~~~	
16	Gaming manager information:		
	Name >		
	Gaming manager compensation > \$		
	——————————————————————————————————————		
	Description of services provided 🕨		
		···	
	☐ Director/officer ☐ Employee ☐ Independent contractor		
	CO discondines Composes Contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the garning proceeds to		
	retain the state gaming license?	Yes	□ No
ŧ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I. line 2b, col		
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional in	formation (see instru	ctions).
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