

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# **SCANNET JUN 2 6 2013**

Form **990-EZ** Department of the Treasury

Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

OMB No 1545-1150

Open to Public Inspection

Α	For th	e 2012 calendar year, o	r tax year beginning			and end	ing	_				
В	Check is applicate	C Name of organ	ization					D Empl	loyer ic	dentification numbe	Г	
	Addi	Address change MT. BETHEL ELEMENTARY SCHOOL										
	Nam	· · · · · · · · · · · · · · · · · · ·					58	58-2141784				
	Initia							E Tele	Telephone number			
	Term							77	770-578-7248			
								F Grou	Group Exemption			
一	<del>-</del>								Number >			
G		nting Method: X Cash						H Ched	H Check X if the organization is no			
		te: WWW.MBESF	ORG					i		attach Schedule B		
				)◀(insert no.)	49	947(a)(1) o	r 527			, 990-EZ, or 990-PF)	ı_	
	J Tax-exempt status (check only one) — X 501(c)(3) 501(c) ( ) ◀(insert no.) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF).  K Check In the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more the											
			90 return is not required though Form !	-		_	-					
		n, be sure to file a complete r		(c p )	,					<b>6</b>		
		•	o determine gross receipts. If gross rec	eints are \$200,000 d	r more	e. or if total	assets (Part	11.				
			0,000 or more, file Form 990 instead of			.,		,	<b>S</b>	137,	793.	
$\overline{}$	art I	Revenue, Expens	ses, and Changes in Net A	ssets or Fund	l Bal	ances (s	ee the instru	ictions f			<u></u>	
		_	used Schedule O to respond to any que			,				,	$\mathbf{x}$	
-	1		and similar amounts received						1	133,		
	2	Program service revenue including government fees and contracts					2					
3	3	Membership dues and asse						Ť	3			
a	4	Investment income		SE	E S	CHEDU	LE O	ľ	4	4.	263.	
•	5a	Gross amount from sale of	assets other than inventory		5a		•					
2	Ь	Less: cost or other basis an	<del>-</del>		5b							
		O the second of second of the							5c			
	6									· · · · · · · · · · · · · · · · · · ·		
•	1	a Gross income from gaming (attach Schedule G if greater than										
ž		\$15,000)	(		6a							
Revenue	h	Gross income from fundrais	sing events (not including \$			ntributions						
ď			orted on line 1) (attach Schedule G if th	ne sum of such								
		gross income and contribut			6b							
	C		gaming and fundraising events		6c							
	d	·	aming and fundraising events (add line	es 6a and 6b and sub	tract li	ine 6c)			6d			
	7a	Gross sales of inventory, les	- ·		7a							
	Ь	Less: cost of goods sold			7b				İ			
	C	•	sales of inventory (Subtract line 7b from	n line 7a)					7c			
	8		revenue (describe in Schedule O)						8			
	9	otal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8					▶	9	137,	793.		
	10	Grants and similar amounts							10			
	11	Benefits paid to or for mem	Ders	(200	معدد س	. r N	1	Γ	11			
Ŋ	12	Salaries, other compensation			9	~	Q	Γ	12			
Expenses	13		payments to independent contractors	h 1			÷.; *		13			
œ.	14	Occupancy, rent, utilities, an		JUN	0.8	2013			14			
ũ	15	Printing, publications, posta		∫ ox. JO!			,		15		626.	
	16	Other expenses (describe in	• • • • •	SE	E <sup>r</sup> S	CHEDU	LE_O		16	122,9		
	17	Total expenses. Add lines				THE REAL PROPERTY.			17	123,6		
	18		ar (Subtract line 17 from line 9)						18		177.	
ets	19		at beginning of year (from line 27, colu	ımn (A))				F	$\neg \uparrow$			
Ass			r figure reported on prior year's return					[	19	250,9	€22.	
Net Assets	20	•	or fund balances (explain in Schedule	•	E S	CHEDU	LE O		20	10,3		
Z	21		at end of year. Combine lines 18 throu	•				▶│	21	275,4		
LH/	A For	· ·	otice, see the separate instructions							Form 990-EZ		

