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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the	2009 ca	alendar yea	r, or tax year beginning 01	-01-2009 and endin	g 12-31-2009			J
		pplicable	Please	C Name of organization STRUCTURED EMPLOYMENT	ECONOMIC DEVELOPMENT			D Employer i	dentification number
☐ Add	dress ch	hange	use IRS label or	CORPORATION Doing Business As				13-28757 E Telephone	
∏ Na	me cha	inge	print or type. See	Seedco					
Init	tıal retu	ırn	Specific Instruc-	Number and street (or P O t		to street addres	s) Room/suite	(212) 473	
Tei	mınate	ed	tions.	915 BROADWAY 17TH FLOOR				G Gross receipt	ts \$ 46,754,751
┌ Am	ended	return		City or town, state or country	, and ZIP + 4			1	
Г Арі	plication	n pending		NEW YORK, NY 10010					
			F Nar	ne and address of principa	officer		H(a) Is th	■ ıs a group retu	ırn for
				BAILLARGEON PRESIDE	NT			ates?	⊤Yes ▼ No
				ROADWAY 17TH FLOOR ORK,NY 10010			H/h) Aro a	II affiliates inclu	uded?
									st (see instructions)
I Ta	x-exen	npt status	▽ 501(c))(3) ◀ (insert no)	(a)(1) or			up exemption r	
J W	ebsite	e: ► WW	/W SEEDC	OORG					
K For	m of or	manization	✓ Cornorat	ion Trust Association C	Other 🏲	<u>'</u>	I Year of fo	ormation 1976	M State of legal domicile NY
		Sum		non'i riasti Associationi (THE P		E rear or re	indion 1970	Protate or legal dofficie. N
	1			e organization's mission o	most significant acti	vities			
				income people and commu			perity by cre	atıng economı	c opportunities for job
<u>ខ</u>		seekers	s, workers,	and small business owners	in disadvantaged coi	mmunities			
Governance									
ĘĘ.									
ŝ	2	Check	this box 🛏	f the organization disco	ntinued its operations	or disposed (of more than	25% of its ne	t assets
26	3	Numbe	r of voting r	nembers of the governing	oody (Part VI, line 1a)				310
Activities	4	Numbe	r of ındepen	ident voting members of th	e governing body (Pai	t VI, line 1b)		•	410
Ĭ	5	Total n	umber of er	nployees (Part V , line 2a)					5308
ş	6	Total n	umber of vo	lunteers (estimate if nece	ssary)				60
_	7a	Total g	ross unrela	ted business revenue from	Part VIII, column (C), line 12 .	•	•	7a 0
	ь	Net unr	elated busi	ness taxable income from	Form 990-T, line 34				7b 0
							Pric	or Year	Current Year
a	8	Contri	butions and	d grants (Part VIII, line 1h)			39,401,615	44,758,522
anue	9 Program service revenue (Part VIII, line 2g)							331,629	68,587
Raveni	10			ne (Part VIII, column (A),				192,230	13,987
	11		•	art VIII, column (A), lines		•		602,065	1,913,655
	12			dd lines 8 through 11 (mus				40,527,539	46,754,751
	13			ar amounts paid (Part IX, c				24,809,253	27,747,609
	14			or for members (Part IX, co		0	0		
	15			ompensation, employee be			_		
86		10)						11,481,921	11,929,721
Expenses	16a			raising fees (Part IX, colu				0	68,775
置	Ь			enses (Part IX, column (D), line					
	17			(Part IX, column (A), lines				7,315,147	5,873,923
	18			Add lines 13–17 (must eq				43,606,321	45,620,028
. 02	19	Reven	ue less exp	penses Subtract line 18 fr	om line 12		+	-3,078,782	1,134,723
Not Assets or Fund Balances							_	g of Current Year	End of Year
10 cg	20	Total	assets (Par	t X, line 16)				17,023,114	18,617,633
Ž.	21			Part X, line 26)				12,787,115	13,246,911
žĒ	22		-	d balances Subtract line 2				4,235,999	5,370,722
Pai	rt II	Sign	ature Blo	ock					
				rjury, I declare that I have exar					
		and bel	ief, it is true, i	correct, and complete Declaration	on of preparer (other than	officer) is based	on all informat	ion of which prep	arer has any knowledge
Sigr	1	***	*****						
Here		Sign	ature of office	er	Date				
		Paul	Schuchert CF	FO & SR Vice President					
			e or print nam						
		Preparei	r's L		Date	С	heck if	Preparer's ider	ntıfyıng number
Paid		signatur					elf- mpolyed 🕨 🦵	(see instruction	
	arer's	Firm's n	ame (or your	s L GRANT THORNTON LLP					
Use		ıf self-eı	mployed),)				EIN 🕨	
	•	address,	and ZIP + 4	666 THIRD AVENUE	Phone no 🕨	(212) 599-0100			
		<u> </u>		NEW YORK, NY 10017401					
May	the IR	S discus	ss this retu	rn with the preparer shown	above? (see instructi	ons)			▼ Yes

Cat No 11282Y

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

SEEDCO, STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION, IS A NATIONAL COMMUNITY DEVELOPMENT ORGANIZATION THAT WORKS WITH LOCAL NONPROFITS TO CREATE ECONOMIC OPPORTUNITIES FOR JOB SEEKERS, WORKERS, AND SMALL BUSINESS OWNERS IN DISADVANTAGED COMMUNITIES THROUGH INNOVATIVE PROGRAMS, FINANCIAL ASSISTANCE, AND TECHNICAL SUPPORT, SEEDCO PROMOTES ECONOMIC DEVELOPMENT AND STRENGTHENS COMMUNITY-BASED NONPROFIT ORGANIZATIONS SEEDCO'S PROGRAMS ARE DESIGNED TO 1) SUPPORT LOW-INCOME JOB SEEKERS TO FIND AND SECURE EMPLOYMENT AND ACCESS SUPPORTS AND BENEFITS SUCH AS FOOD STAMPS AND THE EARNED INCOME TAX CREDIT AND 2) HELP LOW-INCOME WORKERS ACHIEVE FINANCIAL SECURITY AND CAREER ADVANCEMENT BY INCREASING THEIR EARNINGS AND BUILDING THEIR SKILLS AND ASSETS SEEDCO ALSO ASSISTS SMALL BUSINESSES BY PROVIDING BUSINESS PLANNING, MARKETING ASSISTANCE, ACCESS TO FINANCING, AND OTHER SERVICES SEEDCO DEVELOPS NEW AND INNOVATIVE PROGRAM MODELS FROM EVIDENCE-BASED RESEARCH AND ON-THE-GROUND EXPERIENC

