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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A F	or the 2	2012 calendar year, or tax year beginning $$	nding J	UN 30, 2013			
Вс	heck if	C Name of organization		D Employer identific	ation number		
a	pplicable	BISHOP NOLAND EPISCOPAL DAY		1			
	Address change	SCHOOL FOUNDATION]			
	Name change	Doing Business As		72-0953602			
X	Initial	Number and street (or P 0 box if mail is not delivered to street address)	E Telephone number				
	Termin-	803 N. DIVISION STREET		337-4	<u> 433–5246</u>		
	Amende return	Crty, town, or post office, state, and ZIP code		G Gross receipts \$	55,805.		
	Applica-	LAKE CHARLES, LA 70601		H(a) is this a group re			
	pending	F Name and address of principal officer ANGIE CAMEL		for affiliates?	Yes X No		
		835 TOUCHEY STREET, LAKE CHARLES, LA 7	0601	H(b) Are all affiliates incl	luded? Yes No		
I T	ax-exer	npt status X 501(c)(3) 501(c) () ((Insert no) 4947(a)(1) or	r 🔙 527	If "No," attach a	list. (see instructions)		
		: ► NONE		H(c) Group exemption	n number 🕨		
		rganization X Corporation	L Year	of formation 1982 M	I State of legal domicile ${ m LA}$		
	ert I	Summary					
	1 B	riefly describe the organization's mission or most significant activities: ${ m TO}~{ m SU}$	PPORT	THE ACTIVIT	TIES AND		
Activities & Governance	M	AINTENANCE OF THE BISHOP NOLAND EPISCOPA	L DAY	SCHOOL WHIC	CH IS A		
E.	, –	heck this box 🕨 🔲 if the organization discontinued its operations or dispose					
Š.		lumber of voting members of the governing body (Part VI, line 1a)		3	5		
Ğ	1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	5		
δ.		otal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0		
iţie	l	otal number of volunteers (estimate if necessary)		6	8		
Ė	<u> </u>	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
⋖	_	let unrelated business taxable income from Form 990-T, line 34		7b	0.		
				Prior Year	Current Year		
•	∕8 C	Contributions and grants (Part VIII, line 1h)		16,885.	38,420.		
Revenue	-	rogram service revenue (Part VIII, line 2g)			0.		
	-	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		19,363.	17,383.		
ď	11.	other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		22.	2.		
	ı	otal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		36,270.	55,805.		
		Grants and similar amounts paid (Part IX, column (A), lines 1·3)		30,383.	27,041.		
	!	denefits paid to or for members (Part IX, column (A), line 4)			0.		
S		salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			0.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			0.		
per	l .	otal fundraising expenses (Part IX, column (D), line 25)	0.				
ŭ	1	Ottal formationing expenses (Fart IX, column (A), lines 11a-11d, 11f-24e)		14,423.	14,388.		
			→	44,806.	41,429.		
	10 5	otal expenses. Add lines 13-17 (must equal Part IX, column (A) line 25 Revenue less expenses. Subtract line 18 from line 12	_	<8,536.			
es es		revenue less expenses oubtract line to norm line 12	S B	eginning of Current Year	End of Year		
anc	20 T	S NAV 1 0 2090	o L	1,425,823.	1,413,963.		
Ass 188	21 T		S		0.		
Net Assets or Fund Balances	22 N	let assets or fund balances. Subtract line 21 from line 20 OCDEN LAT		1,425,823.	1,413,963.		
-	art II	Signature Block					
		les of perjury, I declare that I have examined this return, including accompanying schedules	and staten	nents, and to the best of m	v knowledge and belief, it is		
		, and complete Declaration of preparer (other than officer) is based on all information of wh			,,		
	1	A					
Sig	n	Signature of officer ,		Date			
Hei	- 1	Frances C. Kall		May 15	5, 2014		
		Type or print name and title		U	,		
_		Print/Type preparer's name Prepage \$2000	11	Date Check	PTIN		
Paid		RICK ROBERT RICK PREPERT C	871	05/14/14 self-employe	P00031513		
	F	Firm's name BROUSSARD & COMPANY, CPAS, L.L.C		Firm's EIN	72-1447940		
Use Only Firm's address 127 WEST BROAD STREET, SUITE 800							
LAKE CHARLES, LA 70601 Phone no (337)439-660							
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X Yes No		
	001 12-10		ons.		Form 990 (2012)		

