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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 private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013Open to Public
Inspection**A** For the 2013 calendar year, or tax year beginning and ending**B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**BEAUMONT FOUNDATION OF AMERICA**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

470 ORLEANS STREET, FIRST FLOOR

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

BEAUMONT, TX 77701**F** Name and address of principal officer:**SAME AS ABOVE****D** Employer identification number**76-0650506****E** Telephone number**409-838-1812****G** Gross receipts \$ **164,160.****H(a)** Is this a group return

for subordinates?

☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (**4**) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **bmtfoundation.com****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **2000** **M** State of legal domicile: **TX****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	3
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	6
	6 Total number of volunteers (estimate if necessary)	6	0
	7a 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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	106,685.	164,160.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	106,685.	164,160.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,746,830.	5,321,102.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,326,195.	1,191,204.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	405,126.	731,267.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,478,151.	7,243,573.	
19 Revenue less expenses. Subtract line 18 from line 12	-8,371,466.	-7,079,413.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	240,871,142.	234,603,450.
	22 Net assets or fund balances. Subtract line 21 from line 20	4,021,629.	4,833,350.
		236,849,513.	229,770,100.

Part II Signature Block

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

Sign Here ▶ Signature of officer **W. Frank Newton** Date **3/28/2014**
 ▶ Type or print name and title **W. FRANK NEWTON PRESIDENT & CEO**

Paid Preparer Use Only
 Print/Type preparer's name **Jana Uribe** Preparer's signature **[Signature]** Date **3/19/14** Check ☐ if self-employed PTIN **P01232792**
 Firm's name ▶ **Pollans & Cohen, P.C.** Firm's EIN ▶ **76-0699045**
 Firm's address ▶ **470 Orleans, Suite 810** Phone no. **409-832-7400**
Beaumont TX, TX 77701

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ NoAPR 11 2014
SCANNED

Part III Statement of Program Service Accomplishments

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

☒ X

- 1 Briefly describe the organization's mission:

SEE SCHEDULE O

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code) (Expenses \$ 1,711,732. including grants of \$ 1,711,732.) (Revenue \$)
SEE SCHEDULE O4b (Code) (Expenses \$ 1,479,000. including grants of \$ 1,479,000.) (Revenue \$)
SEE SCHEDULE O4c (Code) (Expenses \$ 1,020,000. including grants of \$ 1,020,000.) (Revenue \$)
SEE SCHEDULE O

- 4d Other program services (Describe in Schedule O.)

(Expenses \$ 2,778,858. including grants of \$ 2,778,858.) (Revenue \$)4e Total program service expenses **6,989,590.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c 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 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? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	34	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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	6	
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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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)?		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 Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
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?		X
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
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?		
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?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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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 or note to any line in this Part VI ☐**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		3												
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		3												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2										X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, 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 Did the organization become aware during the year of a significant diversion of the organization's assets?						5								X
6 Did the organization have members or stockholders?							6							X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								7a						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									7b					X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										8a			X	
b Each committee with authority to act on behalf of the governing body?											8b			X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O												9		X

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

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?															X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?															
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a											X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					12a									X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						12b								X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done							12c							X	
13 Did the organization have a written whistleblower policy?								13						X	
14 Did the organization have a written document retention and destruction policy?									14					X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?															
a The organization's CEO, Executive Director, or top management official										15a				X	
b Other officers or key employees of the organization											15b			X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?												16a			X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?													16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **None**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROBERT CRAFT - (409) 838-1812**
470 ORLEANS, FIRST FLOOR, BEAUMONT, TX 77701

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

[illegible]

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>	Section 179D
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(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total								847,647.	0.	134,760.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								847,647.	0.	134,760.