LHA For Paperwork Reduction Act Notice, see the separate instructions

Pa	art II	Balance Sheets (see the instructions for Part II)					
		Check if the organization used Schedule O to res	spond to any ques			<u> </u>	X
			<u> </u>	(A) Beginning of year			nd of year
22		, savings, and investments	-	248,917			<u> 273,670.</u>
23		and buildings	<u> </u>	0.005	23		1 010
24		r assets (describe in Schedule 0) SEE SCHEDULE O	)  -	2,005			1,810.
25		assets	-	250,922			<u>275,480.</u>
26		liabilities (describe in Schedule 0)	}-		- 26		0.
27	Net a	ssets or fund balances (line 27 of column (B) must agree with line 21) Statement of Program Service Accomplishmer	ate (see the instri	250,922	- 27		<u>275,480.</u>
Г	11 L 111	Check if the organization used Schedule O to res					penses for section
W/ba	t is the	organization's primary exempt purpose? EDUCATIONAL EN		Stion in this caren	1 30	1(c)(3) a	and 501(c)(4)
							ins and section trusts; optional
		organization's program service accomplishments for each of its three largest program in the the services provided, the number of persons benefited, and other relevant inform		enses in a clear and concise		others.	
28	SEE	SCHEDULE O	<del></del>				
	<u> </u>	DCMBD0BB 0	<del></del>	· · · · · · · · · · · · · · · · · · ·			
	(Grants	s \$ ) If this amount includes foreign g	rants, check here	<b>•</b>	28a		89,033.
		SCHEDULE O	, and one of the original of t				<u> </u>
	(Grants	s \$ ) If this amount includes foreign g	rants, check here		29a		11,176.
		SCHEDULE O					
	(Grants	s \$ ) If this amount includes foreign g	rants, check here		30a		20,872.
31	Other p	program services (describe in Schedule O) SEE SCHE	DULE O		[		
	(Grants	s \$ ) If this amount includes foreign g	rants, check here		31a		692.
32	Total p	program service expenses (add lines 28a through 31a)			▶ 32		<u>121,773.</u>
Pa	<u>ırt IV</u>	List of Officers, Directors, Trustees, and Key E				ictions fo	r Part IV)
		Check if the organization used Schedule O to res	<u> </u>	stion in this Part IV			
			(b) Average hours per week devoted to	(C) Reportable compensation (Forms	(d) Health b contributio	ns to	(e) Estimated amount of other
		(a) Name and title	per week devoted to	W-2/1099-MISC) (if not paid, enter -0-)	employee b plans, and d	eferred	compensation
TZ 3	MITTE.	LIT CATE CIVIT	<u> </u>	(**************************************	compensa	ation	<u>·</u>
		WISNESKI	6.00	0.		0.	^
		DENT ADDEO	0.00	0.		0.	0.
		PRESIDENT	4.00	0.		ο.	0.
		ASCHE	4.00			<del>"</del>	0.
		URER	5.00	0.		0.	0.
		INA NEWBY	3.00				
		TARY	1.00	0.		0.	0.
<u> </u>	<u> </u>		2.00				
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						- 1	
						-	
						1	

### MT. BETHEL ELEMENTARY SCHOOL

FOUNDATION, INC.

Form 990-EZ (2012)

Pa	instructions for Part V) Check if the organization used Sch. O to respond to any question in the			$\mathbf{x}$		
	instructions for rail vy orient in the organization about confict to any question and		<del></del>	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each			1		
	activity in Schedule O	33		х		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended					
	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		Х		
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported					
	on lines 2, 6a, and 7a, among others)?	35a		X		
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	A		
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax					
	requirements during the year? If "Yes," complete Schedule C, Part III	35c		X		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"					
	complete applicable parts of Schedule N	36	ļ	X		
	Enter amount of political expenditures, direct or indirect, as described in the instructions    37a   0	7		,,		
	Did the organization file Form 1120-POL for this year?	37b	ļ	X		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	200		x		
_	In a prior year and still outstanding at the end of the tax year covered by this return?  If "Yes," complete Schedule L, Part II and enter the total amount involved  38b   N/A	38 <u>a</u>	<u> </u>			
39	If "Yes," complete Schedule L, Part II and enter the total amount involved  Section 501(c)(7) organizations. Enter:	1				
ээ a	Initiation fees and capital contributions included on line 9  N/A					
h	Gross receipts, included on line 9, for public use of club facilities  39b N/A	<b>-</b>				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	┪ '		1		
	section 4911 ▶ 0 • ; section 4912 ▶ 0 • ; section 4955 ▶ 0 •					
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the					
	year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I	40b		X		
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers					
	or disqualified persons during the year under sections 4912, 4955, and 4958					
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the					
	organization D.	1				
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter					
	transaction? If "Yes," complete Form 8886-T	40e		X		
41	List the states with which a copy of this return is filed ► GA  The organization's books are in care of ► FRAN ASCHE  Telephone no. ► 678-59	) 5 7	112			
42 a	The organization's books are in care of ► FRAN ASCHE  Located at ► 4388 HERITAGE GLEN COURT, MARIETTA, GA  ZIP + 4 ►					
h	At any time during the calendar year, did the organization have an interest in or a signature or other authority	<u> </u>	<u> </u>			
U	over a financial account in a foreign country (such as a bank account, securities account, or other financial	1	Yes	No		
	account)?	42b		Х		
	If "Yes," enter the name of the foreign country:					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		Х		
	If "Yes," enter the name of the foreign country:					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		$\blacktriangleright$			
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A				
		ľ				
			Yes	No		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of	1	İ	7.7		
	Form 990-EZ	44a		_X_		
Þ	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead	,,,		v		
_	of Form 990-EZ	44b		X		
	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation	44c	$\dashv$			
u	In Schedule O	44d	Į			
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<u>x</u>		
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section	-"-				
	512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		х		
		Form 99	90-EZ (			

