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For Paperwork Reduction Act Notice, see the separate instructions

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 2013 Open to Public Inspection

Form 990 (2013)

<u>A</u>	For the 2013 c		6/30/14		
В	Check if applicable	C Name of organization Bridgemont Community & Technica	al	D Employ	er identification number
	Address change	College Foundation, Inc.		1	
	Name change	Doing Business As		27-	1980955
\equiv	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite	· ·	one number
님	Initial return	326 3rd Avenue	100	304	<u>-734-</u> 6611
	Terminated	City or town, state or province, country, and ZIP or foreign postal code			· · · · · · · · · · · · · · · · · · ·
	Amended return	Montgomery WV 25136-2200		G Gross rece	epts\$ 266,122
\exists	Application pending	F Name and address of principal officer			
Щ.	Application pending	Rocky Hackworth	H(a) Is this a g	roup return for su	bordinates? Yes X No
		326 3rd Avenue, Suite 100	H(b) Are all su	ibordinates inclu	ided? Yes No
		Montgomery WV 25136-2200	If "No	o," attach a list (see instructions)
	Tax-exempt status		527		
÷		I/A		emption number	
<u>~</u>	Form of organization		L Year of formation	2000	M State of legal domicile WV
		ummary	E Tour or formation =		in claic or legal dorniche PT P
	T	escribe the organization's mission or most significant activities			
	1	Schedule O			
ည	see	Schedule O			
Ē					
er					
8	2 Check th	is box 🕨 🦳 if the organization discontinued its operations or disposed of mo	re than 25% of its net ass	sets	
(U)	3 Number	of voting members of the governing body (Part VI, line 1a)		3	7
SS	1	of independent voting members of the governing body (Part VI, line 1b)		4	7
Activities & Governance		mber of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
휹	1			6	0
ĕ	Total flui	riber of volunteers (estimate in necessary)	1		0
	/a Fotal uni	related business revenue from Part VIII, column (experimental part VIII) related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable income from Form specimental part VIII related business taxable part VIII related business	1	7a	0
	b Net unre	lated business taxable income from Form 996 Time CEIVED	Prior Y	7b	Current Year
	1		1 2	7,752	266,122
ne	8 Contribu	tions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g))	- 1 , 132	
Revenue	9 Program	service revenue (Part VIII, line 2g)			0
Š	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and colored			0
	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, pc 10 GDEN, UT			0
	12 Total rev	renue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		27,752	266,122
	13 Grants a	ind similar amounts paid (Part IX, column (A), lines 1–3)	- 6	51,267	153,129
	14 Benefits	paid to or for members (Part IX, column (A), line 4)			0
Ś	15 Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10)			0
sesued	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)			0
ē	b Total fur		0		
ŵ	17 Other ex	spenses (Part IX, column (A), lines 11a–11d, 11f–24e)	5	3,316	70,738
<u>G</u>	18 Total ex	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		4,583	223,867
7	19 Pevenue	e less expenses Subtract line 18 from line 12		3,169	42,255
-	S TO TREVEITA	reas expenses outstate into 10 from into 12	Beginning of C		End of Year
ets	20 Total as	sets (Part X, line 16)	39	0,267	381,539
Net/Assets or ACA	21 Total lia	bilities (Part X, line 26)		3,290	2,307
Set	22 Net ass	ets or fund balances Subtract line 21 from line 20		36,977	379,232
		ignature Block		,,,,,	<u> </u>
-	nger penalties of	perjury, I declare that I have examined this return, including accompanying schedules a complete. Declaration of preparer (b)ther than officer) is based on all information of which	no statements, and to the bi	est of my know	wiedge and belief, it is
<u>છ</u>	Lac, con cor, and	7 11 14 /4-11		,-	1-1-
2		Aus And W (italy)	 		13/13
:Şi	gn	Signature of officer		Date	
He	gn ere	(puil			<u> </u>
		Type or print name and title			
	Print/Ty	pe preparer's name Preparer's signature	Date	Check	if PTIN
Pa	id Brian	D. Wadsworth	Z _{12/0}	2/14 self-em	- ployed P01071287
Pro	eparer Firm's n	milia c milia prec		Firm's EIN	55-0771644
Us	e Only	500 Virginia St E Ste 1000			
	Firm's a	Chamleston 1977 25201		Phone no	304-342-4169
Ma		ss this return with the preparer shown above? (see instructions)	l	, none no	X Yes No