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

4

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

Section B. Independent Contractors

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

the organization. Report compensation for the calendar year ending with or within the organization's last year.		
(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►		0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f					
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		164,160.	164,160.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue		Business Code			
	11 a					
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		164,160.	164,160.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 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	5,297,860.	5,297,860.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	23,242.	23,242.		
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	906,844.	749,144.	157,700.	
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	35,538.	29,357.	6,181.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	82,568.	68,185.	14,383.	
9 Other employee benefits	115,178.	95,114.	20,064.	
10 Payroll taxes	51,076.	42,178.	8,898.	
11 Fees for services (non-employees):				
a Management				
b Legal	144.	75.	69.	
c Accounting	14,750.	7,715.	7,035.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	343,181.	343,181.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	12,296.	11,066.	1,230.	
14 Information technology	26,603.	23,942.	2,661.	
15 Royalties				
16 Occupancy	76,375.	68,429.	7,946.	
17 Travel	5,259.	2,104.	3,155.	
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	46,184.	41,566.	4,618.	
23 Insurance	91,602.	82,442.	9,160.	
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.)				
a MISCELLANEOUS	30,947.	27,852.	3,095.	
b CONTRACT LABOR	23,728.	21,890.	1,838.	
c TELEPHONE	22,480.	20,232.	2,248.	
d PRINTING AND REPRODUCTI	20,130.	18,117.	2,013.	
e All other expenses	17,588.	15,899.	1,689.	
25 Total functional expenses. Add lines 1 through 24e	7,243,573.	6,989,590.	253,983.	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)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	554,336.	1	5,932,323.
	2 Savings and temporary cash investments	240,141,650.	2	228,543,739.
	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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	65,413.	9	57,064.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 722,106.		
	b Less: accumulated depreciation	10b 653,777.	10c	68,329.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	250.	15	1,995.
16 Total assets. Add lines 1 through 15 (must equal line 34)	240,871,142.	16	234,603,450.	
Liabilities	17 Accounts payable and accrued expenses	117,451.	17	132,393.
	18 Grants payable	3,904,178.	18	4,700,957.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 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	4,021,629.	26	4,833,350.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets			27	
28 Temporarily restricted net assets			28	
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117 (ASC 958), check here ☒ and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds		0.	30	0.
31 Paid-in or capital surplus, or land, building, or equipment fund		0.	31	0.
32 Retained earnings, endowment, accumulated income, or other funds		236,849,513.	32	229,770,100.
33 Total net assets or fund balances	236,849,513.	33	229,770,100.	
34 Total liabilities and net assets/fund balances	240,871,142.	34	234,603,450.	

Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	164,160.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,243,573.
3	Revenue less expenses Subtract line 2 from line 1	3	-7,079,413.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	236,849,513.
5	Net unrealized gains (losses) on investments	5	
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	229,770,100.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1 Accounting method used to prepare the Form 990 ☐ 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☒ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2013)

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.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013Open to Public
Inspection

Name of the organization

BEAUMONT FOUNDATION OF AMERICA

Employer identification number

76-0650506

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(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 funds 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements	133,653.		95,647.	38,006.
d Equipment	588,453.		558,130.	30,323.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 68,329.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Schedule D (Form 990) 2013

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

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

1	Total revenue, gains, and other support per audited financial statements		1	164,160.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	164,160.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	164,160.

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

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

1	Total expenses and losses per audited financial statements		1	7,243,573.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	7,243,573.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	7,243,573.

Part XIII Supplemental Information.

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

Part 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 *
SEE ATTACHED SPREADSHEET	0	23,242.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.**Explanation: SEE ATTACHED SPREADSHEET**

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

BEAUMONT FOUNDATION OF AMERICA

Employer identification number

76-0650506

Part I Questions Regarding Compensation

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

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☒ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

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

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

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

☒ Compensation committee

☒ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

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

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

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

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

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

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

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

Schedule J (Form 990) 2013

Part III Supplemental Information

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

PART 1, LINE 1A - RELEVANT INFORMATION REGARDING COMPENSATION BENEFITS

Explanation: PART III - OTHER ADDITIONAL INFORMATION

EMPLOYEES MAY ELECT TO PARTICIPATE IN HEALTH AND WELLNESS CENTER

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Employer identification number
76-0650506

BEAUMONT FOUNDATION OF AMERICA

FORM 990 - ORGANIZATION'S MISSION

Explanation: The Beaumont Foundation of America awards grants to bring about civic betterment and social improvements by providing assistance to the poor, underserved, and underprivileged. We have five major program areas - Children & Youth, Education, Healthcare, Social Services and Children of Fallen Heroes.

