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Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form 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)

2011

OMB No 1545-1150

➤ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

ΑI	For the	e 2011 calendar year, or tax year beginning , 2011, and ending		<u>g</u> _	, 20				
В	Check if ap	plicable C Name of organization				nployer identification number			
	Address cl	ss change WYOMING ENGINEERING SOCIETY					83-0255212		
	Name cha	hange Number and street (or P O box, if mail is not delivered to street address) Room/suite E T				Telephone number			
$\overline{}$	initial retur	1007 E CORTIS STREET				307-755-5959			
H		erminated					on		
Ħ									
G		ing Method ✓ Cash — Accrual Other (specify) ►		-	H Check	k ▶ ☑ If the organization is not			
	Websit	•				quired to attach Schedule B			
JΤ	ax-exem		947(a)(1) or	527	(Form 9	90, 990-EZ	, or 990-PF)		
K	Check ▶	if the organization is not a section 509(a)(3) supporting organization or	a section	527 organı	zation and i	ts gross rec	eipts are normally		
		than \$50,000. A Form 990-EZ or Form 990 return is not required though Fon							
		nization chooses to file a return, be sure to file a complete return							
		5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,00	0 or more,	or if total as	ssets (Part II,	•			
ls	ne 25, c	olumn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ				▶ \$			
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund	Balanc	es (see	the instru	ctions for	Part I.)		
-		Check if the organization used Schedule O to respond to any of							
_	1	Contributions, gifts, grants, and similar amounts received				1	3457.00		
	2	Program service revenue including government fees and contracts				2	53476 55		
7I∩7	3	Membership dues and assessments				3	16575.84		
7	4	Investment income				4	2529 13		
7	5a	Gross amount from sale of assets other than inventory	5a						
1	b	Less. cost or other basis and sales expenses				1			
2	C	Gain or (loss) from sale of assets other than inventory (Subtract line		ine 5a)		5c			
	6	Gaming and fundraising events							
	a	Gross income from gaming (attach Schedule G if greater th							
۾ ڇ	"	\$15,000)	6a	1					
岩高	h	Gross income from fundraising events (not including \$	<u> </u>	f contribu	itions	1			
Z à	"	from fundraising events reported on line 1) (attach Schedule G if t							
		sum of such gross income and continuous exceeds \$15,000)	6b	1					
SCANNELL Revenue	С	Less, direct expenses from gaming and fundraising events	6c		=	1			
C (4)	d	Net income or (loss) from gaming and fundraising events (add lin		d 6b and	subtract	1			
		line 6c)				6d			
	7a	Gross sales of inventory, less returns and allowandes	. 7a	1					
	Ь	Less: cost of goods sold OGDEN, UT	7b			1			
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from I	ne 7a)			7c			
	8	Other revenue (describe in Schedule O)				8			
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			•	9	76038.52		
_	10	Grants and similar amounts paid (list in Schedule O)				10	11250.00		
	11	Benefits paid to or for members				11			
Ś	12	Salaries, other compensation, and employee benefits				12	918.00		
Expenses	13	Professional fees and other payments to independent contractors .				13	8400.00		
ber	14	Occupancy, rent, utilities, and maintenance				14			
X	15	Printing, publications, postage, and shipping				15	2898 77		
	16	Other expenses (describe in Schedule O)				16	56907.01		
	17	Total expenses. Add lines 10 through 16				17	80373.78		
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	· · · · ·	<u> </u>		18	(4335.26)		
ets	19	Net assets or fund balances at beginning of year (from line 27, co					()		
SS	-	end-of-year figure reported on prior year's return)			_	19	40452 71		
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule (20	817.02		
ž	21	Net assets or fund balances at end of year. Combine lines 18 through		· ·		21	36934 47		
For		work Reduction Act Notice, see the separate instructions.	*	No 106421			orm 990-EZ (2011)		

For Paperwork Reduction Act Notice, see the separate instructions.

