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Form **990-EZ**

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)

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

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

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

MAY 1 For the 2011 calendar year, or tax year beginning 2011 and ending APR 30. 2012 Check if applicable R C Name of organization D Employer identification number WYOMING SOCIETY OF CERTIFIED PUBLIC Address chang ACCOUNTANTS EDUCATIONAL FUND 83-0295141 Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 200 307-634-7039 504 W. 17TH STREET Terminated City or town, state or country, and ZIP + 4 F Group Exemption CHEYENNE, WY 82001-4356 Number > X Cash Accrual Other (specify) H Check If the organization is not Accounting Method: Website: WWW.WYOCPA.ORG required to attach Schedule B Tax-exempt status (check only one) — X 501(c)(3) 501(c) () **◄**(insert no.) ____ 4947(a)(1) or ____ 527 (Form 990, 990-EZ, or 990-PF). Check In 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. 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 137,312. Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Check if the organization used Schedule O to respond to any question in this Part I X Contributions, gifts, grants, and similar amounts received 16,420. 1 Program service revenue including government fees and contracts 2 2 3 Membership dues and assessments 3 SEE SCHEDULE O investment income 4 3,472. 117,420 Gross amount from sale of assets other than inventory 5a Less; cost or other basis and sales expenses DECENTED 5b Gain or (loss) from sale of assets other than-inventory (Subtract-line 5b from line 5a) 6,317. 5c SCANNED ANTE 1 3 IRS-OS Gaming and fundraising events a Gross income from gaming (attach Schedule diff greater than 2012 \$15,000) of contributions b Gross income from fundraising events (not including \$ = \(\begin{align*} \begin{align*} \begin from fundraising events reported on line-1) (attach-Schedule-G-ff-the-sum-of-such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d Gross sales of inventory, less returns and allowances Less; cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c Other revenue (describe in Schedule 0) 8 8 26,209. Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 Grants and similar amounts paid (list in Schedule 0) SEE SCHEDULE O 1.000 10 10 11 Benefits paid to or for members 11 Salaries, other compensation, and employee benefits 12 12 Professional fees and other payments to independent contractors 13 13 Occupancy, rent, utilities, and maintenance 14 14 Printing, publications, postage, and shipping 15 15 2,213 18 Other expenses (describe in Schedule 0) SEE SCHEDULE O 16 3,213. 17 Total expenses. Add lines 10 through 16 17 Excess or (deficit) for the year (Subtract line 17 from line 9) 22,996. 18 18 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) 19 (must agree with end-of-year figure reported on prior year's return) 138,840. 19 Other changes in net assets or fund balances (explain in Schedule 0) 0. 20 20 161.836. Net assets or fund balances at end of year. Combine lines 18 through 20 21 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2011)

WYOMING SOCIETY OF CERTIFIED PUBLIC

83-0295141

Page 2

Form **990-EZ** (2011)

ACCOUNTANTS EDUCATIONAL FUND

Form 990-EZ (2011)