	FOUNDATION
SCHOOL	FOUNDATION

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
	TO SUPPORT AND MAINTAIN THE FACILITIES OF THE BISHOP NOLAND EPISCOPAL DAY SCHOOL, A 501(C)(3) SCHOOL.
2	Did the organization undertake any significant program services during the year which were not listed on
2	the prior Form 990 or 990-EZ? Yes X 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 X No
4	If "Yes," describe these changes on Schedule O 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
	was a second of a second or a second or a second of
4a	(Code) (Expenses \$1, 10 reach program service reported) (Expenses \$1, 10 reach program service reported) (Revenue \$)
4b	(Code) (Expenses \$
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$
_	, , , , , , , , , , , , , , , , , , , ,
	Other greenem convene (Decembe in Schedule C)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 41,429.
	Form 990 (2012
23200 12-10-	2

BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION

Form 990 (2012) SCHOOL FOUND
Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_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? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		_ <u>X</u> _
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	السيا	L

Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5.000 of grants and other assistance to any government or organization in the United States on Part IX. Countin (A), Ins. 17 If "Yes," complete Schedule (A Parts I and II) 22 Did the organization report more than \$5.000 of grants and other assistance to individuals in the United States on Part IX. Countin (A), Ins. 27 If "Yes," complete Schedule (A Parts I and III) 23 Did the organization answer "Yes" to Part IVI, Section A, Ine. 3, 4, or 5 about compensation of the organization's current and former officiens, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule K, If "No", yo to line 25 Schedule K, If "No", you have xerempt bonds? 24 Did the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year? 25 Did the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year. 26 Did the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year. 27 Did the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year. 28 Did the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year. 29 Did the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year. 29 Did the organization acts as an "on behalf of" issuer for bonds		•		Yeş	No
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 IX. 23 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 IX. 24 Did the organization answer "Thest to Part IVI, section A, line 3, 4, or \$ about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees?" If "Yes," complete Schedule K, If "No", op to line 25 Schedule L, Part I IV Schedule L, Part IV Schedule	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
column (A), line 27 if "Yes," complete Schedule I, Parts I and III 2		United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is at day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is If "Yes," to line 25 bit the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is If "Yes," to line 25 bit the organization ministen an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 24c	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 37, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 0.25 b) Did the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest amy proceeds of tax-exempt bonds outstanding at any time during the year of the decase any tax-exempt bonds? d) Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(6)(3) and 501(6)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b) Is the organization sware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the fransaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25b X 27c Did the organization as on the end of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 28d Was a loan to or by a current or former officer, director, trustee, key employee, ubstantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28d A Carrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28d A Carrent or former officer, director, trustee, or key employee or a family member thereof) was an officer,		column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 27 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 10 defease any tax-exempt bonds? 28 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 10 defease any tax-exempt bonds? 28 Use of the organization aware that it engaged in an excess benefit transaction with a disqualified person out a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25b X 29 Uses a loan to or by a current or former officer, director, trustee, key employees, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27b Uses the organization a party to a business transaction with one of the following parties (see Schedule L, Part II 27b Uses persons? If "Yes," complete Schedule L, Part II 27b Uses persons? If "Yes," complete Schedule L, Part II 27b Uses parties of the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part II 28b Uses the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II 31b Use organization related to any tax-exempt or taxable entity? If	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			ļ
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? c) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? d) Did the organization act as an "on behalf of" issuer for bonds outstanding 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? 24d		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
stat day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No", po to line 22 b. b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? do the organization maintain an escrow account other than a refunding escrow at any time during the year of the part o		Schedule J	23		X
Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax exempt bonds period any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage 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 vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported to any fith year, and the prior of the organization receive any three satisfactions. It is a prior that the transaction with a disqualified person in a prior year, and that is	24a				
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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? 24d 25d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d 25s Section 901(c)(3) and 901(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I 25s		Schedule K. If "No", go to line 25			<u> X</u>
any taxexempt bonds? 246 247 258 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV and the firm of ficer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M, Part I 30 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part I II 30 Did the organization own 100% of an entity disregarded a	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b 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? If "Yes," complete Schedule L, Part II 25b X 25b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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, or key employee? If "Yes," complete Schedule L, Part IV 28b X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 29 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 29 X 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II 32 X 34 Was the	С				ľ
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Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		·	33		_ <u>_ </u>
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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)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	25-			^	V
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 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? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X		· · · · · · · · · · · · · · · · · · ·	35a		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 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? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	D		356		
If "Yes," complete Schedule R, Part V, line 2 36 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? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	36		330		-
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X		·	36		l x
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37	37		33		 -
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O 38 X			37		x
Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>		
······································			38	Х	
			Form	990	(2012)