COIIII	990-EZ (2011)					. Page 2
Pa	rt II Balance Sheets. (see the instructions		-			
	Check if the organization used Schedule	O to respond to a				<u></u>
			_	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		-	51702.71		48184.47
23 24	Land and buildings				23	
25	Other assets (describe in Schedule O) Total assets			51702.71	24	48184.47
26	Total liabilities (describe in Schedule O)		' ' ' ' '	11250.00		11250.00
27	Net assets or fund balances (line 27 of column		_	40452.71	-	36934.47
	Statement of Program Service Accom		<u> </u>		,	
	Check if the organization used Schedule	•		•	/D	Expenses
Wha	t is the organization's primary exempt purpose?					uired for section c)(3) and 501(c)(4)
	cribe the organization's program service accompli		•	rogram services		nizations and section
as n	neasured by expenses. In a clear and concise m	nanner, describe the	services provided	, the number of		'(a)(1) trusts, optional thers)
pers	ons benefited, and other relevant information for ea	ach program title.				
28	Annual convention includes workshops and semina	rs for continuing edu	cation			
	•	•••••				
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ 🗆	28a	
29	Scholarships and awards to engineering students, a	nd WES/University of	Wyoming Summer E	ngineering		
	Program for High School students					
	(O					
20		includes foreign gra		<u></u> . ▶ ⊔	29a	
30	Outstanding engineering and surveying project awa	ras program competi	tion 			
	(Grants \$) If this amount	ıncludes foreign gra	nte check here	·····	30a	
31	Other program services (describe in Schedule O)		ints, check here	· · · ·	304	
•	• •	includes foreign gra		• 🗖	31a	
32	Total program service expenses (add lines 28a				32	
Par	t IV List of Officers, Directors, Trustees, and Key	/ Employees. List eac	h one even if not com	pensated. (see the	nstru	ctions for Part IV.)
	Check if the organization used Schedule	O to respond to ar	ny question in this l	Part IV		🗹
	-	(b) Title and average	(c) Reportable	(d) Health benefits,		F-44
	(a) Name and address	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and		ther compensation
		devoted to position	(if not paid, enter -0-)	deferred compensation	<u> </u>	·
	nas V. Edgar	President - 1			ł	
1860	N. 23rd Street, Laramie WY 82072		0.00	0.0	0	0.00
	ph C. Lord	Vice-President 1				
	E. Curtis Street, Laramie, WY 82072-2217		0.00	0.0	0	0.00
	Fuller	Secretary-]	_	
	Big Horn Avenue, Sheridan, WY 82801	Treasurer - 1	0.00	0.0	0	0.00
	ph C. Lord, Lord Consulting, LLC E. Curtis Street, Laramie, WY 82072-2217	Executive Director - 10	0.00			9400.00
1007	E. Curus Street, Laranne, WY 02072-2217	Director - 10	0.00	0.0	' -	8400 00
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Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			П
	matractions for Fart V.) officerent the organization abod confedered to to respond to any quotient in the		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		√
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		√
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	-	
		30a		✓
b	Too, complete concern 2, fair ware onter the total amount with	1		
39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
a	Gross receipts, included on line 9, for public use of club facilities			
b 40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:	1		
1 0a	section 4911 ▶ , section 4912 ▶ , section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			_
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	ļ		
	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c	Ì		
d	reimbursed by the organization	ĺ		
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		ŀ	-
·	transaction? If "Yes," complete Form 8886-T	40e	•	
41	List the states with which a copy of this return is filed. ▶		l <u> </u>	
42a	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP + 4 ►			•
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	_	1
	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.			
_	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		-
C	If "Yes," enter the name of the foreign country: ▶	120	L	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here			▶ □
70	and enter the amount of tax-exempt interest received or accrued during the tax year	•		
	<u></u>		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			1
	completed instead of Form 990-EZ	44a		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c	1	1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			Ė
-	explanation in Schedule O	44d		✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1

Form 99	0-EZ (2	011)						, P	agè 4		
								Yes	No		
46	Did t	he organization engage, dırectly or in	idirectly, in political c	ampaign activities o	n behalf of or	in oppositio	n 🗍				
	to ca	andidates for public office? If "Yes," o					46		✓		
Part \	VI	Section 501(c)(3) organizations	and section 4947	(a)(1) nonexempt	charitable :	trusts only	. All sec	ction			
		501(c)(3) organizations and section	on 4947(a)(1) none:	xempt chantable ti	rusts must a	nswer ques	stions 4	7-491	b		
		and 52, and complete the tables	for lines 50 and 51								
		Check if the organization used Sch	nedule O to respond	to any question in	this Part VI						
						-		Yes	No		
47	Did t	he organization engage in lobbying	activities or have a	section 501(h) electi	on in effect of	luring the ta	х 🗀		-		
		If "Yes," complete Schedule C, Part					47				
48	Is the	e organization a school as described in	section 170(b)(1)(A)(i	i)? If "Yes." complete	Schedule E		48				
49a	Did the organization make any transfers to an exempt non-charitable related organization?										
ь											
50		plete this table for the organization's					s. truste	es an	d kev		
	empi	oyees) who each received more than	\$100,000 of comper	nsation from the orga	anization. If th	ere is none.	enter "N	lone."			
			(b) Title and average	1	(d) Health						
	(a) N	ame and address of each employee paid more than \$100,000	hours per week	(c) Reportable compensation	contributions		e) Estimate				
		paid more than \$100,000	devoted to position	(Forms W-2/1099-MISC	benefit plans, a compen		other con	ipensai	1011		
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					1						
f	Total	number of other employees paid over	er \$100 000	•	l	l l					
51		plete this table for the organization's		ensated independen	t contractors	who each r	eceived	more	than		
٠.	\$100	,000 of compensation from the organ	nization. If there is no	one, enter "None."	it contiactors	WIIO CACITI	cceived	111010	uiaii		
4.1.				Ţ <u></u>	ĺ						
(a)	ivame a	nd address of each independent contractor pai	id more than \$100,000	(b) Type of se	rvice	(c) C	ompensati	on			
-							•				
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				***************************************	İ						
				1							
							•	_			
				1							
							_				
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .	. ▶						
52	Did tl	ne organization complete Schedule A	? Note: All section 5	i01(c)(3) organization	s and 4947(a)(1)					
_		xempt charitable trusts must attach a				`` . ▶	☐ Yes		No		
Under pe	enalties	of perjury, I declare that I have examined this re	eturn, including accompan	ying schedules and stater	nents, and to the	best of my knov			, it is		
		d complete Declaration of preparer (other than					ŭ				
	Younh Colord						5-14-12				
Sign		Signature of officer		Date							
Here		Joseph C Lord, Executive Directo	r								
		Type or print name and title									
De: -		Print/Type preparer's name	Preparer's signature] (Date	Cheek 🗆 '	PTIN				
Paid						Check if self-employed	1				
Prepa	_	Firm's name ▶		1	Firm	's EIN ▶					
Use (JNIY	Firm's address ▶	_ _			ne no					
May th	e IRS	discuss this return with the preparer	shown above? See	instructions	1 110		Voc		Na		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number 83-0255212

WYOMING ENGINEERING SOCIETY	83-0255212					
Part I, Line 10: Amount shown represents awards given to University of Wyoming students						
Part I, Line 16: Other expenses include the annual convention, award plaques, and other miscellaneous expenses. These						
expenses are typical for the organization						
Part I, Line 20: Amount shown represents net growth in investment funds held by the organization.						
Part IV: The organization contracts with Lord Consulting, LLC to serve as the executive director and n	nanage the society.					
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·····						