2	Did the organization un the prior Form 990 or 9				which were not listed on	┌ Yes ┌ No
	If "Yes," describe these	new services on Sc	hedule O			
3					ducts, any program	┌ Yes ┌ No
	If "Yes," describe these	changes on Schedu	le O			
4		501(c)(4) organizati	ons and section	on 4947(a)(1) trusts ar	argest program services be required to report the an ervice reported	•
4a	(Code) (Expenses \$	17,536,482	ıncludıng grants of \$	14,832,554) (Revenue \$	0)
	advancement Seedco prov that they are work ready, populations of this work ar	rides its job training and j b) connect them to qualit e low-income adults and i ted individuals, and other	ob preparation se y jobs with advar dislocated worker at-risk populatio	rvices through networks of oncement opportunities, and of its including individuals transing Seedco implements work	community-based organizations c) provide supportive services to itioning off welfare, legal immig	eve lasting employment and career that work with clients to a) ensure ensure job retention. The target rants with language and cultural ng primarily in New York City and
4b	(Code) (Expenses \$	20,119,003	ıncludıng grants of \$	11,892,072) (Revenue \$	68,587)
	that have a proven impact program, EamBenefits, 2) connects workers to benefi with case management sei Washington D C , offering Mayor Michael Bloomberg's	on long-term job retentice their National Housing Costs such as Food Stamps, vices in five cities around pre- and post-purchase cost Center for Economic Opphen they complete activities.	on and financial so unseling Network the Earned Incom the country See ounseling, rental a portunity to imple ties aimed at brea	ecurity Asset Building is com, and 3) OpportunityNYC, Note Tax Credit, and subsidized doo provides Housing Couns assistance, and assistance for ment Opportunity NYC, a problem the cycle of poverty.	prised of three key programs : ew York City's conditional cash t I health insurance through an or	transfer pilot program EarnBenefits nline application system combined k of 43 affiliates in 13 states and ty, Seedco has partnered with ncentives to households and
4c	(Code) (Expenses \$	2,131,325	including grants of \$	609,647) (Revenue \$	0)
	financial assistance, busine Centers in Upper and Lowe assistance and capacity bu	ss planning, and referrals r Manhattan, funded by t Ilding services to governm led the US Department	for professional s he New York City ent agencies and	services Seedco's small busi Department of Small Busing programs, non-profit intern	ess Services Technical Assistanc nediaries, and faith- and commi	New York City Business Solutions
4d	Other program service	es (Describe in Sche	dule O)			
	(Expenses \$	•	iding grants of	· \$) (Revenue \$)
4e	Total program service	expenses > \$	39,786,81	0		

Dart TV	Checklist	of Deau	irad S	chadulae
	CHECKHSI	. vi keuu	neu si	uneuures

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		N o
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
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		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance		
	Part V	Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		163	-110
	1a 36			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
-	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νο
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
17=	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	124		
D	vear			

915 BROADWAY 17TH FLOOR NEW YORK, NY 10010 (212) 473-0255

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

Se	ction A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body						
ь	Enter the number of voting members of the governing body						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any						
_	other officer, director, trustee, or key employee?	2		Νo			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νo			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo			
6	Does the organization have members or stockholders?	6		Νo			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		N			
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal	9		Νo			
	venue Code.)						
	•		Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b					
11	1 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?						
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990	11	Yes				
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes				
13	Does the organization have a written whistleblower policy?	13	Yes				
14	Does the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b	Yes				
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
Se	ction C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed ▶ DE, GA, MD, NY, TN						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	n 🕨			
	PAUL SCHUCHERT						

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

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or 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 the organization did i	ffice	r, dırector, trustee	or key employee							
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶12			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
GRANT THORNTON LLP 33570 TREASURY CENTER CHICAGO, IL 60694	accounting	173,450
LAGAN TECHNOLOGIES LIMITED 6903 ROCKLEDGE DRIVE SUITE 920 BETHESDA, MD 20817	ınfo technology	167,995
DCF Advertising 86 Franklin Street 4th Floor NEW YORK, NY 10013	Advertising	124,167
ZOTECA INC 64 BEAVER STREET SUITE 195 NEW YORK, NY 10004	ınfo technology	398,902
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►4	who received more than	

Νo

Form 9								Page 9
Part	A1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
芸芸	1a	Federated cam	paigns 1a					
e de	Ь	Membership du	es 1b					
ts, g	C		ents 1c					
<u> </u>	d	Related organiz Government grants	eations 1d	28,081,802				
Sir. Siri	e f	_	ons, gifts, grants, and 1f	16,676,720				
ributio	g	sımılar amounts no Noncash contri	ot included above butions included in					
Program Service Revenue and other similar amounts	h		s 1a-1f	▶	44,758,522			
<u>a</u>				Business Code				
re III	2a	PROGRAM/PROCES	SSING FEES	900,099	68,587	68,587		
æ	b							
исе Ве	c							
Š	d							
ran	e f	All other progra	am service revenue					
્રે	'							
	g		s 2a-2f		68,587			
	3		ome (including dividend ar amounts)	-	18,815			18,815
	4		stment of tax-exempt bond p		0			
	5	Royalties		• [0			
			(ı) Real	(II) Personal				
	6a	Gross Rents Less rental						
	b	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities -4,828	(II) O ther				
	Ь	Less cost or other basis and						
		sales expenses Gaın or (loss)	-4,828					
	d		s)		-4,828			-4,828
	8a		rom fundraising					
Other Revenue		\$of contributions	s reported on line 1c) le 18					
ā	b	Less direct ex	penses b					
₹	С	Net income or ((loss) from fundraising e	events 🛌	0			
	9a		rom gaming activities ne 19					
	b c		penses b (loss) from gaming activ	/ities►	0			
	10a	Gross sales of returns and allo	inventory, less					
	b		a oods sold b					
	С	Net income or ((loss) from sales of inve	Business Code	0			
	11a	MGMT SVCS T	O TAX-EXEMPT	900,099	1,606,437			1,606,437
	Ь	AFFILIATE (SF		900,099	307,218			307,218
	C	All other reven						
	e e		ue [s 11a-11d		1,913,655			
	12	Total revenue.	See Instructions	▶	46 754 751	60 507		1 027 642