132172 02-06-12

٢٤	rt II	Balance Sheets. (see the instructions for Part II.	· <i>)</i>				
		Check if the organization used Schedule O to re	spond to any questic	on in this Part II		·	X
	_		(A) Beginning of year		(B) E	nd of year
22	Cash,	savings, and investments		2,117.	22		10,297.
23		and the second s			23		
24	Other	assets (describe in Schedule 0) SEE SCHEDULE (2	136,723.	24		152,539.
25	Total	assets		138,840.	25		162,836.
28	Total I	liabilities (describe in Schedule 0) SEE SCHEDULE (0.	26		1,000.
27		ssets or fund balances (line 27 of column (B) must agree with line 21)		138,840.	27		161,836.
_	rt III		nts (see the instruct	ions for Part III.)			penses
		Check if the organization used Schedule O to re	spond to any questic	on in this Part III	X		for section
Wha	t is the o	organization's primary exempt purpose?SEE SCHEDULE (and 501(c)(4) ons and section
		rganization's program service accomplishments for each of its three largest program		es. In a clear and concree) trusts; optional
		be the services provided, the number of persons benefited, and other relevant infor				for others.	.)
28	THE	WYOMING SOCIETY OF CPAS EDUCAT:	CONAL FUND HAS	S BUILT A			
		ERVE OF ASSETS AND WIL NOW PROV			-		
		DLARSHIPS TO ACCOUNTING STUDENTS	· · · · · · · · · · · · · · · · · · ·		_		
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	(Grants					31a 32	0.
32	i otai p	program service expenses (add lines 28a through 31a)	<u> </u>			3Z	
	or IV	List of Officers Directors Trustees and Key I	Employees				- D 4 D43
٢٤	art IV	List of Officers, Directors, Trustees, and Key I	Employees. List each one	even if not compensated (se	e the	nstructions fo	or Pert IV)
<u> </u>	art IV	List of Officers, Directors, Trustees, and Key I Check if the organization used Schedule O to re	Employees. List each one spond to any question	even if not compensated (so on in this Part IV			
<u> </u>	art IV	Check if the organization used Schedule O to re	Employees. List each one spond to any question (b) Title and average hours	on in this Part IV (c) Reportable compensation (Forms	d) Hea	alth benefits, butions to	(e) Estimated
	art IV		Employees. List each one spond to any question (b) Title and average hours per week devoted to	oven if not compensated (see on in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC)	d) Heacontro	alth benefits, butions to yee benefit and deferred	(e) Estimated amount of other
		Check if the organization used Schedule O to re	Employees. List each one spond to any question (b) Title and average hours per week devoted to position	even if not compensated (second in this Part IV (c) Reportable compensation (Forms W.2/1090.MISC.	d) Heacontro	alth benefits, butions to yee benefit	(e) Estimated
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PA 20 MI 20 JO ST BI	M DU 0, C KE I 0, C HN A E. 2	Check if the organization used Schedule O to re (a) Name and address JNNICK, 504 W. 17TH ST., STE. CHEYENNE, WY 82001 LEWIS, 504 W. 17TH ST., STE. CHEYENNE, WY 82001 A. LICHTY, 504 W. 17TH ST., 200, CHEYENNE, WY 82001 BENSKIN, 504 W. 17TH ST., STE.	Employees. List each one spond to any question (b) Title and average hours per week devoted to position PRESIDENT 1.00 VICE-PRESIDE 1.00 TREASURER 1.00 PAST-PRESIDE	over if not compensated (so on in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) NT 0.	d) Heacontro contro emplo plans, a	buttons to yee benefit and deferred consation 0.	(e) Estimated amount of other compensation 0 .
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WYOMING SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS EDUCATIONAL FUND Form 990-EZ (2011) 83-0295141 Page 3 Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V X Yes No 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 X 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) X 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)? X 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 0 N/A 35b e 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 35c Х 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 X b Did the organization file Form 1120-POL for this year? X 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? X 38a b If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 N/A b Gross receipts, included on line 9, for public use of club facilities N/A 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 0 . ; section 4912 ▶ 0 . ; 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 X 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 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 ... 41 List the states with which a copy of this return is filed. NONE 42a The organization's books are in care of ▶ WYOMING SOCIETY OF CPAS ____ Telephone no. ▶ 307-634-7039 Located at ▶ 504 W. 17TH ST., STE. 200, CHEYENNE, WY ZIP+4 > 82001-4356b At any time during the calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b 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. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c X If "Yes," enter the name of the foreign country: 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 N/A Yes No 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 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

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)

X

44d

45a

WYOMING SOCIETY OF CERTIFIED PUBLIC

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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2011