Form 990 (2013) Bridgemont Community & Technical 27-1980955	Page 2
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	
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	res 140
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X 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 \$ 149,437 including grants of \$ 139,837) (Revenue \$)
Diesel School - Program supporting the objectives of the mechanica	l school
division at Bridgemont Community & Technical College.	
4b (Code) (Expenses \$ 9,392 including grants of \$) (Revenue \$	
4b (Code) (Expenses \$ 9,392 including grants of \$) (Revenue \$ Printing School - Program supporting the objectives of the printin	a sabaal
division at Bridgemont Community & Technical College.	g school
division at bridgemont community a recommend correge.	
4c (Code) (Expenses \$ 15,975 including grants of \$) (Revenue \$)
Distance Earning Grant - Program supporting the objectives of the	
earning grant division at Bridgemont Community & Technical College	•
4d Other program services (Describe in Schedule O)	
(Expenses \$ 39,839 including grants of \$ 13,292) (Revenue \$)
4e Total program service expenses ▶ 214,643	

			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 (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		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			37
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44.		х
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		<u> </u>
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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	X	
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		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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	[77
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.		v
46	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.		v
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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 (see instructions)	47		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
, 0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			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? If "Yes," complete Schedule I, Parts I and II	_21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			77
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22		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? If "Yes," complete Schedule J			v
24-		23		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 insued after December 31, 20033 If "Yea," answer lines 34b			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24-		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
b		24b		
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.		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		
L Ja	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25.		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		Λ_
U	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	- 20		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		-	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u> </u>
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? If "Yes," complete Schedule R, Part I	_33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		_ <u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			**
2.7	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	_		77
20	Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		.	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

DAA				m 990	(2013)
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0	14b		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
С	Enter the amount of reserves on hand	13c			
	the organization is licensed to issue qualified health plans	13b]		
b	Enter the amount of reserves the organization is required to maintain by the states in which			ļ	
	Note. See the instructions for additional information the organization must report on Schedule O				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12 <u>a</u>		
-	against amounts due or received from them)	11b			
b	Gross income from other sources (Do not net amounts due or paid to other sources		1		
	Gross income from members or shareholders	11a		ļ	
11	Section 501(c)(12) organizations Enter			1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	┪		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
10	Section 501(c)(7) organizations. Enter		"		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
а	Did the organization make any taxable distributions under section 4966?		9a		
9	Sponsoring organizations maintaining donor advised funds.				
	organization, have excess business holdings at any time during the year?		8		
J	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	on me a roung todo-o			
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	·	7 <u>9</u> 7h		
	If the organization received a contribution of qualified intellectual property, did the organization file Form		7 <u>1</u> 7g		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.		7e 7f		
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor		7e	[
	required to file Form 8282?	7d	7c		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	and services provided to the payor?		7a		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	ods	_	ł	
7	Organizations that may receive deductible contributions under section 170(c)				
	gifts were not tax deductible?		6b		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		<u>_x</u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			ł	7.5
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		<u>X</u>
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial A	ccounts		}	77
b	If "Yes," enter the name of the foreign country				
	account)?		4a		<u> </u>
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ncial			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b	}	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	_	, [
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	reportable gaming (gambling) winnings to prize winners?		1c	_	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	7		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a			
	Check if Schedule O contains a response or note to any line in this Part V			Yes	No
	Check if Schedule O contains a response or note to any line in this Part V				1 1

Charleston

DAA

Form 990 (2013) Bridgemont Community & Technical 27-1980955 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 X Section 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 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 7 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 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 6 Did the organization have members or stockholders? 6 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? X 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 X Section 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 X If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 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 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed > None 17 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 Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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 > Sarah Martin, CPA 707 Virginia Street, East

WV 25301

Form 000 (2012)	Bridgemont	Community	r.	Technical
Form 990 (2013)	PLICAGEMONE	COMMITTIES	Ox.	recunrear

27-1980955

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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 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.