58-2141784

Page 3

232 174 01-11-13

May the IRS discuss this return with the preparer shown above? See instructions

X Yes

Form 990-EZ (2012)

## **SCHEDULE A**

(Form 990 or 990-EZ)

Name of the organization

**Public Charity Status and Public Support** 

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

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

Open to Public Inspection

Department of the Treasury

BETHEL ELEMENTARY SCHOOL MT. INC.

FOUNDATION.

Employer identification number 58-2141784

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

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Page 2 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 (d) 2011 (f) Total Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (e) 2012 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 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 Total. Add lines 1 through 3 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 Section B. Total Support Catendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 IV.) Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 % 15 15 Public support percentage from 2011 Schedule A, Part II, line 14 16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. 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

Schedule	A (Form	990 or	990-F71	201

17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 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

and stop here. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2012 FOUNDATION, INC.

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

	qualify under the tests listed b	elow, please comp	olete Part II )				
Sec	ction A. Public Support						<del></del>
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					:	
	include any "unusual grants ")	143,727.	120,480.	147,735.	132,221.	133,530.	<u>677,693.</u>
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	631.					631.
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513		<del></del>				
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	144,358.	120,480.	147,735.	132,221.	133,530.	678,324.
	Amounts included on lines 1, 2, and						-
	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .						0.
	Add lines 7a and 7b				<del></del>		<u>0.</u> 678,324.
	Public support (Subtract line 7c from line 6) ction B. Total Support						0/0,324.
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(ь) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	144,358.	120,480.	147,735.	132,221.	133,530.	678,324.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,897.	4,445.	3,845.	2,656.	4,263.	19,106.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	3,897.	4,445.	3,845.	2,656.	4,263.	19,106.
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 IV)						
	Total support. (Add lines 9, 10c, 11, and 12)	148,255.	124,925.	151,580.	134,877.		<u>697,430.</u>
	• • • • • • • • • • • • • • • • • • • •						
14	First five years. If the Form 990 is for			d, fourth, or fifth ta	x year as a section	n 501(c)(3) organız	ation,
	First five years. If the Form 990 is for check this box and stop here	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organız	ation,
Sec	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ	r the organization's	first, second, thir		x year as a section		<b>▶</b> □
Sec 15	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2012 (	r the organization's ic Support Per line 8, column (f) di	first, second, thir rcentage vided by line 13, c		x year as a section	15	97.26 %
Sec 15	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2012 (Public support percentage from 2011)	r the organization's ic Support Per line 8, column (f) di Schedule A, Part	rcentage vided by line 13, c		x year as a section		<b>▶</b> □
Sec 15 16 Sec	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investigation 1	ic Support Pel line 8, column (f) di Schedule A, Part stment Income	rcentage vided by line 13, c III, line 15 e Percentage	olumn (f))	x year as a section	15 16	97.26 % 97.23 %