Open to Public Inspection

Name of the organization

WYOMING SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS EDUCATIONAL FUND

Employer identification number 83-0295141

Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) See inst	tructions.		<u> </u>		
The	organ			because it is (For lines 1									
1			· ·	s, or association of church			_) <u>.</u>				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3		A hospital or	a cooperative hospi	tal service organization o	described i	in section	170(b)(1)	(A)(iii).					
4		A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter th	ne hospital	's name	Θ,
		city, and state	е										
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental un	it describe	id in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	ite, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(I)(A)(v).					
7		An organizati	on that normally rec	erves a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	nbed ır	1
		section 170(b)(1)(A)(vi). (Comple	te Part II.)									
8		A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	\mathbf{X}	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, n	nembersh	ip fees, an	d gross red	ceipts f	rom
		activities rela	ted to its exempt fu	nctions - subject to certa	un exceptio	ons, and (2	2) no more	than 33 1	1/3% of its	support f	from gross	ınvestı	nent
		income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	scquired b	y the orga	anization a	fter June 3	0, 197	5.
		See section	509(a)(2). (Complete	Part III.)									
10		An organizati	on organized and op	perated exclusively to te	st for publi	ic safety. S	See sectio	n 509(a)(4	\$ }.				
11		An organizati	on organized and op	perated exclusively for the	ne benefit d	of, to perfo	orm the fu	nctions of,	or to can	y out the p	purposes c	f one c)r
				ations described in secti				2). See se e	ction 509	a)(3). Che	ck the box	that	
				organization and comple		-				_			
		а Туре І			Тур-		-	•			Type III - C		
0		-		at the organization is not			_			-			1
			-	han one or more publicly		-				9(a)(1) or s	ection 509	(a)(2).	
f		If the organiz	ation received a writ	tten determination from t	the IRS tha	atrtisa.Ty	pe I, Type	II, or Type	e ili				_
			rganization, check ti										L
9		•		organization accepted ar			•		•				
			-	lirectly controls, either al	_		•					Yes	No
				upported organization?							11g(i)	\vdash	
				n described in (i) above?							11g(ii)	ı	
				person described in (i) o						-	11g(iii)		
h		Provide the to	ollowing information	about the supported or	ganization	(S).							
(i)		nme of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section		in col. (i) lis	organization sted in your document?	organizat	u notify the ton in col. r support? (vi) Is to organize (i) organize U.S.		on in col. led in the	(vii) Amount o support		·	
				(see instructions))	Yes	No	Yes	No	Yes	No			
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Γota	ıl _			<u></u>									

Schedule A (Form 990 or 990-EZ) 2011						Page 2
Part II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	ri)
(Complete only if you checked			_	n falled to qualify	under Part III. If the	organization
fails to qualify under the tests	listed below, plea	se complete Part	III.)			· · · · · · · · · · · · · · · · · · ·
Section A. Public Support		,				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						·
2 Tax revenues levied for the organ-						
ization's benefit and either paid to			ĺ		į į	
or expended on its behalf						·
3 The value of services or facilities furnished by a governmental unit to						
the organization without charge					i	
4 Total. Add lines 1 through 3						
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.			<u> </u>			
Section B. Total Support		r	,		· · · · · · · · · · · · · · · · · · ·	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4					ļ	
8 Gross income from interest,						
dividends, payments received on				}		
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the business is regularly carried on						
10 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities,	etc. (see instructi	ons)			12	
13 First five years. If the Form 990 is for	the organization's				on 501(c)(3)	
organization, check this box and stor Section C. Computation of Publ		rcentage	···· <u>-</u>		·	
14 Public support percentage for 2011 (I			column (fi)		14	9/
15 Public support percentage from 2010					15	9/
16a 33 1/3% support test - 2011. If the c						
stop here. The organization qualifies	as a publicly supp	orted organization	ı			. ▶□