46,754,751

68,587

	990 (2009)				Page 10
Par	Statement of Functional Expenses				
А	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	13,878,775	13,878,775		· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	13,868,834	13,868,834		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	13,808,834	13,000,034		
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	1,753,186		1,753,186	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	8,114,321	7,041,000	816,016	257,305
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	410,043	292,744	106,621	10,678
9	Other employee benefits	931,146	664,325	242,532	24,289
10	Payroll taxes	721,025	514,486	187,732	18,807
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	22,246	370	21,876	
с	Accounting	195,880	2,369	193,511	
d	Lobbying	39,250		39,250	
e	Professional fundraising See Part IV, line 17	68,775			68,775
f	Investment management fees	0			
g	Other	1,661,456	1,399,320	262,136	
12	Advertising and promotion	0			
13	Office expenses	702,995	402,560	298,346	2,089
14	Information technology	385,119	234,143	150,976	
15	Royalties	0			
16	Occupancy	1,541,581	895,065	587,415	59,101
17	Travel	182,237	167,868	12,053	2,316
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	·		· · · · ·
19	Conferences, conventions, and meetings	64,968	38,913	26,055	
20	Interest	82,199		82,199	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	447,566		447,566	
23	Insurance	80,026		80,026	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	BAD DEBT EXPENSE	334,663	334,663		
b	BOARD EXPENSES	38,418		38,418	
с	MEMBERSHIP AND DUES	23,496	6,176	15,950	1,370
d	MISCELLANEOUS	71,823	45,199	29,179	-2,555
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	45,620,028	39,786,810	5,391,043	442,175
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational				,
	campaign and fundraising solicitation				000 (2.0

Part X Balance Sheet (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 1 2 7.042.070 2 4.572.021 8,697,927 8,810,420 3 3 4 823.085 686.184 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 15.826 7 996 Inventories for sale or use 424,359 213,570 Land, buildings, and equipment cost or other basis Complete 4.685.898 10a 10a Part VI of Schedule D 10b 3.334.312 1.351.586 b Less accumulated depreciation 1,379,239 **10c** 881.251 11 0 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 229.406 15 15 512.807 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 17,023,114 16 18,617,633 3.964.382 17 3,703,106 17 Accounts payable and accrued expenses . 18 18 2,737,203 19 3,574,328 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 900.000 1,850,000 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 5.185.530 25 4,119,477 25 Other liabilities Complete Part X of Schedule D 26 **Total liabilities.** Add lines 17 through 25 12,787,115 13,246,911 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 1.902.013 2.801.583 27 Unrestricted net assets 27 28 2.333.986 28 2.569.139 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 4,235,999 5,370,722 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 17.023.114 34 18,617,633

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
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	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Employer identification number

STRUC	Name of the organization STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION			C DEVELOPMENT					Employer identification number				
			on for Dul	alia Charity Stat	(All oro	anizations i	must same	lata this na	13-287574				
	rt I			olic Charity State foundation because						tructions			
1	/ ga			on of churches, or as:					,				
2	<u>'</u>			in section 170(b)(1)				(+/(~/(-).					
3	<u>'</u>			perative hospital serv				170(b)(1)(۸ ۱/iii)				
4	,	-	-	organization operate	=					(A)(iii) Ent	er the		
•	'			y, and state	.u m conjune	ction with a n	ospitui uese	TIDEA III Sec e	ion 170(D)(1)	(A)(III)(E)			
5	Г	An orga	ınızatıon ope	rated for the benefit	of a college	or university	owned or op	erated by a	governmental	l unit describ	 ed ın		
		section	170(b)(1)(A)(iv). (Complete Pa	rt II)								
6	\sqcap	A feder	al, state, or	local government or	governmenta	al unıt descrı	bed in sectio	on 170(b)(1)	(A)(v).				
7	▽	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
	_			A)(vi) (Complete Pa	•	NVvil (Com	lata Dart II	,					
8 9	<u> </u>		· ·	described in section				-	itions mamb	arabın faaa	and aross		
9	'			t normally receives ties related to its ex									
		•		ss investment incom	•	_		•					
			_	anızatıon after June 3						x, nom basii	.03303		
10	\vdash	•		anized and operated	•			•	•				
11	<u></u>	_	_	anized and operated	•	•	•			carry out the	purposes of		
	·	one or r	nore publicly	supported organizates the type of supported by Type II	tions descri rting organi	bed in sectio	n 509(a)(1) mplete lines	or section 50 11e through	09(a)(2) See	•	(a)(3). Check		
е	Γ	other th	-	x, I certify that the o	rganızatıon	ıs not contro	lled directly	or indirectly	•	•	•		
f			rganızatıon r	eceived a written de	termination	from the IRS	that it is a T	ype I, Type	II or Type III	I supporting	organization,		
g		Since A		006, has the organız	ation accep	ted any gift o	r contributio	n from any o	fthe				
				ectly or indirectly co	•			ersons desc	rıbed ın (ıı)		Yes No		
				joverning body of the			ion ⁹			11g(i)			
			•	r of a person describ	• •					11g(ii)			
				ed entity of a person						11g(iii)	<u> </u>		
h 		Provide	the followin	g information about t	he supporte	d organizatio	n(s)		_				
(i) Name suppor organiza		e of (ii) orted EIN		(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organization in col (i) listed in ve vour governing		(v) Did you no organizat col (i) of suppo	tify the tion in f your	(vi) Is th organizat col (i) org in the U	e :ion in anized	(vii) A mount of support?		
				instructions))	Yes	No	Yes	No	Yes	No			
Total			İ			1		1			1		

Support Schedule for Organizations Described in IRC 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.)

_	(Complete only if y	ou checkeu the	e box on line 3,	7, 01 6 01 Part.	1.)			
	ection A. Public Support			1	1			
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
1	Gifts, grants, contributions, and							_
	membership fees received (Do no	t 14,858,90	10,746,13	24,808,436	39,401,615	44	,758,522	134,573,612
	include any "unusual						,,	,,
,	grants ") Tax revenues levied for the							
2	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	14,858,90	04 10,746,13	24,808,436	39,401,615	11	,758,522	134,573,612
4	Total. Add lines 1 through 3	14,030,30	10,740,13	24,000,430	33,401,013		,730,322	154,575,012
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							134,573,612
	ection B. Total Support							
	endar vear (or fiscal year							
-	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
7	A mounts from line 4	14,858,904	270,111	24,808,436	39,401,615	44,	758,522	134,573,612
8	Gross income from interest,							
	dividends, payments received							
	on securities loans, rents,	377,575	270,111	287,652	174,889		15,629	1,125,856
	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 (Explain in Part							
	IV) Do not include gain or loss	0	0	1,077,781	602,065	1.	913,747	3,593,593
	from the sale of capital			, ,	´	,	, l	, ,
	assets							
11	Total support (Add lines 7 through 10)							139,293,061
12	Gross receipts from related activity	ties.etc (See ins	structions)	I	I	12		3,358,686
	First Five Years If the Form 990 is			d +b.ud fa+b a	fifth to wood on a		2\	
13	check this box and stop here	s for the organiza	tion's mist, secon	a, tillia, louitii, oi	IIIIII I I AX YEAI AS A	501(0)(3	o) organiz	▶
	check this box and stop here							. ,
S	ection C. Computation of Pu	blic Support	Percentage					
14	Public Support Percentage for 200			= 11 column (f))		14		96 612 %
15	Public Support Percentage for 200	08 Schedule A . P	art II. line 14			15		88 480 %
162	33 1/3% support test—2009. If th	e organization di	not check the h	ov on line 13 and	line 14 is 33 1/30/		chack t	
LUU	and stop here. The organization qu				IIIIe 14 13 33 1/3/	o or more	, check t	▶ ▼
ь	33 1/3% support test—2008. If th	•	, , ,		6a, and line 15 is	3 3 1/3%	or more,	
	box and stop here. The organization	on qualifies as a j	oublicly supported	d organization	,		,	▶ ┌
17a	10%-facts-and-circumstances tes		-					
	is 10% or more, and if the organiz							
	in Part IV how the organization me	eets the "facts ar	id circumstances	test The organiz	zation qualifies as	a publicl	y support	- -
h	organization 10%-facts-and-circumstances test	t—2008 Ifthe or	danization did not	check a hov on lu	ne 13 16a 16b <i>i</i>	nr 17= =n	d line	►
	15 is 10% or more, and if the orga							
	Explain in Part IV how the organiz			,				
	supported organization				- '		•	▶ ┌
18	Private Foundation If the organiza	ition did not chec	k a box on line 13	3, 16a, 16b, 17a o	or 17b, check this	box and	see	. -
	instructions							▶ □

