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Form **990**Department of the Treasury Internal Revenue Service

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)

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

2012
Open to Public Inspection

<u>A 1</u>	or the	2012 calendar year, or tax year beginning $SEP1$, 2012 and en	iaing A	UG 31, 2013				
В	Check of	C Name of organization		D Employer identific	ation number			
a	applicable	THE BELTON EDUCATIONAL ENRICHMENT						
	Addres change	8						
	Name change	Doing Business As		74-2	774248			
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	om/suite	E Telephone number				
	Termin	· · · · · · · · · · · · · · · · · · ·		•	215-2023			
	ated Amend			G Gross receipts \$	301,750.			
F	return ∏Applic			H(a) Is this a group re				
L	ltion pendir	F Name and address of principal officer JAY TAGGART			Yes X No			
		· ·		for affiliates?				
1 Tax-exempt status. X 501(c)(3) 501(c) ()								
		e: BISDFOUNDATION.COM	T	H(c) Group exemption				
		organization: Corporation Trust Association X Other ►	L Year o	of formation: 1991 M	State of legal domicile: TX			
P	art []	Summary						
ĕ	1	Briefly describe the organization's mission or most significant activities TO PRO						
Activities & Governance	1	ORGANIZATIONAL SUPPORT TO THE STUDENTS OF	BELT	ON INDEPEND	ENT SCHOOL			
Ĕ	2	Check this box 🕨 📖 if the organization discontinued its operations or disposed	d of more	than 25% of its net as				
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	24			
<u>ن</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	24			
Ş	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0				
į	6	Total number of volunteers (estimate if necessary)	6	25				
ξ÷	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
⋖	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
	<u> </u>	Total and the second se		Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)	 	52,992.	71,767.			
Ē			d	0.	0.			
Revenue	9	Program service revenue (Part VIII, line 2g)	- C 					
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) DEC 2 3 2013		32,746.	36,216.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,038.	<u>57,574.</u>			
	T-	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		95,776.	165,557.			
	13	Grants and similar amounts paid (Part IX, column (A), lines-1-3)		97,333.	<u> 123,866.</u>			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	<u> </u>			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
â	ь	Total fundraising expenses (Part IX, column (D), line 25)	<u>0. </u>					
Ű	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		15,799.	3,602.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		113,132.	127,468.			
	19	Revenue less expenses Subtract line 18 from line 12		<17,356.				
Net Assets or	3		Bei	ginning of Current Year	End of Year			
ets	20	Total assets (Part X, line 16)	1-3	700,825.	764,730.			
ASS	21	Total liabilities (Part X, line 26)		0.	0.			
ē	22	Net assets or fund balances Subtract line 21 from line 20	_	700,825.	764,730.			
Ē	art II	Signature Block		700,043	704,730.			
		alties of perjury, I declare that I have examined this return, including accompanying schedules a	and atatam	anta and to the heat of m	u knowledge and helief it is			
					y knowledge and bellet, it is			
uu	e, correc	et, and complete. Declaration of preparer (other than officer) is based on all information of which	ii preparei		/13			
_		Signature of officer Signature of officer	 	<u> </u>				
Sig		1' (/ 🗸		Date				
He	re	JAY TAGGART, PRESIDENT						
Type or print name and title								
		Print/Type preparer's name Preparer's signature		Date Check	PTIN			
Pai	id	CINDY L. FRANKLIN CINDY L. FRANKLIN	N 1	. 2 / 0 2 / 1 3 self-employe				
Pre	eparer	Firm's name BGF&N, P.C.	-	Firm's EIN	74-2531836			
Us	e Only	Firm's address 3520 SW HK DODGEN LOOP						
		TEMPLE, TX 76504-6838		Phone no. (254)773-9907			
Ma	av the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Form **990** (2012)

THE BELTON EDUCATIONAL ENRICHMENT FOUNDATION

	990 (2012) • FOUNDATION	74-2774248	Page 2
	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		
	ENHANCE THE QUALITY OF EDUCATION OF ALL BELTON INDEPEDE	INT SCHOOL	
	DISTRICT STUDENTS.		
			