- 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
- 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 organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) (C) Average hours per (do not check more than one box, unless person is both an officer and a director/trustee) hours for							(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(VV-2/1099-MISC)	organization and related organizations
(1) Rocky Hackworth										
	0.00	1								
President	0.00	X		X	<u> </u>	<u> </u>		0	0	0
(2) Tara Elder										
	0.00									
Secretary	0.00	X	<u> </u>	X	ļ			0	0	0
(3) Sarah Martin										
	0.00									
Treasurer	0.00	X	L	X	<u> </u>			0	0	0
(4) Kenneth Bailey				ŀ						
	0.00		ļ					_		
Director	0.00	X	<u> </u>	<u> </u>	<u> </u>			0	0	0
(5) Rebecca Randolph										
	0.00									
Director	0.00	X	ļ	_	_			0	0	0
(6) Marlo Scruggs										
	0.00	1	ļ	İ						_
Director	0.00	X	<u> </u>	<u> </u>	₩	 		0	0	0
(7) Dennis Taylor										
	0.00									_
Director	0.00	X	<u> </u>	<u> </u>	<u> </u>	-		0	0	0
(8)										
(9)										
(10)										
(11)			-							
DAA		ļ								. 000

_Pai	rt VII Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	ind Highest Compensated	Employees (continued)				
(A) ' Name and title		(B) (C) Average Position hours per (do not check more week box, unless person i officer and a directo hours for						an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	am comp	(F) timated tount of other pensation om the	1	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W. 2 ress mises)	orga and	organization and related organizations		
(12)														
(13)														
(14)	<u>.</u>				-									
(15)														
(16)			-											
(17)														
(18)	- 11													
(19)														
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion <i>i</i>	A	ı	1	> > >						
2	Total number of individuals (in reportable compensation from				thos	e list	ed a	bove	e) who received more than S	6100,000 in				
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Sched	lule .	J for	such	ınd	ıvıdu	al			3	Yes	s No X	
4	For any individual listed on lin organization and related orga- individual	nızatıons greater	thar	\$15	50,00	1 200	"Ye	s," c	omplete Schedule J for suc	h	4		x	
5	Did any person listed on line of for services rendered to the of tion B. Independent Contraction	rganization? If "Y								ndividual	5	<u> </u>	X	
1	Complete this table for your fir compensation from the organ	ve highest comp	ensa	ted i	ndep	end	ent c	ontra	actors that received more th	nan \$100,000 of	ar			
		(A) d business address		,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>						(B) tion of services		(C) Compens	sation	
												_		
2	Total number of independent received more than \$100,000								se listed above) who	0				
												- 00	20	

. ~		Check	ıf Schedule (O conta	ains a i	response c	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	b c d e	Federated can Membership d Fundraising ev Related organ Government grants All other contribution	lues vents izations (contributions)	1a 1b 1c 1d				101010		012-014
Contribut and Other	g	and similar amounts	s not included above ins included in lines 1a-	1f \$		266,122 135,639	266,122			
Program Service Revenue	2a b c d					Busn Code				
rogu	f	All other progr	am service revei	nue						
<u>-</u>		Total Add line	 						<u> </u>	1
	3 4 5	and other simi	come (including of ilar amounts) nvestment of tax-			▶				
	6a b	•	(ı) Real		(n) P	ersonal				
	c d 7a	Rental inc or (loss) Net rental inco	•		(11)	▶ Other	7 11/			
	b	sales of assets other than inventory Less cost or other basis & sales exps								
	С	Gain or (loss)								
ne	d 8a		ess) om fundraising ever	nts						
Other Revenu		See Part IV, line Less direct ex		a b	vents	>				
		See Part IV, line		a						
		Less direct ex	xpenses · (loss) from gam	b_	tios					
	10a	Gross sales or returns and al	f inventory, less lowances	a	illes		,			
		Less cost of g	goods sold (loss) from sale:	b_ s of invei	ntory					
			cellaneous Revenue	3 01 111461	itory	Busn Code				
	11a									
	b					-	·-			
	c d	All other rever	nue.				-			
	e e	Total. Add line				•				
	12		e. See instructioi	าร			266,122	0	0	0

<u>Pa</u>	rt IX Statement of Functional Exp	<u> enses</u>		···	
Secti	on 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			plete column (A)	
	· · · · · · · · · · · · · · · · · · ·	(A)	(B)	(C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and general expenses	Fundraising
1			expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21	153,129	153,129		
2	Grants and other assistance to individuals in		133,123		
2	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				· · · · · · · · · · · · · · · · · · ·
	organizations, and individuals outside the				
	U S 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			-	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
þ	Legal				
С	Accounting	9,224		9,224	· · · · · · · · · · · · · · · · · · ·
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 Schedule O)				
12	· .	642	642		
13	Office expenses	754	754		
14	Information technology				
15	Royalties	0.600	0 600		
16	Occupancy	9,600	9,600		
17	Travel	1,806	1,806		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	185	185		
24	Other expenses Itemize expenses not covered				
27	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	D	21,837	21,837		
b	0 1 1 1	12,503	12,503		
c	77 h - 1 - h	8,418	8,418	-	
d	- 1 t 6 F	2,559	2,559		
e	A 41 - 41	3,210	3,210		· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses Add lines 1 through 24e	223,867	214,643	9,224	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)				