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 13-2875743

Name: STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT

CORPORATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours		tion (che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Highest compensated employee Key employee Officer		Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
George A Pruitt Chairperson	1 0	X		Χ				7,400	0	0
Lilliam Barrios-Paoli Vice Chairperson	1 0	Х		Х				1,600	0	0
Judith Clabes Secretary/ Treasurer	1 0	X		Χ				5,400	0	0
Stanley Brezenoff Board Member	1 0	Χ						0	0	0
Maurice L Coleman Board Member	1 0	Χ						2,300	0	0
Paul R Franke III Board Member	1 0	Χ						0	0	0
Robert P Giloth Board Member Mitchell Gordon	1 0	X						0	0	0
Board Member	1 0	Х						0	0	0
Demetra Smith Nightingale Board Member	1 0	X						4,800	0	0
Sandra L Phillips Board Member	1 0	X						3,900	0	0
Julie Hertzog CFO/Executive VP	35 0			Χ				185,286	0	13,877
Diane Baillargeon President Andrea Phillips	35 0			Χ				299,935	0	20,229
Executive Vice President Solomon Malach	35 0				Х			223,736	0	11,034
General Counsel	35 0					Х		144,243	0	13,253
Gail Quan SR VP FOR HR/Admin	35 0					X		134,782	0	8,183
Tammy Folk Controller	35 0					X		137,028	0	11,452
Francine Delgado SR Vice President	35 0					X		116,733	0	12,547
Laura Seidel SR-Vice President William Grinker	35 0					Χ		103,628	0	14,587
Former Secretary of the Board	1 0						Х	0	273,536	22,684

DLN: 93493315036320

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

> ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Se	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part I ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete	Part II-B	Do	not co	mplete Par					
	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, linction 501(c)(4), (5), or (6) organizations Complete Part III	e 35a (r	ega	rding	proxy tax), then				
N a					r identification number					
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s	ection	52	7 org	ganizatio	n.				
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV								
2	Political expenditures	•		\$						
3	V olunteer hours			_						
Par	t I-B Complete if the organization is exempt under section 501(c)(3).									
1	Enter the amount of any excise tax incurred by the organization under section 4955		•	\$						
2	Enter the amount of any excise tax incurred by organization managers under section 4955		•	\$						
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				┌ Yes	┌ No				
4a	Was a correction made?				☐ Yes	┌ No				
b	If "Yes," describe in Part IV									
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	50	1(c)	(3).					
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ıvıtıes	F	\$						
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5 exempt funtion activities	27	Þ	\$_						
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	-	\$						
4	Did the filing organization file Form 1120-POL for this year?			· –	┌ Yes	┌ No				
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount paid from the filing organization's funds contributions received that were promptly and directly delivered to a separate political organization or a political action committee (PAC). If additional space is needed, provide information in Page 1.	Also ei on, such	nter	the a	mount of po	olitical				

(a) Name	(b) A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	000				
	Over \$1,500,000 but not over \$17,000,000	00				
	Over \$17,000,000 \$1,000,000					
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768	3
	(election under section 501(h)).	

		(a	1)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νο		
С	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νο		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		39,250	
j	Total lines 1c through 1i			39,250	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ľ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo		
Dar	t THEA. Complete if the organization is example under section $FO1(c)(4)$, section	E01/6	\ <u>_</u>	r coction	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes". 1 Dues, assessments and similar amounts from members

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Schedule C, Lobbying Activities		Seedco does not undertake any active lobbying activities, however, it does pay a consulting firm to undertake lobbying initiatives on its behalf For the year ending December 31, 2009, Seedco paid Capalino & Company \$39,250 to lobby on behalf of Seedco on issues pertinent to its tax exempt mission

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As Filed Data

DLN: 93493315036320

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION 13-2875743 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or C)the	<u>r Similar</u>	Asse	: ts (cc	ntınued)
	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne foll	owing t	hat ar	e a sıgnıfıc	ant u	ise of its co	llection	1	
а	Public exhibition		d	Γ	Loan	orexcl	hange prog	rams				
b	Scholarly research		e	\sqcap	Other							
С	Preservation for future generations											
	Provide a description of the organization's co Part XIV	ollections and expla	ıın hov	n the	y furthe	r the c	organization	ı's ex	kempt purpo	se in		
	During the year, did the organization solicit cassets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
Part	Part IV, line 9, or reported an an						n answere	d "Y	es" to For	m 990),	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	tions	or other ass	sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	ung ta	able		Г			A mou		
c	Beginning balance						ŀ	1c				
_	Additions during the year						ŀ	1d				
	Distributions during the year						ŀ	1e				
f	Ending balance						<u> </u>	1f				
	Did the organization include an amount on Fo	orm 990 Part V lin	717 م				L		I		Yes	┌ No
			c Z I ,							1	. C3	, 140
Par	If "Yes," explain the arrangement in Part XIV t V Endowment Funds. Complete i		n ans		ad "Va	s" to I	Form 990	Dar	t IV line	10		
rai	Lindowinent i unus. Complete i	(a)Current Year		Prior \			o Years Back		Three Years B		Four Y	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment - %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are helo	l and a	dmınıstere	d for	the			
	organization by								г		Yes	No
	(i) unrelated organizations							•		3a(i)	 	<u> </u>
	(ii) related organizations							•		3a(ii) 3b		<u> </u>
	Describe in Part XIV the intended uses of th	·						•	[3D		
- Part						90 Pa	art X line	10				
	<u>, </u>	., a.i.a Equipinic) Cost or	•	(b)Cost or		(c) Accumu	lated		
	Description of investment				is (invest		basis (oth		depreciat		(d) Bo	ok value
	and		•	<u> </u>								
	Buildings		•									
	easehold improvements		•	<u></u>		0		9,020	· ·	98,329		350,691
	quipment		•	<u> </u>		0		1,371		61,026		840,345
e 0) ther			1		0	63	5,507	4	74,957		160,550
		000 -	7							1		1,351,586