	Did the organization undertake any significant program services during the year which were not listed on	[]	()
	the prior Form 990 or 990-EZ?	∟ Yes	X No
	If "Yes," describe these new services on Schedule O.	· □.	X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? L_Yes	L& No
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, a	so managered by avanage	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	• •	
	revenue, if any, for each program service reported	iers, trie total expenses, a	anu
	(Code) (Expenses \$		· ·
44	PROVIDED 95 COLLEGE SCHOLARSHIPS TO QUALIFIYING GRADUATE		OF '
	THE BELTON INDEPENDENT SCHOOL DISTRICT.	LING DIODDINID	
	ZIIZ ZZZON ZINZZKZNIZZY DONOCZ ZZZZINZOT	 	
		 -	·
			·-·
4b	(Code) (Expenses \$ 38,815. including grants of \$ 38,815.) (Reve	enue \$)
	PROVIDED TEACHER GRANTS TO 6 DIFFERENT CAMPUSES.		
		· · · · · · · · · · · · · · · · · · ·	
			
4c	(Code) (Expenses \$	enue \$	
		<u> </u>	
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 123,866.		00 (22 : 2
		Form 9	90 (2012)

Form 990 (2012) • FOUNDATION
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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			v
	Part VI	11a		X
D	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	446	x	
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
А	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	110		A
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
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		Х
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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	<u> </u>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u>-</u> -
	complete Schedule G, Part III	19_		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L

Form 990 (2012) • FOUNDATION

Part IV Checklist of Required Schedules (continued)

		Form	990	(2012)
	Note. All Form 990 filers are required to complete Schedule O	_38_	X	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	_37	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Part V, line 1	34		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	Schedule N, Part II	32		<u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	If "Yes," complete Schedule N, Part I	31	<u></u>	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	contributions? If "Yes," complete Schedule M	30		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	 -		_ _
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
٠	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_x_
	instructions for applicable filing thresholds, conditions, and exceptions).			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			- 47
	of any of these persons? If "Yes," complete Schedule L, Part III	27		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			
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	26		х
ne .	Schedule L, Part I	25b		<u> </u>
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OFF		v
b				
L	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ECA	-	
∠Jä	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
-4	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24-		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
	. •	24a		
	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	04=		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
04-	Schedule J	_23_		<u> </u>
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u>X</u>	
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
			Yes	No

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Form 990 (2012) • FOUNDATION Part V • Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 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 Accounts b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c if "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did t	No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5b Did any taxable party notify the organization file Form 8886-T? c Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organization seal, exchange, or otherwise dispose of tangible personal property for which it was re	
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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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 Accounts 4a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 If "Yes," indicate the number of Forms 8282 filed during the year 6 If "Yes," indicate the number of Forms 8282 filed during the year 7 If Under the organization receive any f	
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e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	
9 Sponsoring organizations maintaining donor advised funds. a 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.	
a Initiation fees and capital contributions included on Part VIII, line 12	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from members or shareholders	
b Gross income from other sources (Do not net amounts due or paid to other sources against	
amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state?	
Note. See the instructions for additional information the organization must report on Schedule O	
b Enter the amount of reserves the organization is required to maintain by the states in which the	
organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand	
14a Did the organization receive any payments for indoor tanning services during the tax year?	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	X

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Form 990 (2012) • 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 24							
	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 24							
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		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5								
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses 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				
ь								
	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	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	ın Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13		X				
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		X				
b	Other officers or key employees of the organization	15b		Х				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le					
	for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website X Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d fınar	ncial					
	statements available to the public during the tax year.							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	-					
	JUDY OWENS - 254-215-2024							
	400 N. WALL STREET, BELTON, TX 76513							

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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		(C) (D) (E) Position In not check more than one ox, unless person is both an compensation compensation					(F) Estimated amount of		
	week (list any hours for related organizations below line)	Individual frustee or director	Institutional trustee	Officer Officer	recto	Highest compensated employee	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JOE PIRTLE	1.00	X						0.	0.	0.
DIRECTOR	1.00	_			\vdash	\vdash	\vdash	0.	0.	<u> </u>
(2) JAY TAGGART PRESIDENT	1.00	X		X				0.	0.	0.
(3) RON BROWN	1.00	-		**	_	\vdash		<u> </u>		.
DIRECTOR / VP EVENTS & MKTG	1.00	x		x				0.	0.	0.
(4) JUDY CAST	1.00					T		•		
DIRECTOR		x						0.	0.	0.
(5) DANNY DOSSMANN	1.00									
DIRECTOR		X						0.	0.	0.
(6) ROSCOE HARRISON	1.00									
DIRECTOR		X						0.	0.	0.
(7) SUSAN KINCANNON	1.00									
SUPERINTENDENT	ļ	X	ļ			ļ		0.	0.	0.
(8) ESTELLA MURRAY	1.00									
DIRECTOR		X			_			0.	0.	0.
(9) RANDY PITTENGER	1.00								_	
SCHOOL BOARD	ļ <u> </u>	X	ļ		<u> </u>	ļ	_	0.	0.	0.
(10) CYNDIE DAVIS	1.00	ļ			1					_
DIRECTOR	1 00	X		_	-	┼		0.	0.	0.
(11) KEVIN GOLDSTON	1.00	١.,			ĺ					
DIRECTOR	1 00	X			 	╁		0.	0.	0.
(12) MATT GUNTER	1.00	x		x				0.	0.	_
DIRECTOR / VP PROGRAMS	1.00	^	-	-	⊢	╁	╁	· · · · · · · · · · · · · · · · · · ·	<u> </u>	0.
(13) JANET LEIGH	1.00	x		X				0.	0.	0.
DIRECTOR /SECRETARY (14) ROWENA MILLER	1.00		<u> </u>	^		T	┢	<u> </u>	<u> </u>	·
DIRECTOR	1.00	x						0.	0.	0.
(15) STEPHANIE O'BANION	1.00					T	1		•	<u>~.</u>
DIRECTOR	100	\mathbf{x}						0.	0.	0.
(16) JEFF POTVIN	1.00									
DIRECTOR		x						0.	0.	0.
(17) MELISSA PRZYBYLSKI	1.00									
DIRECTOR / FINANCE		x		X				0.	0.	0.
232007 12-10-12								· · · · · · · · · · · · · · · · · · ·		Form 990 (2012)