orm	990 (2012) SCHOOL FOUNDATION		72-0953	602	Pa	age 5
Par					-	
	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportab	le gaming			
	(gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authorit	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	t)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accoun	ts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orgai	nization 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 contribut	ions or	grfts			
	were not tax deductible?			6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices pr	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		•	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	ııred			
	to file Form 8282?	1 1		7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u></u>			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract			7 1		ļ
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo			<u>7g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			_		
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	امدا				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		ł		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:	ایدا		1		
a	Gross income from members or shareholders	11a		ł		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against					
40	amounts due or received from them.)	11b		10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			12-	-	
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	124				
_	organization is licensed to issue qualified health plans	13b	-	1		
140	Enter the amount of reserves on hand	[130]		140	 	X

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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2Q12)

SCHOOL FOUNDATION

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion 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 5			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 5			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
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 in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
þ	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
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?			
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
þ	Other officers or key employees of the organization	15b		Х
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		<u>X</u>
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		
	List the states with which a copy of this Form 990 is required to be filed NONE			
17 ₁₽				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) of the properties and the second state of the second state	avallab	ie	
	for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website Another's website X Upon request Other (explain in Schedule O)	.u.e.	1	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	iciai	
20	statements available to the public during the tax year.		_	
£ U	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza STEPHANIE NICHOLAS - 337-433-5246	uon: 💌		
	803 NORTH DIVISION STREET, LAKE CHARLES, LA 70601			
32000	B. CHARLES, DA 10001	r	000	(0010)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key 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.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ANGIE CAMEL	0.10			,,					•	^
DIRECTOR	0 10	Х		Х	<u> </u>		├_	0.	0.	0.
(2) KIM MELTON	0.10	X						0.	0.	0
DIRECTOR	0.10	^				ļ		<u> </u>	0.	0.
(3) DELLA ROSE DIRECTOR	0.10	X		х				0.	0.	0.
(4) STUART WEATHERFORD	0.10	^	 	^	\vdash		-	0.	<u> </u>	<u> </u>
DIRECTOR	0.10	X		Х				0.	0.	0.
(5) HAHUL PATEL	0.10	<u> </u>		Λ	\vdash			- 0.	•	
DIRECTOR	0.10	X						0.	0.	0.
			<u> </u>				ļ			
			ļ							
			_					-		
		-				<u> </u>	-			
						<u> </u>				<u>.</u>
										·
		_					_	-		
		<u> </u>		L_	<u> </u>		_			
					1					

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Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) (B) Name and title Average hours per week		(do not check more than one box, unless person is both an officer and a director/trustee)						(D) (E) Reportable Reportable compensation compensation from relate		on amount of other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC		from from organiz and re organiz	the zation lated
											\downarrow		
							_						
				_			_						
											\dashv		· · · · · · · · · · · · · · · · · · ·
	_												
c	Sub-total Total from continuation sheets to Part VI Total (add lines 1) and 1a)	I, Section A					> > >		0.		0.		0. 0.
2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed al	bov	e) wh	no re					0
3	Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee,	, or	highest compensated e	mployee on		Ye	s No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	ım of reportab		•					•	the organization		3	X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a readered to the except ratios 2 if "Yes." compared to the except ratios 2 if "Yes."	accrue compei	nsat	ion f	rom	any	unr			dual for services	-	5	X
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	рівів эспециі	0	0/ 50	JUII	pers	50//					3	A
1	Complete this table for your five highest co the organization. Report compensation for	•								•	ensa	ation fron	1
(A) (B) Name and business address NONE Description of services								C	(C) ompensa	tion			
								_				·	·
								\dashv					
								\dashv					
2	Total number of independent contractors (i \$100,000 of compensation from the organic		ot li	mite	d to		se II: 0	stec	d above) who received n	nore than			
							_					Earm QQ	1 (2012)