(a) Description of security or category		. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
	•	
Part VIII Investments—Program Related. Se	<u>e Form 990, Part X, line 1</u> 	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		,
(•	
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, In	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, II (a) Descri	ne 15. ption	(b) Book value
Part IX Other Assets. See Form 990, Part X, II (a) Description Total. (Column (b) should equal Form 990, Part X, col.(B) line	ne 15. ption	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	ne 15. ption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount 0 4,119,477	

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	46,754,751
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	45,620,028
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,134,723
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,134,723
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	46,754,751
2	A mounts 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	1	
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	46,754,751
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	46,754,751
Par	EXIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Ret	
1	Total expenses and losses per audited financial statements	₁	45,620,028
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	45,620,028
4	A mounts 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 XIV) 4b]	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	45,620,028
Pa	rt XIV Supplemental Information		

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Fin 48	Part X	IN JULY 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES" WHICH PRESCRIBES A THRESHOLD FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN ONLY TAX POSITIONS MEETING THE MORE-LIKELY-THAN- NOT RECOGNITION THRESHOLD AT THE EFFECTIVE DATE MAY BE RECOGNIZED OR CONTINUE TO BE RECOGNIZED UPON THE ADOPTION OF THIS INTERPRETATION THIS STANDARD ALSO PROVIDES GUIDANCE ON ACCOUNTING FOR DERECOGNITION, INTEREST AND PENALTIES, AND CLASSIFICATION AND DISCLOSURE OF MATTERS RELATED TO UNCERTAINTY IN INCOME TAXES SEEDCO WAS REQUIRED TO ADOPT THIS STANDARD FOR THE YEAR ENDED DECEMBER 31, 2009, AND DETERMINED THAT IT DID NOT HAVE A MATERIAL IMPACT ON THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS
Schedule D, Parts XI, XII & XIII - Reconciliation		Structured Employment Economic Development Corporation (SEEDCO) files a consolidated audited financial statement with its subsidiaries, N-PAC and Seedco Financial Services SEEDCO's Part XI reconciliation reconciles back to SEEDCO's profit and loss data in the financial statements and does not take into account its subsidiary's data as each organization's financial operations are identified separately before consolidation

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DLN: 93493315036320

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

licensing

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

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

Name of the organization STRUCTURED EMPLOYMENT ECONOMI CORPORATION	C DEVELOPMENT				13-2875743	tification number
Part I Fundraising Activities. Form 990-EZ filers are not				to Form	990, Part IV,	line 17.
 Indicate whether the organization rai Mail solicitations Internet and e-mail solicitations Phone solicitations In-person solicitations Did the organization have a written or key employees listed in Form 990 If "Yes," list the ten highest paid indito be compensated at least \$5,000 be 	r oral agreement with , Part VII) or entity i viduals or entities (fu	e f f g f i any individu n connection	Solicitation of nor Solicitation of gov Special fundraisin al (including office with professional ursuant to agreem	n-governn vernment ig events rs, directo fundraisin ents unde	nent grants grants ors, trustees g activities? r which the fun	
(i) Name of individual or entity (fundraiser)	tivity tivity control contributi	r have y or (iv l of) Gross receipts from activity	(or re fundrais	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
Total		>				

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
b		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Department of the Treasury

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

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

OMB No 1545-0047

2009

DLN: 93493315036320

Open to Public
Inspection

internal Revenue Service							Tilsbection
Name of the organization						Employer identification	on number
STRUCTURED EMPLOYMENT ECONO CORPORATION Part I General Information						13-2875743	
 Does the organization maintain re the selection criteria used to awa Describe in Part IV the organizat 	ird the grants or as:	sistance?			•	•	▽ Yes ┌ N
Form 990, Part IV, line Part IV and Schedule I	21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient received	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Part IIII Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Participant Incentives for NY Asset Building Progr	4350	8,555,192			
Participant Incentives for NY Workforce Programs	100	13,939			
Participant Payments for TN Workforce Program	1575	135,663			
Participant Transportation subsidies for TN Workfo	14152		5,164,040	market cost	transp/gas

Ident if ier	Return Reference	Explanation
schedule I- monitoring of grants		Seedco monitors grants to recipients through a combination of financial reports, written reports, and/or site visits, depending on the program through which the organization is funded. Seedco also reviews audited financial statements and OMB A-133 reports of grantees, if applicable, and follows up on findings with recipients who have material weaknesses or significant deficiencies in their internal controls to examine their corrective action plans.

Software ID:

Software Version:

EIN: 13-2875743

Name: STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT

CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Torin 330,3chedale 1, Tal	1 22/ 01 4110 411	u other Abbibtance	to dovernments	una organización	J III tile ollitea ota		1
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
28TH Legislative District and Community DevelopmenPO Box 4703 Chattanooga,TN 37405	62-1548179	501(c)(3)	17,242				Asset Building
A Share Initiative Inc5508 Citrus Boulevard Harahan, LA 70123	20-2258602	501(c)(3)	14,760				Asset Building
Ace Development Corp215 Lakewood Way SW Suite 104B Atlanta, GA 30315	58-2233471	501(c)(3)	25,035				Asset Building
ACORN16 West 25th St Baltimore, MD 21218	52-2416966	501(c)(3)	8,887				Asset Building
Alabama A&M University Comm Development Corp117 Wholesale Avenue Huntsville, AL 35811	31-1659380	501(c)(3)	26,618				Asset Building
Asian American Resource Foundation Inc2855 Rolling Pin Lane Suwanee, GA 30024	58-2321987	501(c)(3)	12,539				Asset Building
Association for Energy Affordability105 Bruckner Boulevard Bronx, NY 10454	13-3374285	501(c)(3)	30,000		_		Workforce Dev
Atlanta Workforce Development Agency Board 818 Pollard Blvd Atlanta, GA 30315	58-1336367	501(c)(3)	21,875				Asset Building
Baltimore CASH Campaign 111 Water Street Suite 201 Baltimore, MD 21202	52-2278450	501(c)(3)	11,897				Asset Building
Belair-Edison Neighborhoods Inc3412 Belair Road Baltimore, MD 21213	52-1755185	501(c)(3)	56,687				Asset Building