FOUNDATION

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employee	es (continued)			
(A)	(B)	(C)						(D)	(E)		(F)	
Name and title Average			Position (do not check more than one					Reportable	Reportable	Estimated		ed
	hours per	box.	unle:	ss pe	rson	s bot	h an	compensation	compensation		amount of	
	week (list any	_	<u> </u>		1	1	.00,	from the	from related organizations	_	other ompensa:	ition
	hours for	direc				8		organization	(W-2/1099-MISC)	"	from th	
	related	tee or	ustee			ensati		(W-2/1099-MISC)	,	1	organızat	ion
	organizations	altrus	naltr		oyee	E CO					and relat	
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			'	organizati	ons
(18) BLAIR WILLIAMS	1.00	트	트	<u>-</u>	¥	王克	-			+		
DIRECTOR / VP DEVELOPMENT		x		x				0.	0.	,		0.
(19) MARY JANE WILLIAMS	1.00											
DIRECTOR		X						0.	0.			0.
(20) JUDY OWENS	1.00											
ADMINISTRATOR		X			<u> </u>			0.	0.	<u>.</u>		0.
(21) ROBERT JONES	1.00						ļ			Ì		
DIRECTOR		X	_			<u> </u>	_	0.	0.	- -		<u>0.</u>
(22) KENT LESTER	1.00	l										_
DIRECTOR	1 00	X						0.	0.	+		0.
(23) LESHIA TOLIVER	1.00	X					ŀ	0.	0.	1		0.
DIRECTOR	1.00	▞	-	-		╁	┢╌	0.	<u> </u>	╄-		<u> </u>
(24) WENDY FITZWATER	1.00	X			1			0.	0.			0.
DIRECTOR (25) RICKY RUIZ	1.00					 		-		+		
DIRECTOR		x						0.	0.	.		0.
										$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		
1b Sub-total								0.	0 .	_		0.
c Total from continuation sheets to Part V	II, Section A							0.	0.	_		<u>0.</u>
d Total (add lines 1b and 1c)						<u> </u>		0.	0.	•		<u>0.</u>
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wi	no r	eceived more than \$100	0,000 of reportable			^
compensation from the organization		-						 			Yes	0 No
3 Did the organization list any former officer	director or to	uste	e ka	av er	mple	vee	or	highest compensated e	mplovee on	Г	1.00	
line 1a? If "Yes," complete Schedule J for			0,	,,		,,,,	,	goc. copooc.cc			3	x
4 For any individual listed on line 1a, is the s			omp	ens	atıoı	n and	d ot	her compensation from	the organization			
and related organizations greater than \$15									-	L	4	X
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion	from	an	y uni	elat	ted organization or indiv	idual for services	-		
rendered to the organization? If "Yes," cor	nplete Schedu	le J	for s	<u>uch</u>	per	son					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest or										satı	on from	
the organization. Report compensation for	the calendar y	/ear	ena	ing v	with	or w	πnı	the organization's tax	year.		(C)	
(A) Name and busines:	s address	N	ON:	E				Description of s	services	Con	(C) npensatio	n
										_		
								<u> </u>			_	
								-				
		<u> </u>			-							
2 Total number of independent contractors	(including but i	not I	ımıte	ed to	the	se l	ste	d above) who received n	nore than			
\$100,000 of compensation from the organ	nization -					0						

Form 990 (2012) FOUNDATION
Part VIII Statement of Revenue

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Form **990** (2012)