Form 990 (2012) SCHOOL
Part VIII Statement of Revenue

SCHOOL FOUNDATION

<u> </u>	,	***	Check if Schedule O cont		to any question i	n this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
Gra		b	Membership dues	1b					
ts,		C	Fundraising events	1c					
ia ia		d	Related organizations	1d					
S.E		е	Government grants (contribut	tions) 1e					
er S		f	All other contributions, gifts, gran	nts, and					
들			similar amounts not included abo	ve 1f	38,420.				
a st		9	Noncash contributions included in lines	3 1a-1f \$					
<u>ŏ ö</u>		h	Total. Add lines 1a-1f	<u>-</u>	•	38,420.		,	
					Business Code				
ဋိ	2	а							
E e		b							
m S		С							
Re		đ						 	
Program Service Revenue		e							
_		f	All other program service reve	enue	<u> </u>				
	_	9	Total. Add lines 2a-2f					······	
	3		Investment income (including	aiviaenas, intere	est, and	17,383.	17,383.		
			other similar amounts)	v avamet band		17,303.	17,303.	· · · · · · · · · · · · · · · · · · ·	
	5		Income from investment of ta Royalties	x-exempt bona p	proceeds				
	3		noyaliles	(i) Real	(ii) Personal				
	6	а	Gross rents	Witeai	(ii) Fersoriai				
	ľ	-	Less rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)		<u> </u>	ĺ			
			Gross amount from sales of	(i) Securities	(II) Other				
			assets other than inventory	, y coorco	(1) 0 11 101				
		b	Less: cost or other basis						
			and sales expenses						
		С	Gain or (loss)						
	İ	d	Net gain or (loss)						
Φ	8	а	Gross income from fundraising	g events (not					
enn			including \$	of					
ě			contributions reported on line	1c). See					
er			Part IV, line 18	а	1				
Other Revent	ĺ	b	Less: direct expenses	b					
_		С	Net income or (loss) from fund	draising events	•				
	9	а	Gross income from gaming a	ctivities. See					
			Part IV, line 19	а					
	ı		Less: direct expenses	b					
	3		Net income or (loss) from gan	-	>			•	
	10	а	Gross sales of inventory, less						
		_	and allowances	a					
			Less: cost of goods sold	b					
	<u> </u>	C	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
	11	_	MISCELLANEOUS	16	999999	2.	2.		
	' '	ь			33333				
		c							
		d	All other revenue						
		_	Total. Add lines 11a-11d			2.			
	12		Total revenue See instructions		_	55,805.	17,385.	0.	0.
23200 12-10	9 -12								Form 990 (2012)

SCHOOL FOUNDATION

Part IX	Statement of	f Functional	Expenses
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Section	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			omplete column (A)	
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	27 041	27 041		
	organizations in the United States See Part IV, line 21	27,041.	27,041.		·
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16			h-+	· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
b	Legal				
	Accounting				
d	Lobbying Professional fundraising services See Part IV, line 17				
•	Investment management fees	14,388.	14,388.		
g	Other. (If line 11g amount exceeds 10% of line 25,	11,000.	11/0001		
9	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion				
13	Office expenses		· · · · · · · · · · · · · · · · · · ·		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)		······································		
а					
b					
C					
d					
	All other expenses	41 400	41 400		
25	Total functional expenses. Add lines 1 through 24e	41,429.	41,429.	0.	0.
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)			l	İ

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Form 990 (2012)
Part X Balance Sheet