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable organization grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) Binghampton Development 501(c)(3) Asset Building 20-0062075 Corporation3000 Walnut 25,225 Grove Road at Tillman Memphis, TN 38111 Asset Building Asset Building Workforce Dev Asset Building Work Dev/Asset Bronx, NY 10453 501(c)(3) Asset Building Brownsville Community 11-2544630 Development Center592 194,620 Rockaway Avenue Brooklyn, NY 11212 Workforce Dev Case Management4041 62-1434530 501(c)(3) Knight Arnold Road 1,298,320 Memphis, TN 38118 Catholic Charities 13-5562185 501(c)(3) Asset Building Community Services 1011 271,854

19,500

Asset Building

Birmingham Homeownership Center4117 Second Ave South Birmingham, AL 35222	32-0094219	501(c)(3)	112,454		
Bon Secours of Maryland Foundation Inc26 North Fulton Avenue Baltimore, MD 21223	52-1732800	501(c)(3)	60,059		
Bridges USA Inc477 North 5th Street Memphis,TN 38105	23-7081488	501(c)(3)	1,647,631		
Brooklyn Housing and Family Services415 Albemarle Road Brooklyn, NY 11218	11-2412584	501(c)(3)	134,271		
BronxWorks INC (formely Citizens Advice Bureau I60 East Tremont	13-3254484	501(c)(3)	654,875		V

501(c)(3)

13-3843322

First Avenue

New York, NY 10022

Opportunities Inc32

Broadway 15th Floor New York, NY 10004

Center For Employment

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable valuation non-cash assistance or assistance organization grant cash (book, FMV, appraisal, or government assistance other) 13-4144073 Workforce Dev Century 21 Department Store 22 Cortlandt Street 24,718 New York, NY 10007 Chinese-American Planning 13-6202692 501(c)(3) Workforce Dev Council Inc150 Elizabeth 160.353 Street New York, NY 10012 Christ Community Health 62-1583270 501(c)(3) Asset Building Services Inc2595 Central 19,663 Avenue Memphis, TN 38104 501(c)(3) CAMBA Inc1720 Church 11-2480339 Work Dev/Asset Avenue 221,088 Brooklyn, NY 11226 501(c)(3) Community Development 62-1514675 Asset Building Council of Greater Memphis 38.663 1548 Poplar Avenue Memphis, TN 38104 Workforce Dev Cooperative Home Care 13-3238142 Associates 349 E 149th 15,055 Street 5 Bronx, NY 10451 Corporation to Develop 59-3150608 501(c)(3) Asset Building Communities of Tampa Inc 65,824 1907 E Hillsborough Avenue Tampa, FL 33610 Cypress Hills Local 11-2683663 501(c)(3) Work Dev/Asset Development Corp625 183,559 Jamaica Avenue Brooklyn, NY 11208 D&E A Financial Education & 58-2515058 501(c)(3) Asset Building Training Institute 4820 245,936 Jonesboro Road Forest Park, GA 30297 56-2140536 501(c)(3) Dominion Financial Asset Building Management INC660 66,823 Fitzhugh Blvd Suite 108

Smyrna, TN 37167

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable organization grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) **Episcopal Community** 501(c)(3) 22-3072251 Asset Building Development Inc31 Mulberry 49,043 Street Newark, NJ 07102 Exchange Club Family Center 62-1237360 501(c)(3) Asset Building 139 Thomspon Lane 38,062 Nashville, TN 37211 Family Services Agency628 71-0237511 Asset Building 501(c)(3) W Broadway Suite 300 41,153 North Little Rock, AS 72114 76-0288037 Fifth Ward Community 501(c)(3) Asset Building Redevelopment CorpPO Box 63,288 21502 Houston, TX 77226 Financial Counselors of 62-1851924 501(c)(3) Asset Building AmericaPO Box 111124 35,997 Memphis, TN 38111 Frayser Community 58-2158058 Asset Building 501(c)(3) Development Corp3684 N 35,590 Watkıns Memphis, TN 38127 Gav Men's Health Crisis119 Workforce Dev 13-3130146 501(c)(3) West 24th Street 5th Floor 157,249 New York, NY 10011 Greater Deliverance Baptist 58-0566245 501(c)(3) Asset Building Church705 Joseph E Lowery 7,500 Boulevard NW Atlanta, GA 30318 Groundwork Inc595 Sutter 73-1625176 Asset Building 501(c)(3) Avenue 194,570 Brooklyn, NY 11207 13-3516262 Work Dev/Asset Harlem Congregations for 501(c)(3) Community Improvement In 74,281 2854 Frederick Douglas Blvd New York, NY 10039

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applicable valuation non-cash assistance organization grant cash or assistance (book, FMV, appraisal, or government assistance other) Hellenic American 11-2290832 501(c)(3) Workforce Dev Neighborhood Action 10,000 Committee (H29 West 45th Street 4th Floor New York, NY 10036 13-1562242 501(c)(3) Workforce Dev Henry Street Settlement265 Henry Street 279,783 New York, NY 10002 Highbridge Community Life 501(c)(3) 13-3015539 Workforce Dev Center Inc979 Ogden 295,269 Avenue Bronx, NY 10452 Housing Conservation 51-0141489 501(c)(3) Asset Building Coordinators Inc777 Tenth 56,332 Avenue New York, NY 10019 Interagency Council of 13-2938951 501(c)(3) Workforce Dev Mental Retardation & Develo 15,000 150 West 30th Street 15th Floor New York, NY 10001 52-2278450 501(c)(3) Asset Building Job Opportunities Task Force 111 Water Street 10.025 Baltimore, MD 21202 23-7085442 501(c)(3) Legal Momentum395 Hudson Workforce Dev Street 6,172 New York, NY 10014 MANNA Inc828 Evarts 52-1260698 501(c)(3) Asset Building Street NE 21,067 Washington, DC 20018 62-1413010 501(c)(3) Workforce Dev Memphis Area Community Solutions 22 North Front 9,950 Street Memphis, TN 38103 62-0841436 501(c)(3) Memphis Area Legal Services Asset Building 109 N Main Street 2nd Floor 240,920 Clari Memphis, TN 38103

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (d) A mount of cash (a) Name and address of **(b)** EIN (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable organization grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501(c)(3) Asset Building Memphis Housing Resource 62-1601035 Center INC2400 Poplar 49,062 Avenue Suite 220 Memphis, TN 38112 62-1368173 Asset Building Neighborhood Housing 501(c)(3) Opportunities 1548 Poplar 49,727 Avenue Memphis, TN 38104 32-0039696 501(c)(3) New Heights Neighborhood Workforce Dev uilding Asset ulding ulding uilding