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

Explanation: Education programs include grants to support exceptional K-12 teachers, grants to provide scholarships to first generation underserved university students, and grants and endowments for graduate programs, particularly in law. Special programs are also organized around increasing opportunities for underserved students. The primary focus on K-12 is in recognizing and supporting outstanding teachers through \$10,000 per teacher grants in Southeast Texas, East Texas, Lubbock County, and Lea County, New Mexico. Beaumont Foundation college scholarships follow well established formats at multiple universities to provide student scholarships and to endow leadership, administrative, and faculty positions. The Foundation supports a number of universities, with special emphasis on Lamar University here in Beaumont. One program is, unlike those previously described, unconventional. This program is the legislative internship program, which takes students from multiple universities and provides them a semester at the Texas Legislature. The Beaumont Foundation is closely monitoring this program.

Name of the organization

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FORM 990, PART III, LINE 4B - SECOND ACHIEVEMENT

Explanation: Social Services grants support basic needs, such as food, clothing, shelter, and other aid for indigent, low income, and other underserved populations. The primary area is food to the poor through organized food bank programs. Grants to enhance technology, economies of scale and new partnerships have enabled food banks to meet increased demand for food to those most in need. Special attention has been given to children through Kids Cafe and Backpack programs and to the rural poor through Rural Pantry programs. The remaining grants in this area are fund awards for emergency care for at risk populations served by churches.

FORM 990, PART III, LINE 4C - THIRD ACHIEVEMENT

Explanation: Healthcare Programs fall into three main categories of improved access to health care for the underserved. One is an outreach program to Native Americans in western states. This endeavor, conducted as part of the Huntsman Cancer Outreach Program, seeks to enlist tribal elders in encouraging screening and treatment. Outreach is conducted by healthcare workers who are Native American or familiar with customs of potential clients. The second is a community clinic which helps create treating physician homes for underserved families and individuals. Finally, the Beaumont Foundation made a grant to build a facility to house families of out of town patients. A medical treatment tertiary care hospital often serves patients who are not near their homes.

Unless the families have a place to stay, proper support cannot be

Name of the organization

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provided to sick family members.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

Explanation: The final two program areas for the Foundation are Children and Youth and the Fallen Heroes Program. Children and Youth consists primarily of providing clothing for children in foster care programs. Children in foster care seldom have new school clothes, as budgets are so sparse that new school clothes become a luxury. But for children already facing nearly insurmountable problems of identity and worth, peer pressure, and ridicule based on old or inappropriate clothing can be devastating. Beaumont Foundation grants work in close coordination with the major foster care providers to help overcome this problem.

Finally, our Children of Fallen Heroes Program is a legacy of our original mission to provide technology grants. This program provides laptop computers to dependent children and spouses of military personnel who gave their lives in Iraq or Afghanistan.

FORM 990, PART VI, LINE 2:

Explanation: Chairman Reaud and Director Huntsman are both directors of Huntsman Corp.

Form 990, Part VI, line 11:

Explanation: The Form 990 is prepared by our outside auditors under the direction of Robert Craft, and reviewed by President Newton, and then reviewed by the Board of Directors prior to filling.

Name of the organization

BEAUMONT FOUNDATION OF AMERICA

Employer identification number

76-0650506

FORM 990, PART VI, LINE 12C:

Explanation: With only 6 employees and 3 Directors, we are a small organization. Regular monitoring and enforcement of the conflict of interest policy is part of normal operations. Annual review of the policy is also performed.