	*	Charlet Schodule O centerno a response to an	cupation in this Part V			
		Check if Schedule O contains a response to any	question in this Part A	(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			1	
	2	Savings and temporary cash investments		85,048.	2_	86,471.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
,	5	Loans and other receivables from current and fo	ormer officers, directors,			
		trustees, key employees, and highest compensation	ated employees. Complete			
		Part II of Schedule L	L		5	
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
Assets	6	employers and sponsoring organizations of sections	tion 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr).	. Complete Part II of Sch L		6	
	7	Notes and loans receivable, net			7	· · · · · · · · · · · · · · · · · · ·
Ass	8	Inventories for sale or use	<u> </u>		8	. <u> </u>
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments · publicly traded securities	<u> </u>	1,340,775.	11	1,327,492.
	12	Investments - other securities See Part IV, line 11 Investments - program-related. See Part IV, line 11			12	
	13				13	
	14	Intangible assets	<u>į</u>		14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	1,425,823.	16	1,413,963.
Liabilities	17	' '		·	17	.
	18	Grants payable	-		18	
	19	Deferred revenue	-		19	
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D			20	
	21				21	
	22	Loans and other payables to current and former	i			
		key employees, highest compensated employee	es, and disqualified persons.			
		Complete Part II of Schedule L	-		22	
	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelate	· •		24	
	25	Other liabilities (including federal income tax, pa	•			
		parties, and other liabilities not included on lines	s 17-24) Complete Part X of		0.5	
	0.0	Schedule D	0.	25	0.	
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958	3), check here X and	0.	26	<u> </u>
Net Assets or Fund Balances	1	complete lines 27 through 29, and lines 33 ar				
	27	Unrestricted net assets	id 54.	,	27	
	28	Temporarily restricted net assets	ľ	1,425,823.	28	1,413,963.
	29	Permanently restricted net assets	ŀ	1,123,0231	29	1/110/5001
	•	Organizations that do not follow SFAS 117 (A	SC 958) check here			
ř.		and complete lines 30 through 34.	loo soo), sheek here >			
ts	30	Capital stock or trust principal, or current funds			30	
Net Assets o	31	Paid-in or capital surplus, or land, building, or ed			31	
	32	Retained earnings, endowment, accumulated in	· · ·		32	
	33	Total net assets or fund balances		1,425,823.	33	1,413,963.
	34	Total liabilities and net assets/fund balances	ļ	1,425,823.	34	1,413,963.
-					-	

Form	990 (2012) SCHOOL FOUNDATION	72-0	953602	Pag	e 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
		1 1			. -
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8(
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 42	
3	Revenue less expenses Subtract line 2 from line 1	3		1,37	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,425	, 82	<u> 23.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8	<26	5,23	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,413	3,96	<u>63.</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				oxdot
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separar	te basıs,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audīt,		- 1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audr	t		
	Act and OMB Circular A-133?		3a		Χ

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 in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization BISHOP	NOLAND EPISC	OPAL	DAY			E	mployer	identification number
	FOUNDATION						7	2-0953602
Part I Reason for Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.		
Part I Reason for Public Char The organization is not a private foundation of the organization is not a private foundation of the organization is not a private foundation of the organization is not a private foundation of the organization operated for the organization operated for the organization operated for the organization operated for the organization operated for the organization operated for the organization operated for the organization operated for the organization operated for the organization organization in organization because it is: (For lines 1 is, or association of church (0(b)(1)(A)(ii). (Attach Scital service organization of operated in conjunction in the Part II.) ent or governmental unit eives a substantial part of the Part II.) enter Part III.) enter Part III. enter Part III	through 1 ches described in with a hos niversity over described in the support of	In check of ribed in section pital descrivated or operation of the section of the	only one bection 170(b)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)	ox) (b)(1)(A)(i) (A)(iii). ction 170 a governr ()(A)(v). Intal unit of than 33 1 acquired b in 509(a)(4 actions of, c)). See sec	tr from the membershing of the organical	ii). Enter t describ general p fees, a support inization y out the a)(3). Ch	the hospital's name, red in public described in Ind gross receipts from Ind gross investment after June 30, 1975. In purposes of one or eck the box that Infunctionally integrated persons other than	
supporting organization, check the		ille ino ille	atitisa 1y	рет, туре	п, от туре	: 111		
g Since August 17, 2006, has the control of the governing body of the since (ii) A family member of a person (iii) A 35% controlled entity of a Provide the following information	lirectly controls, either all upported organization? In described in (i) above? person described in (i) o	one or tog	ether with	•				Yes No 11g(i) X 11g(ii) X 11g(iii) X
(i) Name of supported (ii) EIN organization		in col (i) lis	organization sted in your document?	organizati	ion in col	(vi) Is organizatio (i) organiz U S Yes	on in col ed in the	(vii) Amount of monetary support
BISHOP	170(B)(1)(A)	1		, 55			1,10	
NOLAND EPISC27-0205442		x		х		x		26,641.
							<u> </u>	
							<u> </u>	
				:				
Total 1		<u> </u>						26,641.