		19,445				
74-2275534	501(c)(3)	43,372				Asset Building
13-2972415	501(c)(3)	364,001				Work Dev/Asset
62-1507096	501(c)(3)	41,437				Asset Building
72-1209712	501(c)(3)	47,783				Asset Building
13-2707665	501(c)(3)	34,868				Asset Building
58-1409385	501(c)(3)	1,226,518				Work Dev/Asset
	13-2972415 62-1507096 72-1209712 13-2707665	13-2972415 501(c)(3) 62-1507096 501(c)(3) 72-1209712 501(c)(3) 13-2707665 501(c)(3)	74-2275534 501(c)(3) 43,372 13-2972415 501(c)(3) 364,001 62-1507096 501(c)(3) 41,437 72-1209712 501(c)(3) 47,783 13-2707665 501(c)(3) 34,868	13-2972415 501(c)(3) 364,001 62-1507096 501(c)(3) 41,437 72-1209712 501(c)(3) 47,783 13-2707665 501(c)(3) 34,868	74-2275534 501(c)(3) 43,372 13-2972415 501(c)(3) 364,001 62-1507096 501(c)(3) 41,437 72-1209712 501(c)(3) 47,783 13-2707665 501(c)(3) 34,868 58-1409385 501(c)(3)	74-2275534 501(c)(3) 43,372 13-2972415 501(c)(3) 364,001 62-1507096 501(c)(3) 41,437 72-1209712 501(c)(3) 47,783 13-2707665 501(c)(3) 34,868 58-1409385 501(c)(3)

64,127

Asset Building

Ridgewood Bushwick Senior

Citizens Council INC555

Bushwick Avenue Brooklyn, NY 11206 11-2453853

501(c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) SEEDCO Financial Services 59-3814814 501(c)(3) Community Entr Inc915 Broadway 18th Floor 609,647 New York, NY 10010 Single Parent Alliance and 58-2605168 501(c)(3) Asset Building Resource Center4650 Jimmy 9,063 Carter Blvd Suite 116B Norcross, GA 30093 Saint Vincent de Paul 58-0967972 501(c)(3) Asset Building Society Inc2050-C 22,966 Chamblee Tucker Road Atlanta, GA 30341 501(c)(3) 52-1034466 Asset Building Southeast Community Development Corp3700 31,537 Eastern Avenue Baltimore, MD 21224 Southeast Memphis 20-0565167 501(c)(3) Asset Building Community Development 27,730 Corp3150 Lenox Park Blvd Memphis, TN 38115 501(c)(3) St Nicholas Neighborhood 51-0192170 Work Dev/Asset Preservation Corp11 476,847 Catherine Street Brooklyn, NY 11211 Tennessee Community 62-1413010 501(c)(3) Workforce Dev Services Agency1604 West 1,667,413 Reelfoot Avenue Union City, TN 38261 13-3931074 501(c)(3) Workforce Dev The Bronx Defenders 860 Courtlandt Ave 78,189 Bronx, NY 10451 The Center for Working 43-2071145 501(c)(3) Asset Building Families Inc447 Windsor 119,462 Street Suite 304 Atlanta, GA 30312 The Development 52-1585905 501(c)(3) Asset Building Corporation of Northwest 30,521 Baltimore3521 West Belvedere Avenue Baltimore, MD 21215

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501(c)(3) The IMPACT Group1255 58-2055819 Asset Building Lakes Parkway Building 100 130,782 Lawrenceville, GA 30043 The Sullivan Center643-645 58-1641941 501(c)(3) Asset Building Dill Avenue SW 37,114 Atlanta, GA 30310 The Works Incorporated1471 62-1751430 501(c)(3) Asset Building Genesis Circle 21,671 Memphis, TN 38106 13-1632530 501(c)(3) Work Dev/Asset Union Settlement Association Inc237 E 104th 213,817 Street New York, NY 10029 University of Maryland 31-1678679 Asset Building Baltimore Foundation Inc 515 23,052 W Lombard Street 3rd Floor Baltimore, MD 21201 University of Tennessee 62-6001636 501(c)(3) Workforce Dev Health Science Center62 367,483 South Dunlap St Suite 300 Memphis, TN 38163 501(c)(3) University Settlement 13-5562374 Asset Building Society of New York184 24,463 Eldridge Street New York, NY 10002 Urban Health Plan1065 23-7360305 501(c)(3) Asset Building Southern Boulevard 148,755 Bronx, NY 10459 Urban Restoration 72-1223347 501(c)(3) Asset Building Enhancement CorpP O Box 51,808 73032 Baton Rouge, LA 70874 501(c)(3) West Jackson CDC1060 J R 58-1947657 Asset Building Lynch Street 23,950 Jackson, MS 39201

Form 990,Schedule 1, Pai	<u>rt II, Grants an</u>	<u>a Otner Assistance</u>	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Westside Community Development CorpPO Box 1969 Tuscaloosa, AL 35401	63-1188022	501(c)(3)	9,223				Asset Building
Worcester East Side Community Development Corp409 Shrewsbury Street Worcester, MA 01604	04-3280116	501(c)(3)	38,132				Asset Building

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DLN: 93493315036320

OMB No 1545-0047

Schedule J

(Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION

Employer identification number

13-2875743

Pa	Questions Regarding Compensation					
					Yes	Νο
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	\sqcap	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe			1b		
2	Did the organization require substantiation prior to rein officers, directors, trustees, and the CEO/Executive Di			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that		y			
	Compensation committee		Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Paror a related organization	rt VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	ymen	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplementa	l non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-base	ed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provi	ide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	e 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	e 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
Ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported in Form 990, Part VII, paid	dora	occured pursuant to a contract that was			
	subject to the initial contract exception described in Re in Part III	egs :	section 53 4958-4(a)(3)? If "Yes," describe			
				8		Νo
9	If "Yes" to line 8, did the organization also follow the re section 53 4958-6(c)?	butt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	. ,	· ''	. ,	. ,				
(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Andrea Phillips	(I) (II)	109,786 0	0 0	113,950 0	8,895 0	2,139 0	234,770 0	0 0
Julie Hertzog	(1) (11)	185,286 0	0	0	9,350 0	4,527 0	199,163 0	0 0
Solomon Malach	(1) (11)	144,243 0	0	0	7,300 0	5,953 0	157,496 0	o 0
Diane Baillargeon	(1) (11)	299,935 0	0	0	15,000 0	5,229 0	320,164 0	0
William Grinker	(1) (11)	0 223,536	0	_	0 11,000	0 11,684	0 296,220	0
-								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
Form 990, Schedule J, Line 4a		Secretary of the Board, William Grinker, separated from service from SEEDCO in the year ending December 31, 2009 Mr Grinker, likewise, served as President of SEEDCO's subsidiary organization, SEEDCO Financial Services As part of his severance package, he received a severance payment of \$50,000 This payment has been disclosed on Schedule J, Part III, column (b)(III) Interim President of Seedco Financial Services, and Executive Vice President of Seedco, Andrea Phillips separated from service from SEEDCO in the year ending December 31, 2009 As part of her severance package, she received a severance payment of \$88,950 This payment has been disclosed on Schedule J, Part III, column (b)(III)

Schedule J (Form 990) 2009

OMB No 1545-0047

Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990

► Attach to Form 990.

