

**Exempt Organization Business Income Tax Return**  
**(and proxy tax under section 6033(e))**  
 For calendar year 2012 or other tax year beginning July 1, 2012, and  
 ending June 30, 2013. ▶ See separate instructions.

OMB No. 1545-0687  
**2012**  
 Open to Public Inspection for  
 501(c)(3) Organizations Only

Department of the Treasury  
 Internal Revenue Service

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization. ( <input type="checkbox"/> Check box if name changed and see instructions.) <u>Mariposa County High School Grizzly Band Boosters, Inc</u> Number, street, and room or suite no. If a P.O. box, see instructions. <u>PO Box 5008-340</u> City or town, state, and ZIP code <u>Mariposa, CA 95338</u>	D Employer identification number (Employees' trust, see instructions.) <u>27-3420375</u> E Unrelated business activity codes (see instructions) <u>453220/722210</u> <u>Not Applicable</u>
C Book value of all assets at end of year		F Group exemption number (see instructions) ▶	
G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust			

H Describe the organization's primary unrelated business activity. ▶ Sale of food and low-cost merchandise

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . ▶  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ KAREN HELMS Telephone number ▶ 209 9661230

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales <u>2158</u>			
b	Less returns and allowances <u>0</u>			
		<b>1c</b>		
2	Cost of goods sold (Schedule A, line 7) . . . . .	<u>2158 00</u>		
3	Gross profit. Subtract line 2 from line 1c . . . . .	<u>1709 00</u>		
4a	Capital gain net income (attach Schedule D) . . . . .	<u>449 00</u>		<u>449 00</u>
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<u>0</u>		<u>0</u>
c	Capital loss deduction for trusts . . . . .	<u>0</u>		<u>0</u>
5	Income (loss) from partnerships and S corporations (attach statement)	<u>0</u>		<u>0</u>
6	Rent income (Schedule C) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
7	Unrelated debt-financed income (Schedule E) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
10	Exploited exempt activity income (Schedule I) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
11	Advertising income (Schedule J) . . . . .	<u>0</u>	<u>0</u>	<u>0</u>
12	Other income (see instructions; attach statement).	<u>0</u>	<u>0</u>	<u>0</u>
13	<b>Total.</b> Combine lines 3 through 12 . . . . .	<u>449 00</u>	<u>0</u>	<u>449 00</u>

**Part II Deductions Not Taken Elsewhere** (see instructions for limitations on deductions) (except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K) . . . . .			
15	Salaries and wages . . . . .			<u>0</u>
16	Repairs and maintenance . . . . .			<u>0</u>
17	Bad debts . . . . .			<u>0</u>
18	Interest (attach statement) . . . . .			<u>0</u>
19	Taxes and licenses . . . . .			<u>0</u>
20	Charitable contributions (see instructions for limitation rules) . . . . .			<u>210 00</u>
21	Depreciation (attach Form 4562) . . . . .	<u>0</u>		
22	Less depreciation claimed on Schedule A and elsewhere on return . . . . .	<u>0</u>		
23	Depletion . . . . .			<u>0</u>
24	Contributions to deferred compensation plans . . . . .			<u>0</u>
25	Employee benefit programs . . . . .			<u>0</u>
26	Excess exempt expenses (Schedule I) . . . . .			<u>0</u>
27	Excess readership costs (Schedule J) . . . . .			<u>0</u>
28	Other deductions (attach statement) . . . . .			<u>0</u>
29	<b>Total deductions.</b> Add lines 14 through 28 . . . . .			<u>210 00</u>
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 . . . . .			<u>239 00</u>
31	Net operating loss deduction (limited to the amount on line 30) . . . . .			<u>0</u>
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 . . . . .			<u>239 00</u>
33	Specific deduction (generally \$1,000, but see line 33 instructions for exceptions) . . . . .			<u>1000 00</u>
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 . . . . .			<u>0</u>

**Part III Tax Computation**

<b>35 Organizations taxable as corporations</b> (see instructions for tax computation). Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> <b>See instructions</b> and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ <u>0</u> (2) \$ <u>0</u> (3) \$ <u>0</u> b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ <u>0</u> (2) Additional 3% tax (not more than \$100,000) \$ <u>0</u> c Income tax on the amount on line 34 <input type="checkbox"/> <b>35c</b> <u>0</u>		
<b>36 Trusts taxable at trust rates</b> (see instructions for tax computation). Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) <input type="checkbox"/> <b>36</b> <u>0</u>		
<b>37 Proxy tax</b> (see instructions) <input type="checkbox"/> <b>37</b> <u>0</u>		
<b>38 Alternative minimum tax</b> <input type="checkbox"/> <b>38</b> <u>0</u>		
<b>39 Total.</b> Add lines 37 and 38 to line 35c or 36, whichever applies <input type="checkbox"/> <b>39</b> <u>0</u>		