			Check if Schedule O cont		onse i	to any question ii	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
ıts Its	1 :	а	Federated campaigns	12						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1k						
S, E		С	Fundraising events	10	;					
業別		d	Related organizations	10	1					
S,E			Government grants (contribut	tions) 1e	,					
P S			All other contributions, gifts, gran							
は			similar amounts not included abo		:	71,767.		ŀ		
들인		g	Noncash contributions included in lines	s 1a-1f \$						
a Co		h_	Total. Add lines 1a-1f			•	71,767.			
						Business Code				•
ķ	2	а								
ه کِ		b								_
Program Service Revenue										
		d								
		е								
		f	All other program service reve	enue						
		g	Total. Add lines 2a-2f							
	3		Investment income (including	dıvıdends,	ıntere	est, and				
			other similar amounts)			▶	22,278.			22,278.
	4		Income from investment of ta	exempt b	ond p	roceeds 🕨				
	5		Royalties			>				
				(ı) Rea	ıl	(II) Personal				
	6	а	Gross rents							
		b	Less: rental expenses							
		С	Rental income or (loss)							
		d	Net rental income or (loss)							
	7	а	Gross amount from sales of	(i) Securi		(II) Other				
			assets other than inventory	143,0	<u>40.</u>			ŀ		
		b	Less: cost or other basis							
			and sales expenses	129,1	02.					
		С	Gain or (loss)	13,9	<u>38.</u>			1		
		d	Net gain or (loss)				<u> 13,938.</u>			13,938.
e	8	а	Gross income from fundraising	ng events (n	ot					
Other Revenu			including \$	of						
ě			contributions reported on line	e 1c). See						
ē			Part IV, line 18		а					
퉏	L		Less direct expenses		b	7,091.			:	4
_			Net income or (loss) from fun				<u>57,574.</u>			57,574.
	9	а	Gross income from gaming a	ctivities. Se	9					
			Part IV, line 19		а					
	1		Less: direct expenses		b					
	1		Net income or (loss) from gar	_	es	>				
	10	а	Gross sales of inventory, less	s returns						
	ļ		and allowances		а					
			Less: cost of goods sold		b					
	<u> </u>	C	Net income or (loss) from sal	·	ory	<u> </u>				
	<u> </u>		Miscellaneous Reven	ue		Business Code				
	11	а					 	 		
		b								
		С						-		
	1	đ	All other revenue				· · · · · · · · · · · · · · · · · · ·			
		е	Total. Add lines 11a-11d				165.557.	0.	0.	93.790
	140		Total coverue See instructions				105 55/.	1 0.1	() .	4 4 7 4 ()

Form 990 (2012) FOUNDATION

Part IX Statement of Functional Expenses 74-2774248 Page 10

	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	38,815.	38,815.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	85,051.	85,051.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16	· · ·	-		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
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				
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			·	
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	200		200	
12	Advertising and promotion	300.		300.	
13	Office expenses	118.		118.	
14	Information technology	110.		110.	
15	Royalties Occupancy				
16 17	Travel	12.		12.	
18	Payments of travel or entertainment expenses	<u>+4 •</u>		+ 4 0 0	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,172.		3,172.	· · · · · · · · · · · · · · · · · · ·
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 0.)				
a					
b					
C					
d e	All other expenses	-			·
е 25	Total functional expenses. Add lines 1 through 24e	127,468.	123,866.	3,602.	0.
<u>26</u>	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)				

Form 990 (2012) Part X Balance Sheet

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	55,596.	2	95,043.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment, cost or other			
	1	basis Complete Part VI of Schedule D 10a			
	b	Less ⁻ accumulated depreciation 10b		10c	
	11	Investments · publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	645,229.	12	669,687.
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	700,825.	16	764,730.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	<u> </u>
	20	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
ş	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
abi		key employees, highest compensated employees, and disqualified persons.		1 1	
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities, Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
es		complete lines 27 through 29, and lines 33 and 34.		1 1	
auc	27	Unrestricted net assets	700,825.	27	764,730.
Bal	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
Ī	1	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
9		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<u>.</u>
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	· · · · · · · · · · · · · · · · · · ·
Z	33	Total net assets or fund balances	700,825.	33	<u>764,730.</u>
	34	Total liabilities and net assets/fund balances	700,825.	34	<u>764,730.</u>

<u>-orm</u>	990 (2012) · FOUNDATION	/4-4//	4440	_Pag	1e 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u> </u>	, 5	<u>57.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	127	, 4	<u>68.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	38	, 0	<u>89.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	700	, 8:	25.
5	Net unrealized gains (losses) on investments	5	25	8,8	<u> 16.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain 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	764	. , 7	<u>30.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				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	• O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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				
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 separa	te basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	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				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2012)