b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box

17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

and stop here. The organization qualifies as a publicly supported organization

WYOMING SOCIETY OF CERTIFIED PUBLIC

Schedule A (Form 990 or 990-EZ) 2011 ACCOUNTANTS EDUCATIONAL FUND

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

83-0295141 Page 3

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5,083.	5,320.	12,220.	13,692.	16,420.	<u>52,735.</u>
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						·
3	Gross receipts from activities that		Ì				
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						_
	ızation's benefit and either paid to		l				
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		Į.				
6	Total. Add lines 1 through 5	5,083.	5,320.	12,220.	13,692.	16,420.	52,735.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the			İ			
	amount on line 13 for the year						0.
•	Add lines 7a and 7b						<u> </u>
	Public support (Subtract line 7c from line 6)						52,735.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	5,083.	5,320.	12,220.	13,692.	16,420.	<u>52,735.</u>
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources	2,734.	2,269.	2,447.	2,877.	3,472.	13,799.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	2,734.	2,269.	2,447.	2,877.	3,472.	13,799.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital						
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)	7,817.	7,589.	14,667.	16,569.	19,892.	66,534.
	First five years, If the Form 990 is for						
•	check this box and stop here	g_	,,		,		
Se	ction C. Computation of Publ	ic Support Per	centage		· · · · · · · · · · · · · · · · · · ·		
	Public support percentage for 2011 (olumn (fi)		15	79.26 %
	Public support percentage from 2010		=			16	89.58 %
	ction D. Computation of Inves						
	Investment income percentage for 20			e 13, column (f))		17	20.74 %
18	Investment income percentage from	2010 Schedule A, F	Part III, line 17			18	10.42 %
	a 33 1/3% support tests - 2011. If the						
	more than 33 1/3%, check this box a	•		•		•	> X
ŧ	33 1/3% support tests - 2010. If the						•
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly supp	orted organization	▶□
20	Private foundation, if the organization	n did not chack a t	nox on line 14 10s	or 19h check th	is how and see in	etri ictions	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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.

2011 Open to Public Inspection

Name of the organization

WYOMING SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS EDUCATIONAL FUND

Employer identification number 83-0295141

ACCOUNTANTS EDUCATIONAL FUND	83-0)295141
FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT IN	NCOME:	
DESCRIPTION OF PROPERTY:		AMOUNT:
DIVIDENDS - UBS FINANCIAL SERVICES		3,472.
FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCAT	rions:	
ACTIVITY CLASSIFICATION: EDUCATIONAL SCHOLARSHIP	p	
GRANTEE NAME: UNIVERSITY OF WYOMING		
GRANTEE RELATIONSHIP: NONE		
DATE OF GIFT: 04/15/12		
AMOUNT GIVEN:		1,000.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:		
DESCRIPTION OF OTHER EXPENSES:		AMOUNT:
ACCOUNT MANAGEMENT FEES		2,193.
BANK SERVICE FEES		20.
TOTAL TO FORM 990-EZ, LINE 16		2,213.
· · · · · · · · · · · · · · · · · · ·		
FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:		
DESCRIPTION	BEG. OF YEAR	END OF YEAR
INVESTMENTS AT COST	130,881.	149,275.
CONTRIBUTIONS RECEIVABLE	5,842.	3,280.
FMV OF INVESTMENTS IN EXCESS OF COST	0.	10,963.
FMV DECREASE IN FISCAL YEAR AND PRIOR YEAR		
ADJUSTMENT	0.	-10,979.
TOTAL TO FORM 990-EZ, LINE 24	136,723.	152,539.
This was the community of the state of the back of the backward and decided the state of the sta	A.	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

WYOMING SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS EDUCATIONAL FUND

Employer identification number 83-0295141

FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES	:				_	
DESCRIPTION	BEG.	OF	YEAR	END	OF	YEAR
ACCOUNTS PAYABLE TO WSCPA			0.		1,	000.
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE -	THE W	YOMI	NG SOC	IETY	OF	
CPAS EDUCATIONAL FUND IS ORGANIZED EXCLUSIVELY F	OR CHA	ARIT	ABLE F	URPOS	SES	
WHICH INCLUDE PROVIDING SCHOLARSHIPS TO ACCOUNTI	NG ST	JDEN	TS AT			<u> </u>
INSTITUTIONS OF HIGHER LEARNING.	 					
FORM 990-EZ, PART V, INFORMATION REGARDING PERSO	NAL BI	enef	T CON	TRACI	.: 27	
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEI	VE AN	Y FU	NDS, D	IRECT	LY,	
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BEN	EFIT (CONT	RACT.			
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY	ANY PI	REMI	UMS, D	IRECT	LY,	
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.						
				 		