Sec 15 16 Sec 17	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2012 (Public Support percentage from 2011 ction D. Computation of Investment income percentage for 2012 (Investment income percentage for 2012).	ic Support Per line 8, column (f) di Schedule A, Part stment Income 112 (line 10c, colum	rcentage vided by line 13, c III, line 15 e Percentage nn (f) divided by line	olumn (f))	x year as a section	15 16	97.26 % 97.23 % 2.74 %
Sec 15 16 Sec 17	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investment income percentage for 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage Investment Income Investment Income Investment Investment Income Investment	ic Support Per line 8, column (f) di Schedule A, Part stment Income 112 (line 10c, colum 2011 Schedule A,	rcentage vided by line 13, c III, line 15 e Percentage nn (f) divided by line Part III, line 17	rolumn (f)) ne 13, column (f))		15 16 17 18	97.26 % 97.23 % 2.74 % 2.77 %
Sec 15 16 Sec 17	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2012 (Public Support percentage from 2011 ction D. Computation of Investment income percentage from 2011 investment income percentage from 2013 1/3% support tests - 2012. If the	ic Support Per line 8, column (f) di Schedule A, Part stment Income 112 (line 10c, colum 2011 Schedule A, l organization did n	rcentage vided by line 13, c III, line 15 e Percentage nn (f) divided by line Part III, line 17 ot check the box of	olumn (f)) ne 13, column (f)) on line 14, and line	15 is more than 3	15 16 17 18 3 1/3%, and line 1	97.26 % 97.23 %  2.74 % 2.77 % 7 is not
Sec 15 16 Sec 17 18 19a	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investment income percentage for 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage from 20 Investment Income percentage Investment Income Investment Income Investment Investment Income Investment	ic Support Per line 8, column (f) di Schedule A, Part stment Income 112 (line 10c, colum 2011 Schedule A, l organization did n nd stop here. The	rcentage vided by line 13, c III, line 15 e Percentage on (f) divided by line Part III, line 17 ot check the box organization quali	olumn (f))  le 13, column (f))  on line 14, and line fies as a publicly s	15 is more than 3 supported organiza	15 16 17 18 3 1/3%, and line 1 ation	97.26 % 97.23 %  2.74 % 2.77 % 7 is not
Sec 15 16 Sec 17 18 19a	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2012 (Public Support percentage from 2011 ction D. Computation of Investment income percentage from 2011 investment income percentage from 3 3 1/3% support tests - 2012. If the more than 33 1/3%, check this box a	ic Support Per line 8, column (f) di Schedule A, Part stment Income 112 (line 10c, colum 2011 Schedule A, organization did n nd stop here. The organization did n	rcentage vided by line 13, c ill, line 15 e Percentage nn (f) divided by line Part III, line 17 ot check the box of organization quality	olumn (f)) ne 13, column (f)) on line 14, and line fies as a publicly s line 14 or line 19a	15 is more than 3 supported organiza , and line 16 is mo	15 16 17 18 3 1/3%, and line 1 ation re than 33 1/3%, a	97.26 % 97.23 %  2.74 % 2.77 % 7 is not

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

232211 01-04-13

# 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.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

MT. BETHEL ELEMENTARY SCHOOL

Employer identification number

FOUNDATION, INC.	58-2141784
FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:	
DESCRIPTION OF PROPERTY:	AMOUNT:
INTEREST INCOME	430.
DIVIDEND INCOME	3,011.
LONG TERM CAPITAL GAIN DIVIDEND INCOME	822.
TOTAL INCLUDED ON FORM 990-EZ, LINE 4	
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:	
DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
INSTRUCTIONAL REIMBURSEMENTS	89,033.
ENRICHMENT SUPPLIES	11,176.
TECHNOLOGY IMPROVEMENTS	20,872.
GENERAL/MISCELLANEOUS	1,909.
TOTAL TO FORM 990-EZ, LINE 16	
FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSETS:	
CHANGES IN NET ASSETS OR FUND BALANCES:	AMOUNT:
UNREALIZED NET CHANGE IN THE VALUE OF INVESTMENTS HELD I	ЗҮ
THE FOUNDATION	10,381.
FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:	
DESCRIPTION BEG. OF	F YEAR END OF YEAR
DUE FROM ASP PROGRAMS	2,005. 1,810.
FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLI	SHMENTS:
INSTRUCTIONAL ENRICHMENT - PROVIDED FUNDING FOR EDUCATION	ON