232012 12-10-12

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 **Employer identification number** THE BELTON EDUCATIONAL ENRICHMENT 74-2774248 FOUNDATION Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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, 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) 8 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 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III · Non-functionally integrated b Type II 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 No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (vi) Is the organization in col. (i) organized in the U.S.? (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary in col. (i) listed in your organization in col. (described on lines 1-9) support organization (i) of your support? governing document? above or IRC section (see instructions)) Yes No Yes Yes

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support				•		
ale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	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	**************************************		†	<u> </u>		
	tion B. Total Support		<u> </u>	·		·	
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4						,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (, , , , , ,	•	column (f))		14	%
	Public support percentage from 2011					15	%
16a	33 1/3% support test - 2012. If the	_			14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies						لــا ◄
t	33 1/3% support test - 2011. If the				d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual				10.10 10		P LJ
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					π iv now the organ	nization
-	meets the "facts-and-circumstances"					47a and to - 45	100/
t	10% -facts-and-circumstances tes						
	more, and if the organization meets the						,
4-	organization meets the "facts-and-circ						
18	Private foundation. If the organization	on alla not check a	DOX ON IINE 13, 16	oa, 100, 1/a, or 1/	D' CLIECK IUR DOX S	and see instruction	S 🖊

Schedule A (Form 990 or 990-EZ) 2012 FOUNDATION 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

800	qualify under the tests listed b	elow, please comp	olete Part II)	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
			-				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				_		
	include any "unusual grants ")	103,543.	183,179.	97,729.	52,992.	<u>71,767.</u>	509,210.
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			2,830.	16,550.	64,665.	84,045.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-				-		
	zation'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	103,543.	183,179.	100,559.	69.542.	136,432.	593,255.
	Amounts included on lines 1, 2, and					200,2020	37372331
	3 received from disqualified persons						0.
b	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						Ŏ.
	Public support (Subtract line 7c from line 6)						593,255.
	ction B. Total Support	-			· · · · · · · · · · · · · · · · · · ·	·	
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	103,543.	183,179.		69,542.	136,432.	593,255.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	14,261.					134,921.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	14,261.	20,673.	31,025.	32,746.	36,216.	134,921.
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)		203,852.				728,176.
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organız	zation,
	check this box and stop here						▶ □
Se	ction C. Computation of Publ	ic Support Pe	rcentage				· · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2012 (line 8, column (f) d	ıvıded by lıne 13, d	column (f))		15	81.47 %
<u>16</u>						16	82 . 19 %
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)12 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	<u> 18.53 %</u>
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	<u>17.81 %</u>
198	33 1/3% support tests - 2012. If the	organization did r	ot check the box	on line 14, and line	15 is more than 3	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	and stop here. The	organization qual	ifies as a publicly s	supported organiz	ation	$\triangleright \mathbf{X}$
k	33 1/3% support tests - 2011. If the	organization did r	not check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organization	ightharpoons
~	Private foundation. If the organization					•	

74-2774248 Page 3

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Inspection

Name of the organization

THE BELTON EDUCATIONAL ENRICHMENT FOINDATTON

Employer identification number 71-2771218

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
			(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		,
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part IV	, line 7
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historica	ally important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of a c	onservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
٥	Number of conservation easements on a certified historic str	• •	2c
a	Number of conservation easements included in (c) acquired	after 6/17/06, and not on a historic structure	2d
3	listed in the National Register Number of conservation easements modified, transferred, re	leased extinguished or terminated by the orga	L
3	year	neased, extinguished, or terminated by the orga	anzation during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the y	rear > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)((B)(I)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the o	rganization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	•	
	historical treasures, or other similar assets held for public ex		f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		h-t
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public so	ervice, provide the following amounts
	relating to these items:		• •
	(i) Revenues included in Form 990, Part VIII, line 1		\$
^	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre	pasures or other similar assets for financial cain	▶ \$
2	the following amounts required to be reported under SFAS 1		, provide
_	Revenues included in Form 990, Part VIII, line 1	To vice soo, relating to these items.	▶ \$
d	Assats included in Form 990, Part Y		•