FORM 990, PART VI, LINE 15A:

Explanation: The Foundation uses a nationally recognized compensation consultant, the Hay Group, to determine an appropriate range of compensation for officers and other employees (the Directors serve without compensation). The performance of the officers and other employees is annually reviewed by the Executive Performance and Compensation Committee of the Board of Directors. The compensation is then voted upon by the Board of Directors.

Form 990, Part VI, Line 15b:

Explanation: See explanation for Form 990, Part VI, Line 15a above.

Form 990, Part VI, line 19:

Explanation: The Foundation makes its Determination Letter, Form 990s, audits, governing documents, and conflicts of interest policy available to the public upon request by phone, fax, email, letter, or in person.

	App ID #	Name of Entity	GrantAmount	TaxID	Street Address	City	State	Zip
C	C13000016	Bicycles & Bibles Program/Academy	\$25,000	Various		Beaumont	TX	77701
C	C13000043	Buckner Foundation	\$133,500	75-2125945	600 North Pearl Street, Suite 2260	Dallas	TX	75201
C	C13000044	Cal Farley's	\$159,300	75-0808768	P O Box 1890	Amarillo	TX	79174-0001
C	C13000045	DePelchin Children's Center	\$117,000	76-0318667	4950 Memorial Drive	Houston	TX	77007
C	C13000046	Lutheran Social Services of the South, Inc	\$518,400	74-1109745	P O Box 140767	Austin	TX	78714-0767
C	C13000047	Pleasant Hills Children's Home	\$13,200	71-1662544	P O Box 1177	Fairfield	TX	75840
C	C13000048	The Children's Shelter - San Antonio	\$89,400	74-1109560	2939 W Woodlawn	San Antonio	TX	78228
			\$1,055,800					
E	E13000001	Ranney School	\$7,500	13-5613797	235 Hope Road	Tinton Falls	NJ	7724
E	E13000002	Lamar University	\$10,500	74-6000298	P O Box 10011	Beaumont	TX	77710
E	E13000003	Lamar University	\$10,500	74-6000298	P O Box 10011	Beaumont	TX	77710
E	E13000004	Junior Achievement of SW Louisiana	\$10,000	74-1153957	P O Box 282	Sulphur	LA	70664
E	E13000005	Al Saint's Episcopal School	\$9,500	74-6021045	4108 Delaware	Beaumont	TX	77706
E	E13000007	Lamar University/TSUS Foundation	\$100,000	74-6000298	P O Box 10011	Beaumont	TX	77710
E	E13000008	Texas Tech Foundation - West Texas Legal Legends	\$57,232	75-6043842	Development Building, 15th and Akron	Lubbock	TX	79409
E	E13000009	Southeast Texas Excellence in Education	\$190,000	Various				
E	E13000010	Lubbock Area Excellence in Education	\$85,000	Various				
E	E13000011	Southeast New Mexico Excellence in Education	\$45,000	Various				
E	E13000012	East Texas Excellence in Education	\$45,000	Various				
E	E13000013	Lamar Institute of Technology	\$40,000	76-0694136		Beaumont	TX	77705
E	E13000014	Stephen F. Austin State University	\$110,000	75-6002514	SFA Station, P O Box 13052	Nacogdoches	TX	75962-3052
E	E13000015	Laptops for Scholarship Recipients	\$11,000	Various				
E	E13000019	Sabine Area Career Center	\$40,000	78-2878962	P O Box 894	PineLand	TX	75968
E	E13000049	Al Saint's Episcopal School	\$20,000	74-6021045	4108 Delaware	Beaumont	TX	77706
E	E13000054	Monsignor Kelly Catholic HS	\$5,200	74-1395996	5950 Kelly Drive	Beaumont	TX	77707-3599
