



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Short Form  
Return of Organization Exempt From Income Tax

OMB No. 1545 1150

11

Open to Public  
Inspection

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

► 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.

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

A For the 2011 calendar year, or tax year beginning		April 1,	, 2011, and ending	March 31	, 20 12
<b>B Check if applicable</b> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>C Name of organization</b> <b>Society for Mathematical Biology</b> <b>Number and street for P O box if mail is not delivered to street address:</b> <b>P O Box 11283</b> <b>City or town state or country and ZIP:</b> <b>Boulder, CO 80301</b>		<b>D Employer identification number</b> <b>23 7346025</b> <b>E Telephone number</b> <b>303-661 9942</b> <b>F Group Exemption Number</b> ►	
<b>G Accounting Method</b> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ► _____				<b>H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)</b>	
<b>I Website:</b> ► _____					
<b>J Tax-exempt status (check only one)</b> — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
<b>K Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990 N (e postcard) may be required (see instructions). But if the organization chooses to file a return be sure to file a complete return.         </b>					
<b>L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more or if total assets (Part II line 25, column (B) below) are \$500,000 or more file Form 990 instead of Form 990-EZ ► \$</b>					
<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I <input type="checkbox"/>					
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	1,015 00	
	2	Program service revenue including government fees and contracts	2	172,500 00	
	3	Membership dues and assessments	3	24,431 25	
	4	Investment income	4	186 34	
	5a	Gross amount from sale of assets other than inventory	5a		
	5b	Less: cost or other basis and sales expenses	5b		
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			
	6	Gaming and fundraising events	6a		
	6d	Gross income, from gaming (attach Schedule G if greater than \$15,000)			
6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)				
6c	Less direct expenses from gaming and fundraising events				
7a	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)				
7c	Gross sales of inventory, less returns and allowances				
8	Less cost of goods sold				
9	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	198,132 59	
	11	Benefits paid to or for members	11	85,506 27	
	12	Salaries, other compensation, and employee benefits	12	51,131 93	
	13	Professional fees and other payments to independent contractors	13	22,296 00	
	14	Occupancy, rent, utilities, and maintenance	14	21,137 31	
	15	Printing, publications, postage, and shipping	15	31,323 07	
	16	Other expenses (describe in Schedule O)	16	4,540 45	
	17	Total expenses. Add lines 10 through 16	17	215,935 03	
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(17,802 44)	
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	499,282 70		
20	Other changes in net assets or fund balances (explain in Schedule O)	20			
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	481,480 26		

**Part II Balance Sheets** (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II 

		(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		499,282 70	22 481,480 26
23 Land and buildings		0 23	0
24 Other assets (describe in Schedule O)		0 24	0
25 Total assets		499,282 70	25 481,480 26
26 Total liabilities (describe in Schedule O)		0 26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		499,282 70	27 481,480 26

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III 

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 published the scientific journal "Bulletin of Mathematical Biology"	This journal was distributed to 600 members and to many libraries		
(Grants \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a	
29 published 3 newsletters	The newsletters were distributed to 600 scientists		
(Grants \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a	
30 Held a scientific meeting of Bio-mathematical scientists			
(Grants \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)		32	

**Part IV List of Officers, Directors, Trustees, and Key Employees** List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV 

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099 MISC) (If not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans and deferred compensation	(e) Estimated amount of other compensation
Gerda de Vries, University of Alberta	President	0	0	0
Michael Mackey, McGill University	Past President	0	0	0
Mary Myerscough, University of Sydney	Secretary & a director	0	0	0
Torcom Chorbajian, Boulder, CO	Treasurer	0	0	0
Heiko Enderling, Tufts University	Director	0	0	0
Holly Gaff, Old Dominion University	Director	0	0	0
Claudia Neuhauser, University of Minnesota, Rochester	Director	0	0	0
Santiago Schnell, University of Michigan	Director	0	0	0
Renee Fister, Murray State University	Director	0	0	0

**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

	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 If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c 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	35c	✓
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	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	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter	39a	
a Initiation fees and capital contributions included on line 9	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► , section 4912 ► , section 4955 ►	40b	✓
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		
c 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 ►		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ►		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	✓
41 List the states with which a copy of this return is filed ►		
42a The organization's books are in care of ► Telephone no ► Located at ► ZIP + 4 ►		
b 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)? 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.	42b	
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country ►	42c	
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43	43	
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be 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	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
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	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		✓

**Part VI** **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		✓

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

	Yes	No
48		✓

49a Did the organization make any transfers to an exempt non-charitable related organization?

	Yes	No
49a		✓

b If "Yes," was the related organization a section 527 organization?

	Yes	No
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099 MISC)	(d) Health benefits contributions to employee benefit plans and deferred compensation	(e) Estimated amount of other compensation
none				

f Total number of other employees paid over \$100,000 ► 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
none		

d Total number of other independent contractors each receiving over \$100,000 ► 0

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

►  Yes  No

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

Sign Here	Signature of officer Torcom Chorbajian	Date 11/07/2012
	Type or print name and title Torcom Chorbajian, treasurer	

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

May the IRS discuss this return with the preparer shown above? See instructions

►  Yes  No

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization  
Society for Mathematical Biology

Employer identification number  
23 7346025

Part 1

Line 10 Winfree Prize 500 00

Lee Segel Prizes 7,000 00

Student Awards 23, 984 00

Grants to attend related meetings 54,022 27

**TOTAL** 85,506 27

Line 16 Corporate Registration 284 00

Bank Charges 1,391 67

Credit Card Discount Charges 2,864 78

**TOTAL** 4,540 45