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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

2011

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

A:	For the	2011 calenda	ar year, or tax year beginning July 1	, 2011, an	d ending	J	une 30	, 20	12
В	Check if ap	pplicable	C Name of organization			D Empl	loyer ident	fication number	er
	Address c	change	Science & Engineering Business Association			74-3095414			
	Name cha	ange	· · · · · · · · · · · · · · · · · · ·			E Telep	E Telephone number		
	Initial retu	Initial return P.O. Box 45728 Terminated City or town, state or country, and ZIP + 4				425/6	10-7322		
H						F Group Exemption			
H	Amended	return on pending	Seattle, WA 98145				nber ►		
_		ting Method:	✓ Cash		l u			e organizatior	
	Websit	-	.uwseba.com		"			e organization Schedule B	i is not
-			eck only one) — ☐ 501(c)(3)	(a)(1) or	527			Z, or 990-PF)	
	Check •		e organization is not a section 509(a)(3) supporting organization or a s						
			o organization is not a section 305(a)(3) supporting organization or a s		-		_	•	•
			uses to file a return, be sure to file a complete return.	190-14 (e-bi	JStCard) III	ay be rec	luirea (see	mistructions).	. Dut II
	_		b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or	r more or i	f total asset	s (Part II			
			w) are \$500,000 or more, file Form 990 instead of Form 990-EZ .			o (. a ,	•		
_	art I			Polonosa	· ·	inatuu	otiono fo	w Dowl I \	
	arti		e, Expenses, and Changes in Net Assets or Fund B						
_	1 4		the organization used Schedule O to respond to any que						<u>. Ц</u>
	1		ons, gifts, grants, and similar amounts received			•			440.00
	2	_	3 3				2	83,	110 00
	3		ip dues and assessments			•	3		
	4	Investment					4		124 38
	5a		unt from sale of assets other than inventory	5a			"		
	b		or other basis and sales expenses	5b			ļ <u>-</u> .		
	C	•	ss) from sale of assets other than inventory (Subtract line 5b	from line	5a)		5c		
	6	_	d fundraising events						
a)	a		ome from gaming (attach Schedule G if greater than	1 1					
Revenue		•		6a					
Š	b		me from fundraising events (not including \$	of co	ontribution	าร	'قس م د ر د		
æ			aising events reported on line 1) (attach Schedule G if the	1 1			1,2		
			th gross income and contributions exceeds \$15,000)	6b					
	C		t expenses from gaming and fundraising events	6c	···		- ' ~		
	d		e or (loss) from gaming and fundraising events (add lines	6a and 6	ib and su	btract			
		line 6c) .					6d		
	7a	Gross sale	s of inventory, less returns and allowances	7a					
	b		<u>of goods sold</u>	7b					
	С		it or ((စုနှန့်) frစ္စကူ နေ့ales of inventory (Subtract line 7b from line	7a)			7c		
	8		nue (describe in Schedule O)				8		
	9		nue. Add lines 1, 2, 3, 4, 50, 6d, 7c, and 8	· · _ ·	·	. ▶	9	83,	234.38
	10	Grants	similaramountsក្រុងថ្ងៃ (list ក្រុ Schedule O)				10		
	11	Donofito or	ud to or for momborn IVII				11		
es	12	Salaries, o	ther compensation, and employee benefits	<i>.</i>			12		
S	13	Profession	al vices and to their payments to independent contractors				13	3,	465.00
Expenses	. 14	Occupanc	y, rent, utilities, and maintenance				14	17,	397.97
ŵ	15	Printing, po	ublications, postage, and shipping				15	8,0	678 94
	16	Other expe	enses (describe in Schedule O)				16	36,	855.85
_	17	Total expe	enses. Add lines 10 through 16	. <u> </u>		. ▶	17	66,	397.76
S	18						18	16,	836.62
šet	19		or fund balances at beginning of year (from line 27, colur	mn (A)) (n	nust agree	e with			
Ass			r figure reported on prior year's return)				19	76,	356 73
Net Assets	20	Other char	iges in net assets or fund balances (explain in Schedule O) .				20		
ž	21		or fund balances at end of year. Combine lines 18 through 2				21	93.	193.35
Eà.			ion Act Notice, see the concrete instructions		106421			orm 990-EZ	