_	Check if Schedule O contains a response or no	te to any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		390,267	1	381,539
2	Savings and temporary cash investments		2		
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 en	mployees			
	Complete Part II of Schedule L			5	
6	Loans and other receivables from other disqualified p	ersons (as defined under section			
1	4958(f)(1)), persons described in section 4958(c)(3)(E	3), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntar	ry employees' beneficiary			
3	organizations (see instructions) Complete Part II of S	chedule L		6	
7	Notes and loans receivable, net		7		
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10a	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a			
b	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities			11	
12	Investments—other securities See Part IV, line 11		·	12	
13	Investments—program-related See Part IV, line 11	<u> </u>		13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11	<u> </u>		15	
16	Total assets Add lines 1 through 15 (must equal line	34)	390,267	16	381,53
17	Accounts payable and accrued expenses	<u>_</u>	51,479	_17	90
18	Grants payable		18		
19	Deferred revenue	<u> </u>		19	
20	Tax-exempt bond liabilities	-		20	
21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
3 22	Loans and other payables to current and former office	ers, directors,			
	trustees, key employees, highest compensated emplo	yees, and		- 1	
22	disqualified persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated the	nird parties	,	23	
24	Unsecured notes and loans payable to unrelated third	l parties		24	
25	Other liabilities (including federal income tax, payable	s to related third		- 1	
	parties, and other liabilities not included on lines 17-2	4) Complete Part X			
	of Schedule D		1,811	25	2,217
26			53,290	26	2,30
.	Organizations that follow SFAS 117 (ASC 958), ch			1	
27 28 29	complete lines 27 through 29, and lines 33 and 34	l.			
27	Unrestricted net assets	_	4,956	27	4,728 374,504
28	Temporarily restricted net assets	<u> </u>	332,021	28	374,504
29		<u> </u>		29	
	Organizations that do not follow SFAS 117 (ASC	958), check here ► _ and			
5	complete lines 30 through 34				
30	• • • • • • • • • • • • • • • • • • • •			30	
31		<u> </u>		31	
30 31 32	Retained earnings, endowment, accumulated income	, or other funds		32	
33	Total net assets or fund balances		336,977	33	379,232
34	Total liabilities and net assets/fund balances		390,267	34	381,539

orm	990 (2013) Bridgemont Community & Technical 27-1980955			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check 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	2	66,	122
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	23,	867
3	Revenue less expenses Subtract line 2 from line 1	3			255
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	36,	977
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3	79,	232
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X 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				
	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?		2b	X.	
	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				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			-	
	Schedule O				
3а	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?		3a		х
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		3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

4947(a)(1) nonexempt charitable trust.

Reason for Public Charity Status (All organizations must complete this part) See instructions