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

232211 01-04-13

# 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.

2012
Open to Public Inspection

Name of the organization

MT. BETHEL ELEMENTARY SCHOOL

Employer identification number 58 - 2141784

FOUNDATION, INC. 58-2141764
IN AREAS OF SCIENCE, TECHNOLOGY, AND PERFORMING ARTS TO
APPROXIMATELY 1,000 STUDENTS AT MT. BETHEL ELEMENTARY
SCHOOL.
FORM 990-EZ, PART III, LINE 29, PROGRAM SERVICE ACCOMPLISHMENTS:
TEACHER GRANTS/CLASSROOM SUPPLIES - PROVIDED SUPPORT AND
EDUCATIONAL RESOURCES TO THE STAFF THAT SERVED
APPROXIMATELY 1,000 STUDENTS AT MT. BETHEL ELEMENTARY
SCHOOL.
FORM 990-EZ, PART III, LINE 30, PROGRAM SERVICE ACCOMPLISHMENTS:
TECHNOLOGY/IMPROVEMENTS - PROVIDED EQUIPMENT, SOFTWARE,
AND SUPPORT TO MAINTAIN 21ST CENTURY LEARNING ENVIRONMENT
FOR APPROXIMATELY 1,000 STUDENTS AT MT. BETHEL ELEMENTARY
SCHOOL.
FORM 990-EZ, PART III LINE 31, OTHER PROGRAM SERVICE ACCOMPLISHMENTS:
AWARDS FOR PERFORMING ARTS PROGRAM
GRANTS \$ 0. EXPENSES \$ 192.
"NIGHT IN THE PARKING LOT" EXPENSES
GRANTS \$ 0. EXPENSES \$ 500.
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.

### **SCHEDULE O**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Form 990 or 990-EZ or to provide any additiona

► Attach to Form 990 or 990-EZ.

MT • BETHEL ELEMENTARY SCHOOL

Employer identification number 58-2141784

FOUNDATION, INC.	58-2141784
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY	PREMIUMS, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.	

### Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2013)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).							
-	complete Part II unless you have already been granted		•				
	nic filing (e-file). You can electronically file Form 8868 if					orporation	
	d to file Form 990-T), or an additional (not automatic) 3-mo						
	to file any of the forms listed in Part I or Part II with the ex						
	al Benefit Contracts, which must be sent to the IRS in par						
visit wu	w.irs gov/efile and click on e-file for Charities & Nonprofits	s.				_	
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		·	
A corpo	oration required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and	complete			
Part I o	nly	•				<b>▶</b> □	
	r corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	t an exter	nsion of time		
to file in	come tax returns.						
Type o	Name of exempt organization or other filer, see instru	ictions.		Employe	r identification n	n number (EIN) or	
print	MT. BETHEL ELEMENTARY SCHO	$O\mathbf{L}$					
File by thi	FOUNDATION, INC.					2141784	
due date t	or Number, street, and room or suite no. If a P O. box, s	ee instruc	tions.	Social se	ecurity number (S	SSN)	
filing your return Se	E IZIO DOIMIDON I LINUT RD						
instructio		oreign add	Iress, see instructions				
	MARIETTA, GA 30068-2719						
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)	٠		0 1	
		T	LA				
Applica 	ation	Return	Application	Return Code			
Is For	20 5 000 57	Code	Is For				
	90 or Form 990-EZ	01	Form 990-T (corporation) Form 1041-A	07			
Form 990-BL		02	Form 4720			09	
	720 (individual)	03	Form 5227			10	
Form 9	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
	90-T (sec 401(a) of 408(a) flust)	06	Form 8870	12			
ronn 3	FRAN ASCHE	1 00	1 0111 007 0				
• The	books are in the care of   4388 HERITAGE (	TEN (	COURT - MARTETTA.	3A 30	068		
	phone No. ► 678-595-7113	<u> </u>	FAX No ►	<u> </u>			
	e organization does not have an office or place of business	s in the Un	·	-	<del></del>		
	s is for a Group Return, enter the organization's four digit			this is fo	r the whole arou	p. check this	
	. If it is for part of the group, check this box	•			_		
	request an automatic 3-month (6 months for a corporation						
			tion return for the organization name		The extension		
ıs	for the organization's return for	Ū	-				
<b>&gt;</b>	X calendar year 2012 or						
<b>&gt;</b>	tax year beginning	, an	d ending				
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return I	inal retur	'n		
[	Change in accounting period						
					<b>Y</b> · · · ·		
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		i		
<u>n</u>	onrefundable credits. See instructions.			3a	\$	0.	
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
<u>e:</u>	stimated tax payments made. Include any prior year overp	ayment al	lowed as a credit.	Зь	\$	0.	
с В	alance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,				
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	<u> </u>	
Caution	. If you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-EO and Fo	rm 8879-l	EO for payment i	nstructions	

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.