	dule D (Form 990) 2012 FOUNDAT.							Page 2				
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simil	ar Asse	ts (contin	ued)				
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a s	ignificant	use of its	collection	items				
	(check all that apply).											
а	Public exhibition	d	Loan or excl	nange programs				•				
b	Scholarly research	е	Other									
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's exe	mpt purpo	se in Parl	XIII.					
5	During the year, did the organization solicit of	=	-	-								
_	to be sold to raise funds rather than to be ma						Yes	☐ No				
Par	t IV Escrow and Custodial Arran				Form 990	Part IV 1		1,10				
	reported an amount on Form 990, Par		g			,	0, 0.					
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other assets no	tincluded							
	on Form 990, Part X?		,				Yes	□ No				
h	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:				_ 163					
	Tes, explain the arrangement in tart Air o	and complete the for	iowing table.				Amount					
•	c Beginning balance											
	Additions during the year											
d	Distributions during the year				1d							
e	· .				1e							
7	Ending balance	orm 000 Bort V line	010		1f		7 ٧					
	•						Yes	⊢ No				
Par	If "Yes," explain the arrangement in Part XIII											
rai	rt V Endowment Funds. Complete in	(a) Current year	(b) Prior year	(c) Two years back		5	4.3 50.00					
_	Danis and a street belongs	ears back		years back								
	,	700,825,	720,683,	672,860.		55,853.		531,037, 103,543,				
D	b Contributions 136,432, 52,992, 100,559, 183,179, c Net investment earnings, gains, and losses 62,032, 32,746, 66,256, 17,137,											
С	Net investment earnings, gains, and losses	<u>17,137.</u>		23,115.								
d	' '		77,475.		99.546.							
е	Other expenditures for facilities											
	and programs	6,601.		3,452,								
f	Administrative expenses	4.092.	8,263.	8,402,	5,831.			2,296.				
g	End of year balance	764,730.	700 825.	720,683.	6	72.860.		<u>555,853.</u>				
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1g, column (a	i)) held as								
а	Board designated or quasi-endowment	100.00	_%									
b	Permanent endowment >	%										
C	Temporarily restricted endowment ▶	%										
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%										
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	zation	_					
	by:							Yes No				
	(i) unrelated organizations						3a(i)	X				
	(ii) related organizations						3a(ii)	X_				
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule R?				3b					
_4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.									
Pai	rt VI Land, Buildings, and Equipm	nent. See Form 990	, Part X, line 10.									
-	Description of property	(a) Cost or of	ther (b) Cost	or other (c) A	ccumulate	ed	(d) Book	value				
		basis (investm	' '		preciation		- •					
1a	Land											
	Buildings				· · · · · · · · · · · · · · · · · · ·							
	Leasehold improvements											
ď	Equipment											
	Other											
	L Add lines 1a through 1e (Column (d) must e	ocual Form 990 Part	X column (R) line 1	0(c))	<u>*</u>			0				