232021 12-04-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

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 (e) 2012 (f) Total Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 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 Calendar 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) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 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)) 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 and stop here. The organization qualifies as a publicly supported organization 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 meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 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

Schedule A (Form 990 or 990-EZ) 2012

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990 EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to
qualify under the tests listed below, please complete Part II \

Se	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose									
3	Gross receipts from activities that	1								
	are not an unrelated trade or bus- iness under section 513									
4	Tax revenues levied for the organ-									
	ization's benefit and either paid to]			
	or expended on its behalf									
5	The value of services or facilities				 		· · · · · · · · · · · · · · · · · · ·			
	furnished by a governmental unit to the organization without charge		;							
6	Total. Add lines 1 through 5									
	Amounts included on lines 1, 2, and									
	3 received from disqualified persons									
ı	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
(Add lines 7a and 7b									
8	8 Public support (Subtract line 7c from line 6)									
Se	Section B. Total Support									
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
9	Amounts from line 6									
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
ı	Unrelated business taxable income	 								
	(less section 511 taxes) from businesses	1								
	acquired after June 30, 1975									
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)									
13	Total support. (Add lines 9, 10c, 11, and 12)									
	First five years. If the Form 990 is for	the organization	's first, second, the	rd, fourth, or fifth t	lax year as a secti	on 501(c)(3) organi	zation,			
	check this box and stop here						▶□			
Se	ction C. Computation of Publ	ic Support Pe	ercentage							
	Public support percentage for 2012 (column (f))		15	%			
16	Public support percentage from 2011	Schedule A, Par	t III, line 15			16	%			
	ction D. Computation of Inves)						
17	Investment income percentage for 20	12 (line 10c, colu	mn (f) divided by I	ine 13, column (f))		17	%			
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	%			
19	a 33 1/3% support tests - 2012. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not			
	more than 33 1/3%, check this box a	nd stop here. Th	e organization qua	alifies as a publicly	supported organi	zation	▶ □			
1	o 33 1/3% support tests - 2011. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	nore than 33 1/3%,	and			
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anization qualifies	as a publicly sup	ported organization	▶ 🗀			
20							▶ □			
	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2012									

SCHEDULE (Form 990)

OMB No 1545-0047

Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	2012
Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	Open to Public Inspection
Name of the organizativ	Name of the organization BISHOP NOLAND EPISCOPAL DAY SCHOOL FOIINDATION	Employer identification number 72-0953602
Part i General In	Part I General Information on Grants and Assistance	
1 Does the organiz	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 a	criteria used to award the grants or assistance?	X Yes No
2 Describe in Part I	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	

~	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	scedures for moni	toring the use of grant	funds in the United	d States			
4	Part il Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	United States. C	omplete if the orga	Inization answered "Y	'es" to 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.	55,000 Part II car	be duplicated if additi	onal space is need	Jed.			
	1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIS 803 LAK	BISHOP NOLAND EPISCOPAL DAY SCHOOL 803 N DIVISION STREET LARE CHARLES, LA 70601	27-0205442	501(C)(3)	27,041.	0.	:		TO SUPPORT THE ACTIVITIES AND MAINTENANCE OF THE SCHOOL IN ACCORDANCE WITH THE FOUNDATION'S BY-LAWS.
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government o	rganizations listed in the	e line 1 table				
က	Enter total number of other organizations listed in the line 1 table	s fisted in the line	1 table					
Ę	LHA For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instruct	tions for Form 990.					Schedule I (Form 990) (2012)

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BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2012)

Part III Grants and Other

Page 2

72-0953602

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance.
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	n required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation.
SCHEDULE I, PART I, LINE 2: THE BOA	BOARD OF T	HE FOUNDAT	THE FOUNDATION IS COMPRISED	PRISED OF	
MEMBERS OF THE BOARD OF THE SCHOOL WH	WHICH R	ICH RECEIVES THE	E SUPPORT AND	AND IS	
MONITORED BY THOSE BOARDS.					
	i				

Schedule I (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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