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Internal Revenue Service

Name of the organization

2

3

Department of the Treasury

Bridgemont Community & Technical

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

College Foundation, Inc.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

Employer identification number 27–1980955

4		A medical res	earch organization operated	d in conjunction with a hospital d	lescribed	ın sectior	170(b)	(1)(A)(ii	i). Ente	r the ho	spital's name		
		city, and state)										
5	X	•	on operated for the benefit o b)(1)(A)(iv). (Complete Part	of a college or university owned	or operate	ed by a go	vernmei	ntal unit	describ	ed in			
6		•		overnmental unit described in se	oction 17	0/6\/4\/A\	/s.A						
6 7	\mathbb{H}		-	substantial part of its support fro			• •	om tha	ronoral	nublia.			
'		J	· ·	' ''	ili a gove	mmeman	יוו וט זווזע	om me (generai	public			
			section 170(b)(1)(A)(vi). (C	•									
8	님	•		70(b)(1)(A)(vi). (Complete Part	•				_				
9	Ш	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)											
10	-	•	•	exclusively to test for public safe	•								
11		=	•	exclusively for the benefit of, to p				-					
		purposes of o	one or more publicly supporte	ed organizations described in se	ection 509	(a)(1) or s	ection 5	09(a)(2)	See s	ection			
		509(a)(3). Ch	_	he type of supporting organization									
		a Type	I b Type II	c Type III-Functions	ally integra	ated	đ	Тур	e III-No	n-functi	ionally integra	ited	
е	L		-	anization is not controlled directl	-			-					
		other than fou	undation managers and othe	r than one or more publicly supp	ported org	anization	s describ	oed in se	ection 5	09(a)(1))		
		or section 509	9(a)(2)										
f	If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting												
		organization, check this box											
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the												
	following persons?												
		(i) A person	who directly or indirectly co	ntrols, either alone or together v	with perso	ns describ	ed in (ii) and				Yes	No
		(III) belov	w, the governing body of the	supported organization?							11g(ı)		
		(II) A family	member of a person describ	ed in (i) above?							11g(ii)		
		(iii) A 35% c	ontrolled entity of a person o	lescribed in (i) or (ii) above?							11g(iii		
h		Provide the f	ollowing information about the	he supported organization(s)									·
(-	ı) Nam	e of supported	(n) EIN	(III) Type of organization	(iv) is the organization (v) Did you notify (vi) is the				s the	(vii) Amount of monetary			
	or	ganization		(described on lines 1–9	in col (i) h	the organization in organization in col (i) of your (i) organized in				col support			
				above or IRC section (see instructions))	governing	document?		ort?		S?			
				(555 11.51.551.7)	Yes	No	Yes	No	Yes	No			
(A)													
							İ						
(B)													
							İ						
(C)					1					1			
,										}			
(D)													
<i>-</i>													
(E)						 							
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		<u>.</u>	-		 	 					<u> </u>		
Tota	al le												
		nnyork Padua	tion Act Notice, see the In	estructions for		<u> </u>	l	L	L			00 53	. 2042
·Ur	rap	ELMOIK VERING	MON ACLINOUSE, SEE ME IN	เอเเนษแบทอ เบเ					suneal	ль A (Г	orm 990 or 9	ョロ-ビム	,∠∪13

Form 990 or 990-EZ.

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						
Caler	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	7,628	219,516	436,148	127,752	266,122	1,057,166
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	7,628	219,516	436,148	127,752	266,122	1,057,166
5	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				-		1,057,166
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	7,628	219,516	436,148	127,752	266,122	1,057,166
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						1,057,166
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(d	c)(3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Su	upport Percent	tage				
14	Public support percentage for 2013 (line 6		-	(f))		14	100 00%
15	Public support percentage from 2012 Sche	· ·				15	100 00%
16a	33 1/3% support test—2013. If the organ				3 1/3% or more, ch	eck this	. =
	box and stop here. The organization qual	• •	-				► <u>x</u>
b	33 1/3% support test—2012. If the organ				is 33 1/3% or moi	e,	
	check this box and stop here. The organiz		• • •	_			>
1/a	10%-facts-and-circumstances test—20	-					
	10% or more, and if the organization meet						
	Part IV how the organization meets the "fa	cts-and-circumstan	ces test The orga	nization qualifies a	is a publicly suppo	пеа	
L.	organization	12 If the ergonizati	an did not obook o	hay an luna 12 16a	16h or 17a and	lima	•
b	10%-facts-and-circumstances test—20° 15 is 10% or more, and if the organization	•		•		ime	
	Explain in Part IV how the organization me			•	•	licly	
	supported organization	oto the Tacto-affu-	oncumbiances les	. The organization	quannes as a pub	noiy	•
18	Private foundation If the organization di	d not check a box o	n line 13, 16a-16h	. 17a. or 17b. chec	k this box and see		_
	instructions			,, 5. 115, 6166	Jon and 300		>

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

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

Sec	tion A. Public Support	quality and a	To tooto motou i	<u> </u>	ompiete i art ii	,	
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization'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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support	1					
	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6					 -	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		_				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	•	, second, third, for	irth, or fifth tax yea	r as a section 501(c)(3)	
Sec	tion C. Computation of Public S		tage	······································			
15	Public support percentage for 2013 (line 8			n (f))		15	%
16_	Public support percentage from 2012 Scho		-			16	%
Sec	tion D. Computation of Investme	ent Income Pe	rcentage				
17	Investment income percentage for 2013 (l	ine 10c, column (f)	divided by line 13,	column (f))		17	%
18	Investment income percentage from 2012					18	%
19a	33 1/3% support tests—2013. If the orga						
	17 is not more than 33 1/3%, check this bo			· ·	•		>
b	33 1/3% support tests—2012. If the orga					·	
20	line 18 is not more than 33 1/3%, check th					-	>
20	Private foundation. If the organization di	a not cneck a box (on line 14, 19a, or	190, check this box	cand see instructio	ns	▶