Pao	е	2

Form	990-EZ	(2011)	۱
OHIL	330-L2	12011	,

Pai	Balance Sheets. (see the instructions	for Part II.)			
	Check if the organization used Schedule	O to respond to ar			
			<u> </u>	(A) Beginning of year	(B) End of year
22	Cash, savings, and investments			76,356.73 2	93,193.35
23	Land and buildings				24
.24 25	Other assets (describe in Schedule O)			76,356.73	
26	Total liabilities (describe in Schedule O)		-		26
27	Net assets or fund balances (line 27 of column			76,356.73	
Par		plishments (see th	e instructions for P	art III.)	Expenses
	Check if the organization used Schedule	O to respond to ar	y question in this F	Part III	(Required for section
What	t is the organization's primary exempt purpose?	See Schedule O		l l	501(c)(3) and 501(c)(4)
Desc	cribe the organization's program service accompli	shments for each of	its three largest pr	ogram services, 📙	organizations and section 4947(a)(1) trusts, optional
	neasured by expenses. In a clear and concise noons benefited, and other relevant information for e		services provided,	the number of	for others)
	Advancement of the profession and networking opp		ounding business cor	nmunity	
	through an annual career fair at the University of Wa	ashington			
	(Grants \$) If this amount	includes foreign gra	nts, check here .	<u> ▶ □ </u> 2	28a 36,792.32
29					
	(Grants \$) If this amount	includes foreign are	nte chock boro	······································	29a
30					294
30					
	(Grants \$) If this amount	ıncludes foreign gra	nts, check here .	▶ 🗆 ;	30a
31	Other program services (describe in Schedule O)				
	(Grants \$) If this amount	includes foreign gra	nts, check here .	▶ 🗆 🖯	31a
	Total program service expenses (add lines 28a				32
	1 10 / 10 / 10 / 10 / 10 / 10 / 10 / 10				
Par	List of Officers, Directors, Trustees, and Ke			pensated. (see the in	structions for Part IV.)
Par	List of Officers, Directors, Trustees, and Ke Check If the organization used Schedule	O to respond to ar	ny question in this I	pensated. (see the in: Part IV	structions for Part IV.)
Par	Check if the organization used Schedule		ny question in this i (c) Reportable compensation	pensated. (see the inspart IV	(e) Estimated amount of
Par		O to respond to ar	ny question in this F	pensated. (see the inspart IV	· · · · · <u> </u>
	Check if the organization used Schedule (a) Name and address	(b) Title and average hours per week devoted to position	ny question in this i (c) Reportable compensation (Forms W-2/1099-MISC)	pensated. (see the insect IV	(e) Estimated amount of
Sara	Check if the organization used Schedule	(b) Title and average hours per week	ny question in this i (c) Reportable compensation (Forms W-2/1099-MISC)	pensated. (see the insect IV	(e) Estimated amount of other compensation
Sara P.O.	Check if the organization used Schedule (a) Name and address th Nowakowski	(b) Title and average hours per week devoted to position President - 10.0	ny question in this f (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	pensated. (see the instance of	(e) Estimated amount of other compensation
Sara P.O. Ryar P.O	Check if the organization used Schedule (a) Name and address th Nowakowski Box 45728, Seattle, WA 98145 n Coe Box 45728, Seattle, WA 98145	(b) Title and average hours per week devoted to position President - 10.0	ny question in this f (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	pensated. (see the instance of	(e) Estimated amount of other compensation
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Part	•			_
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part		
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	Yes	No
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		_ <u>`</u>
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		√
ь	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 0			
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?	200		
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A	38a	,	
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A			
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			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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. ▶ <u>wa</u>			
42a	The organization of books are in our of the second	703/96		
	Located at ► P.O. Box 45728 Seattle, WA At any time during the calendar year, did the organization have an interest in or a signature or other authority over	98145	-0728 Yes	
D .	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	√
	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.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S ?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	• •	. I	N/A
4.4	Did the automatical registers and design advised founds down the compact to "Farm 000 months		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		1
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
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		
	explanation in Schedule O	44d		
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
	Form 990-EZ (see instructions)	45b	i l	ı √