Internal Revenue Service

Name of the organization

BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION

Employer identification number 72-0953602

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
501(C)(3) ENTITY.
FORM 990, PAGE 1, PART 1
PRIOR YEAR INFORMATION INCLUDED WHEN A PRIOR YEAR 990 WAS NOT FILED.
THIS FORM 990 HAS INCLUDED FINANCIAL DATA FROM THE IMMEDIATE PRIOR
FISCAL YEAR. HOWEVER, A FORM 990 WAS NOT FILED FOR THE PRIOR YEAR AND
IT IS INDICATED THAT THIS CURRENT FILING IS AN INITIAL FILING. FORM 990
WAS NOT FILED IN PRIOR YEARS AS THE FOUNDATION WAS UNDER CHURCH CONTROL
AND THUS WAS NOT REQUIRED TO FILE FORM 990.
FORM 990, PART VI, SECTION A, LINE 8B: THERE WERE NO COMMITTEES WITH
AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11: IF TIME PERMITS, THE FORM 990 IS
PRESENTED TO THE FULL BOARD FOR APPROVAL BEFORE IT IS FILED. IF NOT, THE
FORM 990 IS PRESENTED TO THE FULL BOARD AT ITS NEXT MEETING SUBSEQUENT TO
THE FILING OF THE 990.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES RELEVANT
DOCUMENTS AVAILABLE UPON REQUEST.
SCHEDULE I, PART II, LINE 1(A)
TAX STATUS OF ORGANZIZATION RECEIVING GRANT OR OTHER ASSISTANCE
THE BISHOP NOLAND EPISCOPAL DAY SCHOOL IS THE ONLY RECIPIENT OF GRANTS
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION	Employer identification number 72-0953602
AND/OR OTHER ASSISTANCE FROM THE FOUNDATION. ON SCHEDULE	I THE SCHOOL
HAS BEEN LISTED AS A 501(C)(3) ORGANIZATION. HOWEVER, IN	2013 THE
SCHOOL'S TAX-EXEMPT STATUS WAS REVOKED FOR DELINQUENT FIL	ING OF FORM
990. THE SCHOOL HAS APPLIED FOR RETROACTIVE REINSTATEMENT	AND THE
FOUNDATION HAS COMPLETED SCHEDULE I IN ANTICIPATION OF A	FAVORABLE
RULING ON THE SCHOOL'S TAX-EXEMPT STATUS.	
	· · · · · ·
	······································

SCHEDULE R

Form 990)

Complete if the organization answered "Ye begannent of the Treasury

Attach to Form 990.

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

3, 34, 35, 36, or 37.

2012
2012
Open to Public Inspection

Employer identification number Direct controlling 72-0953602 entity End-of-year assets <u>e</u> Total Income 0 ► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) Û Primary activity BISHOP NOLAND EPISCOPAL DAY <u>e</u> FOUNDATION Name, address, and EIN (if applicable) SCHOOL of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Parti

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Part II

organizations during the tax year.)							
(a)	(q)	(0)	(P)	(0)	€	(6)	0(5)(4.0)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code		Direct controlling	section 312(b)(13)	ed (c) (d)
of related organization		foreign country)	section	status (if section	entity	entity?	2
				501(c)(3))		Yes	S _N
BISHOP NOLAND EPISCOPAL DAY SCHOOL -							
27-0205442, 803 NORTH DIVISION STREET, LAKE							
CHARLES, LA 70601	зсноог	LOUISIANA	501(C)(3)	170(B)(1)(A)			×
	,						

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

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Schedule R (Form 990) 2012

BISHOP NOLAND EPISCOPAL DAY

Schedule R (Form 990) 2012 SCHOOL FOUNDATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

Page 2

72-0953602

General or Percentage managing ownership Schedule R (Form 990) 2012 Yes No Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Code V-UBI General or partner/ amount in box managing c 20 of Schedule K-1 (Form 1065) Yes No Percentage ownership Ξ Share of end-of-year assets ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) Share of total Income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Ē **®** Legal domicile (state or foreign country) 25 Direct controlling entity ত Primary activity (c)
Legal
domicile
(state or
foreign Primary activity € Name, address, and EIN of related organization Name, address, and EIN of related organization 232162 12-10-12 Part IV

BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION

Schedule R (Form 990) 2012

ed "Yes" to Form 990, Part IV, line 34, 35b, or 36.)	
s" to Form 990, Pa	
ete if the organization answer	
ctions With Related Organizations (Comple	
art V Transa	