**Part IV Tax and Payments**

<b>40a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) <input type="checkbox"/> <b>40a</b> <u>0</u>		
<b>b</b> Other credits (see instructions) <input type="checkbox"/> <b>40b</b> <u>0</u>		
<b>c</b> General business credit. Attach Form 3800 (see instructions) <input type="checkbox"/> <b>40c</b> <u>0</u>		
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827) <input type="checkbox"/> <b>40d</b> <u>0</u>		
<b>e Total credits.</b> Add lines 40a through 40d <input type="checkbox"/> <b>40e</b> <u>0</u>		
<b>41</b> Subtract line 40e from line 39 <input type="checkbox"/> <b>41</b> <u>0</u>		
<b>42</b> Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) <input type="checkbox"/> <b>42</b> <u>0</u>		
<b>43 Total tax.</b> Add lines 41 and 42 <input type="checkbox"/> <b>43</b> <u>0</u>		
<b>44a</b> Payments: A 2011 overpayment credited to 2012 <input type="checkbox"/> <b>44a</b> <u>0</u>		
<b>b</b> 2012 estimated tax payments <input type="checkbox"/> <b>44b</b> <u>0</u>		
<b>c</b> Tax deposited with Form 8868 <input type="checkbox"/> <b>44c</b> <u>0</u>		
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions) <input type="checkbox"/> <b>44d</b> <u>0</u>		
<b>e</b> Backup withholding (see instructions) <input type="checkbox"/> <b>44e</b> <u>0</u>		
<b>f</b> Credit for small employer health insurance premiums (Attach Form 8941) <input type="checkbox"/> <b>44f</b> <u>0</u>		
<b>g</b> Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other <input type="checkbox"/> Total <input type="checkbox"/> <b>44g</b> <u>0</u>		
<b>45 Total payments.</b> Add lines 44a through 44g <input type="checkbox"/> <b>45</b> <u>0</u>		
<b>46</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> <b>46</b> <u>0</u>		
<b>47 Tax due.</b> If line 45 is less than the total of lines 43 and 46, enter amount owed <input type="checkbox"/> <b>47</b> <u>0</u>		
<b>48 Overpayment.</b> If line 45 is larger than the total of lines 43 and 46, enter amount overpaid <input type="checkbox"/> <b>48</b> <u>0</u>		
<b>49</b> Enter the amount of line 48 you want: <b>Credited to 2013 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/> <b>49</b> <u>0</u>		

**Part V Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b> At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here <input type="checkbox"/>	<b>Yes</b>	<b>No</b>
<b>2</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. <input type="checkbox"/>		
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> \$ <u>0</u>		

**Schedule A—Cost of Goods Sold.** Enter method of inventory valuation

<b>1</b> Inventory at beginning of year <input type="checkbox"/> <b>1</b> <u>200 00</u>	<b>6</b> Inventory at end of year <input type="checkbox"/> <b>6</b> <u>200 00</u>
<b>2</b> Purchases <input type="checkbox"/> <b>2</b> <u>1203 00</u>	<b>7</b> <b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 <input type="checkbox"/> <b>7</b> <u>1709 00</u>
<b>3</b> Cost of labor <input type="checkbox"/> <b>3</b> <u>0</u>	
<b>4a</b> Additional section 263A costs (attach statement) <input type="checkbox"/> <b>4a</b> <u>0</u>	
<b>b</b> Other costs (attach statement) <input type="checkbox"/> <b>4b</b> <u>506 00</u>	<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>5</b> <b>Total.</b> Add lines 1 through 4b <input type="checkbox"/> <b>5</b> <u>1909 00</u>	

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 taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  Harold Hebert 10/29/13  Treasurer  
 Signature of officer Date Title

May the IRS discuss this return with the preparer shown below (see instructions)?  **Yes**  **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <input type="checkbox"/>	Preparer's signature <input type="checkbox"/>	Date <input type="checkbox"/>	Check <input type="checkbox"/> if self-employed	PTIN <input type="checkbox"/>
	Firm's name <input type="checkbox"/>			Firm's EIN <input type="checkbox"/>	
	Firm's address <input type="checkbox"/>			Phone no. <input type="checkbox"/>	

**Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1. Description of property**

(1)
(2)
(3)
(4)

**2. Rent received or accrued**

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach statement)
(1)		
(2)		
(3)		
(4)		
<b>Total</b>	<b>Total</b>	

**(c) Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) . . . ▶

**(b) Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ▶

**Schedule E—Unrelated Debt-Financed Income (see instructions)**

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach statement)	(b) Other deductions (attach statement)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	5. Average adjusted basis of or allocable to debt-financed property (attach statement)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> . . . . . ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).

**Total dividends-received deductions** included in column 8 . . . . . ▶

**Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)**

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

**Totals** . . . . . ▶

**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b>		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

**Schedule J—Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5))						

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b>		Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).			Enter here and on page 1, Part II, line 27.
<b>Totals, Part II</b> (lines 1-5)						

**Schedule K—Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14			

Addendum to 2012

990-T Schedule A

MCHS Grizzly Band Boosters, Inc

27-3420375

OTHER COSTS BREAKDOWN

BOOTH COSTS	\$ 25.00
CREDIT CARD PROCESSING	\$341.00
EQUIPMENT RENTAL	\$ 60.00
SUPPLIES	\$ 0
DUES CHAMBERofCOMMERCE	\$ 80.00
	-----
TOTAL OTHER COSTS	\$ 506.00