							~•	
Form 990-E	Z (2011)		<u> </u>				Page	
46 D	id the organization engage, directly or ii	ndirectly, in political c	ampaign activities o	n behalf of or	in opposit	ion	Yes N	<u> </u>
to	candidates for public office? If "Yes,"	complete Schedule C	C, Part I	<u></u>		. 46		7
Part VI								
	501(c)(3) organizations and secti			usts must a	nswer qu	estions 4	7–49b	
	and 52, and complete the tables Check if the organization used Sc			thic Part VI≕				_1_
	Check if the organization used Sc	nedule O to respond	to any question in	tilis i ait vi	· · ·	· · · ·	Yes N	<u>ا</u> ۔
	id the organization engage in lobbying ear? If "Yes," complete Schedule C, Par		section 501(h) elect		luring the	tax 47		<u> </u>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E								<u> </u>
49a Did the organization make any transfers to an exempt non-charitable related organization? 49a						\ \ \ \ \	<u>/</u>	
	"Yes," was the related organization a se complete this table for the organization's					. 49b	os and k	<u></u>
	mployees) who each received more that							Су
	(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 I	penefits, o employee and deferred	(e) Estimate)f
N/A				<u> </u>				_
				,_				
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			·					_
				_ _				
	otal number of other employees paid over complete this table for the organization		► ensated independer	t contractors	who each	received	more th	an
	100,000 of compensation from the orga							
(a) Na	me and address of each independent contractor pa	aid more than \$100,000	(b) Type of se	rvice	(c	Compensati	on	
N/A		_	 					_
			-					
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	otal number of other independent contr			.▶				
52 D	onexempt charitable trusts must attach	A? Note: All section (501(c)(3) organizatioi			► □ V.	N	
	alties of perjury, I declare that I have examined this			ments and to the		P L Yes		_
true, correc	atties of perjury, I declare that I have examined this ct, and complete Declaration of preparer (other tha	n officer) is based on all inf	ormation of which prepare	r has any knowled	ige	nowledge an	a bellet, it i	5
								_
Sign	Signature of officer	Date)					
Here	Ryan L. Coe, Vice President of Finance Type or print name and title							
	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN		
Paid	,, , , ,	-			self-emple			
Prepai Use Oi					s EIN ▶			
	Firm's address ▶	1 00	Imahu mat	Pho	ne no			
May the	IRS discuss this return with the prepare	r shown above? See	instructions	<u></u>	<u> </u>	Yes U	S 🗌 No	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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

Employer identification number Name of the organization 74-3095414 Science & Engineering Business Association Form 990-EZ Other Expenses (Line 16) **Description:** Food and Beverages for Speaker Events and Sponsored Events - \$11,606.54 Event Supplies - \$1,908.77 Website Development - \$592.70 State and Federal Taxes - \$1463 02 Travel and Meetings - \$4679.17 Event and Member Sponsorships - \$11,304 13 Merchant Bank Account Fees - \$3,569.28 Member Expenses - \$1,732.24 Total to Form 990-EZ, Line 16 - \$36,855.85 Form 990-EZ Statement of Program Service Accomplishments What is the organization's primary exempt purpose? The Science & Engineering Business Association (SEBA) creates a strong community of science and engineering students pursuing excellence in business. We aim to inspire an entrepreneurial spirit among our members by hosting events that allow them to interact with, and learn from, members of the business community. From these interactions, SEBA members will be able to generate relationships with our business partners, facilitating the exchange of ideas, and the creation of new business ventures. Through SEBA, our members build networks and develop the skills that will ultimately provide them with the foundation necessary to become future business leaders. We strive to be, for students, the 'place where science meets business'.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
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Schedule O (Form 990 or 990-EZ) (2011)