Page 3

72-0953602

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	z ezom zo ego diwa so	le. transactions with one or more related organizations listed in Darts II.IV?	n Parts II:IV2	Yes No
a Receipt of (i) Interest (ii) annuttes (iii) royalties or (iv) rent from a controlled entity				Ta X
b Gift, grant, or capital contribution to related organization(s)				Tb X
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				X X
e Loans or loan guarantees by related organization(s)				1e X .
f Dividends from related organization(s)				+ ×
a Sale of assets to related organization(s)				X X
i Exchange of assets with related organization(s)				1i X
j Lease of facilities, equipment, or other assets to related organization(s)				1j.
k Lease of facilities, equipment, or other assets from related organization(s)				1k X
 Performance of services or membership or fundraising solicitations for related org: 	related organization(s)			1 X
m Performance of services or membership or fundraising solicitations by related organization(s)	ianization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			
 Sharing of paid employees with related organization(s) 				10 X
 P Reimbursement paid to related organization(s) for expenses 				1p X
				19 X
				+ ,
ام				N S
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete to	his line, including covered	relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ınvolved
(1) BISHOP NOLAND EPISCOPAL DAY SCHOOL	В	27,041.		
(2)				
(6)				
(4)				
(5)				
(9)				
232163 12-10-12	26		Schedu	Schedule R (Form 990) 2012

Page 4

BISHOP NOLAND EPISCOPAL DAY SCHOOL FOUNDATION

Schedule R (Form 990) 2012

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) (d)	(q)	9	(p)	9		(6)	ε	(9)	s	(K)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	501(c)(3)	Share of total	Share of end-of-year	Dispropor- tonats allocations?	Ospropor- Code V-UBI General or Percentage towas amount in box 20 managing ownership allocations?	General o managing partner?	Percentage ownership
			under section 512-514)	Yes No	Income	assets	Yes	(Form 1065)	Yes No	
						:			+	
									-	
										-
									-	
							_			
				-			-		$\frac{1}{1}$	
										_
				-						
							-			
								_		
				<u> </u>			\downarrow		\pm	
						1			, ,	0,000
								Schedule	F P	Schedule K (Form 990) 2012

232165 12-10-12

Form 8868 (Rev 1-2013)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		► X
Note. Only complete Part II if you have already been granted an a				8868.	
 If you are filing for an Automatic 3-Month Extension, complete 					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed	i)
		Enter filer's	identifyir	ng number, see i	nstructions
Type or Name of exempt organization or other filer, see instru-	ctions		Employe	r identification nu	mber (EIN) or
print BISHOP NOLAND EPISCOPAL DAY					
File by the SCHOOL FOUNDATION				72-09536	502
due date for filing your return See 803 N. DIVISION STREET	ee instruc	tions.	Social se	cunty number (S	SN)
City, town or post office, state, and ZIP code. For a for LAKE CHARLES, LA 70601	oreign add	ress, see instructions			
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) STOP! Do not complete Part II if you were not already granted	06	Form 8870	•		12
• The books are in the care of ▶ 803 NORTH DIVIS Telephone No ▶ 337-433-5246 • If the organization does not have an office or place of business	SION	FAX No. ▶	LES,	LA 70601	
 If this is for a Group Return, enter the organization's four digit. 			f this is fo	r the whole arour	check this
box ▶		ach a list with the names and EINs of			
4 I request an additional 3-month extension of time until		15, 2014 .	an mome	icio tito exteriolor	110 101
5 For calendar year, or other tax year beginning			a JUN	30, 2013	3 .
6 If the tax year entered in line 5 is for less than 12 months, c Change in accounting period			Final r		
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED IN (ORDER	TO OBTAIN DOCUMEN	TS NE	CESSARY I	FOR
THE COMPLETION OF AN ACCURATE	RETU	RN.			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made. Include any prior year overpayment all	lowed as	a credit and any amount paid			0
previously with Form 8868			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using			0
EFTPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this form.	ling accom	st be completed for Part II of panying schedules and statements, and to	-	of my knowledge an	d belief,
Signature ▶ Title ▶			Data		
Signature F Title F			Date		(Pov. 1.2012)
				rorm 8868	(Rev. 1·2013)