Schedule D (Form 990) 2012

Part VIII Investments - Other Securities. See Form 990, Part X, Inno 12	Schedule D (Form 990) 2012 FOUNDATION		7.	1-2774248 Page 3
(1) Financial derivatives (2) Closely-hold equity interests (3) Other (A) MUTUAL FUNDS (147,490. END-OF-YEAR MARKET VALUE (B) STOCKS 378,454. END-OF-YEAR MARKET VALUE (C) BONDS (143,743. END-OF-YEAR MARKET VALUE (C) (D) (D) (E) (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G				
(2) Closely-held equity interests (3) Other (4) MUTUAL FUNDS 147,490. END-OF-YEAR MARKET VALUE (5) STOCKS 378,454. END-OF-YEAR MARKET VALUE (6) ENDS 143,743. END-OF-YEAR MARKET VALUE (7) (6) (7) (7) (8) (9) (10		(b) Book value	(c) Method of valuation. Cost or er	nd-of-year market value
(8) Other (A) MUTUAL FUNDS 147,490. END-OF-YEAR MARKET VALUE (B) STOCKS 378,454. END-OF-YEAR MARKET VALUE (C) BONDS 143,743. END-OF-YEAR MARKET VALUE (D) (E) (E) (F) (G) (F) (G) (F) (G) (F) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	· · · · -			
(A) MUTUAL FUNDS	· · · · · · · · · · · · · · · · · · ·			
(S) STOCKS 143,743. END-OF-YEAR MARKET VALUE (C) BONDS 143,743. END-OF-YEAR MARKET VALUE (D) (E) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F		147 400	END OF VEAD MARKET	B 173 I III
(C) BONDS 143,743 END-OF-YEAR MARKET VALUE (D) (E) (F) (F)				
(E) (E) (F) (G) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F				
(F) (G) (F) (G) (H) (D) (D) (D) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E		143,743.	END-OF-TEAR MARKE	I ANTIGE
(F) (G) (P1) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D				
(G) (th) must equal Form 990, Part X, cot. (B) line 12.) ► 669 , 687 . Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (c) Method of valuation. Cost or end-of-year market value (1) (2) (3) (4) (4) (5) (6) (6) (7) (7) (8) (9) (10) (10) (10) must equal Form 990, Part X, cot. (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (c) Book value (d) Book value (d) Book value (e) Book value (f) Federal mome (f) Book value (f) Federal mome (f) Book value (f) Federal mome (f) Federal mome (f) Book value (f) Federal mome (f) Federa			***	
(+1) (1) 10 10 10 10 10 10 10 10 10 10 10 10 10				
Total, (Col. (t)) must equal Form 990, Part X, col. (8) line 12.) 669, 687.				
Part VIII Investments - Program Related. See Form 990, Part X, inne 13.				· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related. See Form 990, Part X, line 13.		669,687.		
(a) Description of investment type (b) Book value (c) Method of valuation. Cost or end-of-year market value (f)				
(2) (3) (4) (5) (6) (6) (7) (7) (8) (9) (10		(b) Book value		nd-of-year market value
(3) (4) (5) (6) (7) (8) (9) (10) (10) (a) Description (b) Book value Part IX Other Assets. See Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (b) Book value (c) (3) (d) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (6)	(1)			
(4) (5) (6) (7) (8) (9) (10) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ [Part IX] Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) [Part X] Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(2)			
(5) (6) (7) (8) (9) (10) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)▶ Part IX Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(3)			
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(7) (8) (9) (10) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part X	(5)			
(8) (9) (10) Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.1▶ Part IX Other Assets. See Form 990, Part X, line 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(6)	<u> </u>		
(9) (10) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part X Other Assets. See Form 990, Part X, tine 15 (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal incorne taxes (2) (3) (4) (5) (6) (7) (8)	(7)			
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Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►				
Part IX Other Assets. See Form 990, Part X, Inne 15 (a) Description (b) Book value				
(a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, tine 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				
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(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)		· · · · · · · · · · · · · · · · · · ·		
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(6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				<u> </u>
(7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	(9)			
Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value	(10)			
1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				<u> </u>
(1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)				
(2) (3) (4) (5) (6) (7) (8)	1. (a) Description of liability	(t	o) Book value	
(3) (4) (5) (6) (7) (8)	(1) Federal income taxes			
(4) (5) (6) (7) (8)	(2)			
(5) (6) (7) (8)	(3)			
(6) (7) (8)				
(7) (8)		 	 ·	
(8)				
	(9)			
(10)				
(11) Tetal (Column (h) must equal Form 990, Part Y, col. (P) line 25.)		25.1		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's			anization's financial statements that "	anorts the organization's
liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII	· · · · · · · · · · · · · · · · · · ·			· —

Sche	dule D (Form 990) 2012 FOUNDATION			774248	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Re	venue per Return		
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5		
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Ex	xpenses per Retur	n	
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3	<u></u>	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b		4c		<u>-</u>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
Pa	rt XIII Supplemental Information				
X, lın	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to RT V, LINE 4: PROVIDE GRANTS AND SCHOLARSH	provide any ad	ditional information		4; Part
BE	TON INDEPENDENT SCHOOL DISTRICT.		<u> </u>		
					
		<u> </u>		_ .	
			Cabadi	ule D (Form 0	00) 2012

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

2012

Open To Public Inspection

Name of the organization

THE BELTON EDUCATIONAL ENRICHMENT

Employer identification number

FOUNDATION 74-2774248

Part I Fundraising Activities required to complete this part	Complete if the organization answet	red "Y	'es" to	Form 990, Part IV, I	ne 17 Form 990-EZ	filers are not					
Indicate whether the organization raised funds through any of the following activities. Check all that apply a											
(i) Name and address of individual or entity (fundraiser)				(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization					
		Yes	No		-						
					-						
											
Total			•								
 List all states in which the organization or licensing. 	on is registered or licensed to solicit	contrik	outions	s or has been notified	d it is exempt from re	egistration					
		-									
	<u>,,,</u>		_								
	· · · · · · · · · · · · · · · · · · ·										
											
		_									

THE BELTON EDUCATIONAL ENRICHMENT Schedule G (Form 990 or 990-EZ) 2012 FOUNDATION 74-2774248 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events TAILGATE NONE GOLF (add col. (a) through TOURNAMENT FUNDRAISER col. (c)) (total number) (event type) (event type) 64,665. 23,215 41,450 Gross receipts 2 Less. Contributions 23,215. 41,450 64,665. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Rent/facility costs 1,500 1,500. Food and beverages Entertainment 5,088. 503. 5,591. Other direct expenses 7,091 10 Direct expense summary. Add lines 4 through 9 in column (d) 57,574. 11 Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (d) Total gaming (add (b) Pull tabs/instant (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes **Direct Expenses** Noncash prizes Rent/facility costs Other direct expenses Yes % Yes % Yes % Volunteer labor No