Schedule A (Form 990 or 990-EZ) 2013 Bridgemont Community & Technical 27-1980955 Part IV Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and

Part III, line 12 Also complete this part for any additional information (See instructions)

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.qov/form990.

Open to Public Inspection

OMB No 1545-0047

	nideonant Community 6 Markainal		Employer	ridentification number
	ridgemont Community & Technical		0.7.1	200055
	ollege Foundation, Inc.			.980955
Pa	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F		ccoun	ts.
	Complete if the organization answered Tes to I	<u> </u>		
4	Total musch on at and of the	(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			
_	funds are the organization's property, subject to the organization's exclu	•		∐ Yes ∐ No
6	Did the organization inform all grantees, donors, and donor advisors in v	<u> </u>		
	only for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose		
De	conferring impermissible private benefit?			Yes No
P 6	Conservation Easements. Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check a	all that apply)		
	Preservation of land for public use (e g , recreation or education)	Preservation of an historically impo	rtant lar	nd area
	Protection of natural habitat	Preservation of a certified historic s	structure	•
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserve	vation contribution in the form of a conserva	ation	
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure inclu-	ded in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/0	6, and not on a	-	
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, exti	nguished, or terminated by the organization	during	the
	tax year ▶			
4	Number of states where property subject to conservation easement is lo	cated ▶		
5	Does the organization have a written policy regarding the periodic monitor	oring, 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	ng conservation easements during the year		
	>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	onservation easements during the year		
_	> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e 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 easement			
	balance sheet, and include, if applicable, the text of the footnote to the o organization's accounting for conservation easements	rganization's financial statements that desc	ribes th	e
Pa	art III Organizations Maintaining Collections of Art,	Historical Treasures or Other S	imilar	Accete
	Complete if the organization answered "Yes" to Fe	orm 990, Part IV, line 8	iiiiiai	Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not		ance she	eet
	works of art, historical treasures, or other similar assets held for public ex			
	public service, provide, in Part XIII, the text of the footnote to its financial			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		sheet	
	works of art, historical treasures, or other similar assets held for public ex			
	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 o	ther similar assets for financial dain, provid	le the	•
_	following amounts required to be reported under SFAS 116 (ASC 958) re		.5	
а	D. Andre Francosco D. Andre J.		▶	\$
	Assets included in Form 990, Part X		•	· \$
			_	