E	E13000055	Monsignor Kelly Catholic High School	\$105,000	74-1395996	5950 Kelly Drive	Beaumont	TX	77707-3599
E	E13000061	Univ of Houston	\$10,000		4800 Calhoun Road	Houston	TX	77004
E	E13000062	Univ of San Francisco	\$3,600	94-1156628	2130 Fulton Street	San Francisco	CA	94117
E	E13000063	University of Arkansas College of Nursing	\$40,000	71-6056774	4301 W Markham, Slot 529	Little Rock	AR	72205
E	E13000064	Low Family College Scholarship	\$37,500		P O Box 30016	College Station	TX	77842
E	E13000065	Monsignor Kelly Catholic High School - Scholarship Assistance and Novient Software	\$12,500	74-1395996	5950 Kelly Drive	Beaumont	TX	77707-3599
E	E13000066	Texas Tech Foundation - West Texas Legal Legends	\$250,000	75-6043842	Development Building, 15th and Akron	Lubbock	TX	79409
E	E13000067	Lamar University - KVLU Public Radio	\$47,000	74-6000298	P O Box 10064	Beaumont	TX	77710
E	E13000068	Washington and Lee University	\$25,000	54-0505977	204 W Washington Street	Lexington	VA	24450
E	E13000069	Southern Methodist University	\$25,000	75-0800689	P O Box 750281	Dallas	TX	75275-0281
E	E13000070	Lamar University	\$153,000	74-6000298	P O Box 10064	Beaumont	TX	77710
E	E13000073	Washington and Lee University	\$25,000	54-0505977	204 W Washington Street	Lexington	VA	24450
E	E13000075	National Library for the Study of George Washington	\$25,000	54-0564701	3200 Mount Vernon Memorial Highway	Mount Vernon	VA	22121
E	E13000077	Utah State University	\$150,000	87-6000528	1400 Old Main Hill	Logan	UT	84322
		Designation to be Determined	\$6,700	Various				
			\$1,711,732					
H	C13000006	Huntsman Cancer Foundation	\$1,000,000	87-0541293	500 Huntsman Way	Salt Lake City	UT	84108
H	C13000018	Beaumont Family Shelter	\$20,000	26-1990505	3120 College Street	Beaumont	TX	77701
			\$1,020,000					
S	C13000017	Nutrition and Services for Seniors	\$60,000	76-0074137	4590 Concord	Beaumont	TX	77703
S	C13000020	Some Other Place	\$75,000	74-2103171	P O Box 843	Beaumont	TX	77704-0843
S	C13000021	Brazos Valley Food Bank	\$30,000	74-2380446	P O Box 74	Bryan	TX	77806
S	C13000022	Capital Area Food Bank of Texas	\$100,000	74-2217350	8201 S Congress Ave	Austin	TX	78745
S	C13000023	Cintas of Waco	\$30,000	74-1711575	300 S 15th	Waco	TX	76701
S	C13000024	Concho Valley Regional Food Bank	\$30,000	75-1897032	P O Box 1207	San Angelo	TX	76902
S	C13000025	East Texas Food Bank	\$50,000	75-2222686	P O Box 6974	Tyler	TX	75711-6974
S	C13000026	El Pasoans Fighting Hunger	\$30,000	45-2893839	9541 Plaza Circle	El Paso	TX	79927
S	C13000027	Food Bank of Corpus Christi	\$50,000	74-2234089	826 Knill Street	Corpus Christi	TX	78408
S	C13000028	Food Bank of Golden Crescent	\$30,000	74-2534561	P O Box 5085	Victoria	TX	77901
S	C13000029	Food Bank of the Rio Grande Valley	\$30,000	74-2421960	P O Box 6251	McAllen	TX	78502
S	C13000030	Food Bank of West Central Texas	\$30,000	75-1888192	5505 North 1st Street	Ablene	TX	79603
S	C13000031	Galveston County Food Bank	\$30,000	20-0408375	624 4th Avenue North	Texas City	TX	77590
S	C13000032	High Plains Food Bank	\$50,000	75-1838348	P O Box 31803	Amarillo	TX	79120
S	C13000033	Houston Food Bank	\$100,000	74-2181456	3811 Eastex Freeway	Houston	TX	77026