	7 Direct expense summary Add lines 2 through 5 in column (d)	•		
	8 Net gaming income summary. Combine line 1, column d, and line 7			
а	Enter the state(s) in which the organization operates gaming activities. Is the organization licensed to operate gaming activities in each of these states?		Yes	□ No
	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?		Yes	
	of the organization's gaming ilcenses revoked, suspended on terminated during the tax year?	·		
3208	82 01-07-13	Schedule G (For	rm 990 or 990)-EZ) 2012

THE BELTON EDUCATIONAL ENRICHMENT Schedule G (Form 990 or 990-EZ) 2012 FOUNDATION Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _ Yes No Indicate the percentage of gaming activity operated in: a The organization's facility 13a **b** An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Address > 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party > \$_ c If "Yes," enter name and address of the third party. Name > Gaming manager information. Name > Gaming manager compensation > \$ Description of services provided > Director/officer Employee Independent contractor 17 Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE I (Form 990)

Department of the Treasury internal Revenue Service

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

Open to Public Inspection

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

▶ Attach to Form 990.

OMB No 1545-0047

Name of the organization THE BELTON FOLINDATION	EDUCATI	THE BELTON EDUCATIONAL ENRICHMENT FOUNDATION	MEN'T.				Employer identification number $74-2774248$
Part I General Information on Grants and Assistance	Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	sistance, and the selec	
criteria used to award the grants or assistance?	ınce?			!			X Yes No
핡	dures for monit	toring the use of grant	funds in the Unite	d States			
Part II 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	vernments and	d Organizations in the	• United States. C	complete if the orga	anization answered "\	res" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated	,000 Part II can	be duplicated if additi	if additional space is needed	Jed.	(A) Mathad of		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPARTA ELEMENTARY SCHOOL							
1800 SPARTA ROAD							IPAD, IWORK, ILEARN,
BELTON, TX 76513			12,634.	0			IACHEIVE, ISUCCEED
SOUTHWEST ELEMENTARY SCHOOL							
611 SAUNDERS ST							
BELTON, TX 76513			3,416.	0			IPAD INTERVENTION
LEON HEIGHTS ELEMENTARY SCHOOL							GOOGLE CHROMEBOOKS FOR
8818 TARVER DR						-	READING, WRITING &
TEMPLE, TX 76502		:	7,214.	0			KEYBOARDING
LAKE BELTON MIDDLE SCHOOL							
1704 SPARTA ROAD							THE APPLES OF OUR IPADS;
BELTON, TX 76513			6,405,	0			SPEC, ED STUDENTS
LAKEWOOD ELEMENTARY SCHOOL							
11200 FM 2305							SPEECH MELODY AND READING
BELTON, TX 76513			5,078,	0.		:	COMPREHENSION
PIRTLE ELEMENTARY							
714 S PEA RIDGE				-			IPADS MINIS TO INCREASE
TEMPLE, TX 76502			2,268.	0			LITERACY
	government or	ganizations listed in th	ed in the line 1 table				7.
	sted in the line						
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	ee the instruct	ions for Form 990.					Schedule i (Form 990) (2012)

ENRICHMENT
EDUCATIONAL
BELTON
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Page 1

CONTINUTING EDUCATION (h) Purpose of grant or assistance 74-2774248 (g) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Ö 1,800, (d) Amount of cash grant (c) iRC section if applicable (p) EIN FOUNDATION (a) Name and address of organization or government BISD CONTINUING EDUCATION 400 N WALL STREET Schedule I (Form 990) BELTON, TX 76513 Schedule I (Form 990)

74-2774248

Schedule I (Form 990) (2012) FOUNDATION

Part III 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.

(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
COLLEGE SCHOLARSHIPS TO GRADUATING STUDENTS OF THE BELTON INDEPENDENT SCHOOL DISTRICT.	995	85,051,	0		
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	required in Part I, I	ine 2, Part III, columi	(b), and any other additional inf	vrmation
I, LINE 2: GRANT	PLICA	ARE R	REVIEWED BY		
M NOTT	HE E	LSD	킾	AND	
CTION DEPARTMENT AND KANKED	UNDEK A	FOINT SYSTEM.	EM. GKANIS	AKE AWAKUEU	
BASED ON THIS ORDER AND ON THE AVA	AVAILABILITY	Y OF FUNDS	•		

Schedule I (Form 990) (2012)

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.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE BELTON EDUCATIONAL ENRICHMENT

Employer identification number 7.4 - 2.7.7.4.2.4.8

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FORM 9	990,	PART	I, L	INE	1, D	ESC	RIPT	ON C	F O	RGAN	IZAT	ION	MISS	SION:			
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