Sche			y & Technic			980955	Page 2
<u>Pa</u>	rt III Organizations Maintainii	ng Collections of	Art, Historical T	reasures,	or Othe	r Similar Assets	(continued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other records	s, check any of the follo	owing that are	e a signific	ant use of its	
а	Public exhibition	d 🗌	Loan or exchange pro	orams			
b	Scholarly research	e	Other	3.4			
С	Preservation for future generations						
4	Provide a description of the organization's of XIII	collections and explain	how they further the c	organization's	exempt p	urpose in Part	
5	During the year, did the organization solicit	or receive donations o	of art historical treasur	es orothers	umilar		
	assets to be sold to raise funds rather than				mimai		Yes No
Pa	rt IV Escrow and Custodial A		art of the organization	3 CONCOLION			
	Complete if the organization	_	" to Form 990, Pa	rt IV, line 9	, or repo	orted an amount o	on Form
1a	Is the organization an agent, trustee, custoo	tian or other intermed	any for contributions of	r other assets	not		
	included on Form 990, Part X?	dan or other intermed	ary for contributions of	olliei assets	5 1100		Yes No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing table				1c3 140
	g	, , , , , , , , , , , , , , , , , , , ,	gg				Amount
С	Beginning balance					1c	· · · · · · · · · · · · · · · · · · ·
	Additions during the year					1d	
	Distributions during the year					1e	
f	Ending balance					1f	···
2a	Did the organization include an amount on	Form 990, Part X, line	21?				Yes No
b	If "Yes," explain the arrangement in Part XII	Check here if the ex	planation has been pro	ovided in Par	t XIII		
Pa	rt V Endowment Funds.						
	Complete if the organization	on answered "Yes	<u>" to Form 990, Pa</u>	rt IV, line 1	10		
		(a) Current year	(b) Prior year	(c) Two yes	ars back	(d) Three years back	(e) Four years back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						-
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs			· · · · · · · · · · · · · · · · · · ·			
	Administrative expenses					<u> </u>	ļ
_	End of year balance						<u> </u>
2	Provide the estimated percentage of the cu		e (line 1g, column (a)) l	held as			
	Board designated or quasi-endowment	%					
	Permanent endowment ► %						
С	Temporarily restricted endowment ►	%					
2-	The percentages in lines 2a, 2b, and 2c sho						
3a	Are there endowment funds not in the poss	ession of the organiza	tion that are held and t	administered	for the		[v] N
	organization by						Yes No
	(i) unrelated organizations (ii) related organizations						3a(ı)
h	If "Yes" to 3a(ii), are the related organization	ne lietad ae raquirad a	n Schodulo D2				3a(ii)
4	Describe in Part XIII the intended uses of the	•					3b
Pa	ert VI Land, Buildings, and Equ		Willelit Idilas				
. a	Complete if the organization		" to Form 990 Pa	rt IV line 1	1a See	Form 990 Part)	(line 10
	Description of property	(a) Cost or other			1	ccumulated	(d) Book value
		(investment)	I ' '			preciation	(4) DOOK VAILE
12	Land		,			-	·
	Buildings					-	
	Leasehold improvements			-			
	Equipment						
	Other				<u> </u>		
	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Part	X, column (B), line 10	(c))	1.	•	
						<u> </u>	

Part VII	Investments—Other Securities. Complete if the organization answered "Yes"		Soo Form 000 Port V line 12
	(a) Description of security or category	(b) Book value	
	(including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(4) E l			335 of Cha-of-year market value
(1) Financial (
· ·	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Colum	n (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)		- 	
(1)		+	
(2)			
(3)			
(4)			
(5)	·		
(6)			
_(7)			
(8)			
(9)	····		
	n (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)	<u> </u>		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			-
(8)			
(9)			
	on (h) must equal Form 000. Part Y, cal. (R) line 15.)		>
Part X	on (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.		
ΓαιιΛ		to Form 900 Port IV line 11a	or 11f Soo Form 000 Dod V
	Complete if the organization answered "Yes" line 25	to roini 990, Fait (V, line) le	or the See Form 990, Part A,
1.	(a) Description of liability	(b) Book value	
•	Income taxes		
	nts Held on Behalf of Others	2,217	
(3)			
(4)			
(5)			
(7)			
(8)			
(9)			
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,217	
2. Liability for	runcertain tax positions. In Part XIII, provide the text of the	footnote to the organization's financia	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

che	dule D (Form 990) 2013 Bridgemont Community & Tec	chnical	27-1980955	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial St	atements With	Revenue per Return.	
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line	12a	
1	Total revenue, gains, and other support per audited financial statements	_	1	266,122
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	266,122
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	l l		
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	266,122	
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With	Expenses per Return.	
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line	12a	
1	Total expenses and losses per audited financial statements		1	223,867
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	1 1	3	223,867
4	Amounts included on Form 990, Part IX, line 25, 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 expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18))	5	223,867

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

Schedule D (Form-990) 2013 Bridgemont Community & Technical
Part XIII Supplemental Information (continued)

27-1980955

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

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

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OMB No 1545-0047

& Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance Employer identification number Scholarships X Yes Scholarship 27-1980955 (g) Description of non-cash assistance Materials Materials Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 128,047 8,592 (e) Amount of noncash assistance 11,790 4,700 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Bridgemont Community & Technical General Information on Grants and Assistance (b) EIN Inc. 3 Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? College Foundation, (1) Bridgemont Comm. & Tech. College & Tech. College 25136 WV 25136 (a) Name and address of organization ¥ or government (2) Bridgemont Comm. 619 2nd Avenue 619 2nd Avenue Name of the organization Montgomery Montgomery Part II Part <u>@</u> **₹** 9 9 6 8 6

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

Schedule I (Form 990) (2013)

	າ 990, Part IV, line 22	
	Juals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	
27-1980955	Complete if the organizati	needed
nity & Technical	s in the United States.	e is needed
Community	to Individuals	Itional space is
Bridgemont Communi	Part III Grants and Other Assistance to Individua	art III can be duplicated if additional space
Schedule I (Form 990) (2013)	Grants and	Part III can
Schedule I (F	Part III	

	מוניון ממו אם ממונים וו ממיוים סופים וויים ו	2000				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	,
-					:	
				:		
2						
,						
2						
•						
4						
ư						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ide the information rec	quired in Part I, line	2, Part III, column (b)	, and any other additional	nformation

SCHEDULE M. (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Bridgemont Community & Technical College Foundation, Inc.