Name of the organization STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION

Employer identification number

13-2875743

FORM 990, PART VI, LINE 11 FORM 990, PART VI, LINE 12 FORM 990, PART VI, LINE 15	financial department. A copy of the Forminia electronic mail. Once the audit committed internal Revenue Service. The General Counsel serves as an advisor the annual recertification process and as to key employees, officers, and Directors must recuse themselves from voting on omatters pertaining to potential conflicts conformal employees of the organization exception.	Ily renow ned accounting firm in conjunction with the second with all members of the Board of the Board approved the Form 990, it was elected the Board approved the Form 990, it was elected to directors and key employees regarding potent they arise. As necessary, the General Counsel by the President for discussion with the Board, acroanization matters, and, with the President, make necerning staff members who are not key employed.	Directors in draft form ectronically filed with the stall conflicts, both during rings matters pertaining livises when directors sideterminations on
PART VI, LINE 12 FORM 990, PART VI,	the annual recertification process and as to key employees, officers, and Directors must recuse themselves from voting on o matters pertaining to potential conflicts co	they arise As necessary, the General Counsel by to the President for discussion with the Board, ac rganization matters, and, with the President, make ncerning staff members who are not key employed	rings matters pertaining Ivises when directors s determinations on
PART VI,			
	market through comparison with relevant Abbot, Langer and Associates and PRM Corganizations of comparable size in the N President reviews and approves the sala determined by the Board of Directors bas President's performance against individual assessment of market compensation pacisimilar size in similar fields, as noted in purby Seedco's independent compensation of annually recommends a pool for salary increases for all staff except the Presider Directors when it approves the organizations.	ept the president, Seedco has a salary structure to timum. This salary structure provides competitiver market information. An independent consultant us consulting Group to benchmark Seedco's salaries, ew. York region is the market target for salary contries of all staff of the organization. Compensation ed on its assessment of the company's overall pell goals. The Board's compensation determination a kages for chief executive officers among non-problicly-available published surveys, and from benconsultant from the above-mentioned sources. A Foreases and/or discretionary lump sum payments int, this pool is subsequently determined and appropriate the board of directors. The board of directors determined of directors determined of directors.	ess with the external es surveys published by the average of nonprofit apensation. The for the President is rformance and the also includes an fit organizations of hmarking data supplied Personnel Committee in lieu of salary ved by the Board of pammends annual
FORM 990, PART VI, LINE 19	Finances weblink The organization's fina public that its governing documents and c	ection reserved for financial statements under the ncial statements can be found here and there is a onflict of interest policy are available upon reques m 990 is available upon request at its headquarter	notation instructing the t by contacting
Form 990 Part VII and Schedule J	March 31, 2009 and continued her employ serving as interim President of Seedco Fir President of Seedco and continued in this 2009 From April 1, 2009 through July 31, SEEDCO Ms Phillips received a severance the organization. This amount has been rea \$25,000 payment made to Ms. Phillips in Financial Services. Although this compensiback to Seedco Financial Services is highlighting to ceased serving in the capacity of Preside employment relationship with the organization severance payment of \$50,000 as a result was currently employed by Seedco during VII of the Form 990. Mr. Grinker did not set the organization is noting him as a former	vices, Andrea Phillips, ceased serving in the capacity ment with Seedco (the filing organization), until Junancial Services, Ms. Phillips retained her role as a dual capacity until she relinquished the Interim Pro 2009, Ms. Phillips resumed her position as an Exece payment of \$88,950 as a result of her separation processed in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part II, Column B(III). Also increased in Schedule J, Part III,	aly 31, 2009 While an Executive Vice esident role on March 31, cutive Vice President of on from employment with cluded in Column B(iii) is rim President of Seedco ests have been allocated erests of full disclosure, and, William Grinker, In Grinker continued his Mr Grinker received a ation Since Ms Phillips current officers on Part lendar year, therefore, eedco Financial Services

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DLN: 93493315036320

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

13-3952047

Name of the organization STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION Employer identification number

13-2875743

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

Primary activity

Legal domicile (state or foreign country)

(d) Total income

End-of-year assets

(f) Direct controlling entity

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

(b) (d) (f) (e) (c) Direct controlling Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status (if section 501(c)(3)) or foreign country) entity SEEDCO FINANCIAL SERVICES INC 915 BROADWAY NA **FINANCING** NY 501(c)(3) NEW YORK, NY 10010 59-3814814 NON-PROFIT ASSISTANCE CORP 915 BROADWAY NA workforce dev NY 501(c)(3) NEW YORK, NY 10010

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or aging
EMPOWERMENT REINVESTMENT FUND LLC							Yes	No		Yes	No
915 BROADWAY NEW YORK, NY10010 13-4148223	FINANCING	NY N	IA	related	15,629	6,398		No	0	Yes	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
		country)					

(5)

(6)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

Yes

Part V Transactions With Related Organizations (Complete if the organization answ	rered "Yes" on Form 990, Part IV, line 34, 35, or 36.)
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1 [During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
ь	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c	: Gift, grant, or capital contribution from other organization(s)	1 c		No
d	Loans or loan guarantees to or for other organization(s)	1d	Yes	
e	Loans or loan guarantees by other organization(s)	1e	Yes	
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1 g		No
h	n Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
n	n Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	
o	Reimbursement paid to other organization for expenses	10		No
p	Reimbursement paid by other organization for expenses	1p	Yes	
q	Other transfer of cash or property to other organization(s)	1q		No
r	Other transfer of cash or property from other organization(s)	1r	Yes	
				•
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	;		
	(b)		c)	
	Name of other organization Name of other organization Name of other organization A A A A A A		involve	ed
(1)	Seedco Financial Services		30	8,000
'21 °	Seedoo Financial Services			
	ie le		1,06	6,053
(3)	1k		1,94	2,569
(4) Non-Profit Assistance Corporation			1.00	1,051
	± ₽		-,00	_,

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

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No