App ID #	Name of Entity	GrantAmount	TaxID	Street Address	City	State	Zip
S C13000034	Montgomery County Food Bank	\$30,000	76-0153892	111 S 2nd Street	Conroe	TX	77301
S C13000035	North Texas Food Bank	\$100,000	75-1785357	4500 S Cockrell Hill Rd	Dallas	TX	75236
S C13000036	San Antonio Food Bank	\$100,000	74-2122979	5200 Old Hwy 90W	San Antonio	TX	78227
S C13000037	South Plains Food Bank	\$50,000	75-1904829	4612 Locust Ave	Lubbock	TX	79404
S C13000038	South Texas Food Bank	\$50,000	74-2574983	P O Box 2007	Laredo	TX	78044
S C13000039	Southeast Texas Food Bank	\$75,000	76-0338721	P O Box 21012	Beaumont	TX	77720
S C13000040	Tarrant Area Food Bank	\$100,000	75-1822473	2600 Cullen Street	Fort Worth	TX	76107
S C13000041	West Texas Food Bank	\$30,000	75-2057692	1008 E 2nd Street	Odessa	TX	79761
S C13000042	Wichita Falls Area Food Bank	\$30,000	75-1812865	1230 Midwestern Pkwy	Wichita Falls	TX	76307
S C13000050	Family Services of Southeast Texas	\$25,000	74-1382713	980 Interstate 10 N, Suite 140	Beaumont	TX	77702
S C13000051	Greater Good Hope Baptist Church	\$10,000	76-0399209	2725 W Virginia	Beaumont	TX	77705
S C13000052	Jones Memorial Church of God in Christ	\$5,750	32-0254354	3355 Houston Street	Beaumont	TX	77705
S C13000053	Magnolia Missionary Baptist Church	\$10,000	76-0083882	2830 Pine Street	Beaumont	TX	77703
S C13000056	Mount Calvary Baptist Church	\$10,000	76-0086446	2120 Renaud Street	Beaumont	TX	77703
S C13000057	Saint's Temple Church of God in Christ	\$2,500	76-0639902	10410 Dusty Lane	Beaumont	TX	77713
S C13000058	Southeast Texas Family Resource Center	\$10,000	76-0589232	2060 Inng	Beaumont	TX	77701
S C13000059	Temple of Praise Church of God in Christ	\$5,750	51-0600861	1575 Montrose Ave	Beaumont	TX	77707
S C13000060	James Hope Center for Children	\$10,000	11-3721907	3542 9th Avenue	Port Arthur	TX	77642
S C13000071	Riverbend Church	\$5,000	74-2049584	4214 N Capital of Texas Hwy	Austin	TX	78746
S C13000072	St. John Neumann Catholic Church	\$10,000	20-2370934	5455 Bee Cave Road	West Lake Hills	TX	78746
S C13000074	Wounded Warrior Project	\$10,000	20-2370934	4899 Belfort Road, Suite 300	Jacksonville	FL	32256
S C13000076	Montgomery County Women's Center	\$35,000	76-0061208	1600 Lake Front Circle, Suite 100	The Woodlands	TX	77380
		<u>\$1,479,000</u>					
		<u>\$12,242</u>					

Children of Fallen Heroes - 16 Laptops - 05/23/13 - \$12,241.86

Totals

Children and Youth	\$1,055,800
Educational Programs	\$1,711,732
Healthcare Grants	\$1,020,000
Social Services Grants	\$1,479,000
Children of Fallen Heroes	\$12,242
Other Grant Expenses	\$42,328
Total 2013 Grant Expense	<u>\$5,321,102</u>