Employer identification number 27-1980955

Pa	rt I Types of Property		_ 			_				
		(a) Check if	(b) Number of contributions or	(c) Noncash contribution			(d) f determining			
		applicable	items contributed	amounts reported on			ribution amounts			
4	Art. Marks of art			Form 990, Part VIII, line 1g						
1	Art — Works of art									
2	Art — Historical treasures							—		
3	Art — Fractional interests	 				 -				
4	Books and publications									
5	Clothing and household									
	goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities — Publicly traded									
10	Securities — Closely held stock					_ 				
11	Securities — Partnership, LLC,									
	or trust interests									
12	Securities — Miscellaneous									
13	Qualified conservation									
	contribution — Historic		ļ	ļ						
	structures									
14	Qualified conservation									
	contribution — Other									
15	Real estate — Residential									
16	Real estate — Commercial						·,			
17	Real estate — Other	<u> </u>					<u>.</u>			
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxıdermy									
22	Historical artifacts	<u> </u>								
23	Scientific specimens									
24	Archeological artifacts									
25	Other ► (Equipment)	X	2	128,324						
26	Other ► (Accounting Svcs)	X	1	_7,315	<u>Fair</u>	market	value			
27	Other ► (
28	Other ► (<u></u>						
29	Number of Forms 8283 received by t	the organiz	zation during the tax year	for contributions for						
	which the organization completed Fo	orm 8283, F	Part IV, Donee Acknowle	edgement	29					
									Yes	No
30a	During the year, did the organization	receive by	contribution any proper	ty reported in Part I, lines 1	- 28, that					
	it must hold for at least three years fr	rom the da	te of the initial contribution	on, and which is not required	d to be				ŀ	
	used for exempt purposes for the en	tire holding	g period?				3	0a		X_
b	If "Yes," describe the arrangement in	ı Part II								
31	Does the organization have a gift ac	ceptance p	oolicy that requires the re	view of any non-standard						
	contributions?						<u>_ ;</u>	31		\mathbf{X}_{-}
32a	Does the organization hire or use thi	rd parties	or related organizations	to solicit, process, or sell no	ncash			T		
	contributions?						3	2a		X_
b	If "Yes," describe in Part II						[Т		
33	If the organization did not report an a	amount in c	column (c) for a type of p	roperty for which column (a) is checke	d,		-		
	describe in Part II			·						

Schedule M (Form 990) (2013)

Page 2

Bridgemont Community & Technical 27-1980955
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both Also complete this part for any additional information

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization

Bridgemont Community & Technical

Employer identification number

College Foundation, Inc.

27-1980955

Form 990 - Organization's Mission

The Bridgemont Community and Technical College Foundation, Inc. is a private non-profit organization whose mission is to promote the academic excellence, growth, progress, and general welfare of Bridgemont Community and Technical College by raising funds and providing support to strengthen and develop the college and its objectives.

Form 990, Part III, Line 4d - All Other Accomplishment Other Various Schools - Programs supporting the objectives of several school divisions at Bridgemont Community & Technical College.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The Foundation's Treasurer reviews the information included in the Form 990 for accuracy. Upon completion of the review, and after contacting the preparer with any questions and/or concerns identified during the review, the Treasurer signs the Form 990 and submits it to the Internal Revenue Service.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Annually, the Board of Directors distributes and discusses its conflict of interest policy. Board members are required to acknowledge their receipt and understanding of the policy and their responsibility for notifying the board if a conflict were to arise. Any Board member who has a conflict of interest is required to recuse themselves from any votes regarding such issues.

Name of the organization

Bridgemont Community & Technical

Employer identification number 27–1980955

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The Foundation's policies are maintained in the Foundation's administrative office and are made available to the public upon request as required by the IRC regulations.