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990-EZ

epartment of the Treasury

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)

2012

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.

Open to Public Inspection

Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2012 calendar year, or tax year beginning July 1 , 2012, and ending June 30 . 20 13 C Name of organization B Check if applicable D Employer identification number Address change Science and Engineering Business Association 74-3095414 Name change E Telephone number Number and street (or P.O. box, if mail is not delivered to street address) Initial return P.O. Box 45728 425-610-7322 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Number ▶ Application pending Seattle, WA 98145 G Accounting Method: H Check ▶ ☑ if the organization is not Other (specify) ▶ Website: ▶ www.uwseba.com required to attach Schedule B (Form 990, 990-EZ, or 990-PF). **527** 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. 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 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I . . . 2 Program service revenue including government fees and contracts 2 125,761.00 3 3 4 4 95.01 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than 6a 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) . . . 6b Less: direct expenses from gaming and fundraising events . . . 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances 7a Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7c 8 8 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 9 125,856.01 10 10 11 11 Salaries, other compensation, and employee benefits 12 12 13 Professional fees and other payments to independent contractors . . . 13 3710.00 14 14 20245.65 15 15 12778.01 16 16 49655.20 Total expenses. Add lines 10 through 16 17 17 86,398.89 18 18 39457.12 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 93193.35 Other changes in net assets or fund balances (explain in Schedule O) 20 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 132650.47

Pa	rt II	Balance Sheets (see the instructions f			. —		
		Check if the organization used Schedule	O to respond to ar	ny question in this			<u> </u>
					(A) Beginning of year		(B) End of year
22		, savings, and investments			93,193.35 93,256.88	_	132650.47
23		and buildings				23 24	
24		r assets (describe in Schedule O)			93,193.35 93,≥50.88	$\overline{}$	400050 43
25 26					<u> </u>	26	132650.47
27		assets or fund balances (line 27 of column		n line 21)	93,193, 3503 256 88		132650.47
	t III	Statement of Program Service Accom				1	
		Check if the organization used Schedule	-		•	(Re	Expenses guired for section
Wha	t is the	organization's primary exempt purpose?				501	(c)(3) and 501(c)(4)
as m	neasure ons ber	e organization's program service accomplised by expenses. In a clear and concise margited, and other relevant information for ea	anner, describe the ach program title.	e services provide	d, the number of	494	anizations and section 17(a)(1) trusts; optional others.)
28		ement of the profession and networking opport an annual career fair at the University of Was	- 1- 1 4	unding business co			
	(Grants	s\$) If this amount	includes foreign gra	ints, check here .	▶ 🗆	28	49655.20
29							
						1	
20	(Grants	s \$) If this amount	includes foreign gra	ints, check here .	▶ ⊔	29	3
30							
	(Grants	s\$) If this amount	includes foreign gra	ints, check here .	▶ □	30	a
31	(Grants \$) If this amount includes foreign grants, check here ▶ □ Other program services (describe in Schedule O)						
	(Grants) If this amount	includes foreign gra	ints, check here .	▶ 🗆	318	a
		program service expenses (add lines 28a t				32	
Par	t IV	List of Officers, Directors, Trustees, and Key			•		•
		Check if the organization used Schedule		y question in this (c) Reportable	(d) Health benefits,		<u> Ц</u>
		(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MIS((if not paid, enter -0-	contributions to employ benefit plans, and) Estimated amount of other compensation
Briar	1 Модеп						
<u>P.O.</u>	Box 457	28, Seattle, WA 98145	President - 10.0		0	0	0
Nick							
		28, Seattle, WA 98145	VP Finance 10.0		0	0	
	e Rose	Levein 28, Seattle, WA 98145	VP Relations - 10.0		٥	0	
	on Stam		VF Relations - 10.0		-	1	
		28, Seattle, WA 98145	VP Marketing - 10.0	İ	o	0	C
	pratim :		VP Membership -				
P.O.	Box 457	28, Seattle, WA 98145	10.0		0	0	
	nond Ct		VP Operations -				
		28, Seattle, WA 98145	10.0		0	0	
	k Mogh		Career Fair				,
	h Nowai	28, Seattle, WA 98145	Coordinator 10.0		0	<u> </u>	
		/28, Seattle, WA 98145	President Emeritus - 2.0		0	٥	C
						1	
			-				
					1	-+	
			1	1		- [

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		Yes	No
33	detailed description of each activity in Schedule O	33		1
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 35b		1
b	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	330	-	_~
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
270	during the year? If "Yes," complete applicable parts of Schedule N	36		Y
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] 0 Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	0.5		_
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on line 9			
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	<i>.</i>		
	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	401		
•	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	40b	-	
С	organization managers or disqualified persons during the year under sections 4912,		1	
	4955, and 4958	1		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c	1		
_	reimbursed by the organization			
е	transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed ▶ wa	100		<u> </u>
42a	The organization's books are in care of ▶ Nick Au Telephone no. ▶ 2	:06-65	0-1088	В
	Located at ▶ PO Box 45728, Seattle, WA 98145 ZIP + 4 ▶	98	115	
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)?	406	Yes	
	If "Yes," enter the name of the foreign country:	42b		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	L		
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	İ	
43	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			▶ □
40	and enter the amount of tax-exempt interest received or accrued during the tax year		. ,	
	and onto the union of all exempt interest received it decrees coming the tax year.		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
j.	completed instead of Form 990-EZ	44a		_✓
b	completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		7
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	ļ	✓
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	1		
	Form 990-EZ (see instructions)	45h	-	1

46	Did the organization engage, directly or it to candidates for public office? If "Yes,"					1	6	1
Part VI Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tab 50 and 51							nes	
	Check if the organization used Sc	hedule O to respond	to any question in	this Part VI		<u> </u>	<u></u>	<u>. 🗆</u>
47	Did the organization engage in lobbying		* *		luring the	- 1	Yes	s No
40	year? If "Yes," complete Schedule C, Par						7	
48 49a	Is the organization a school as described in Did the organization make any transfers to		•				9a	+
b	If "Yes," was the related organization a se	•	•			<u> </u>	9b	+
50	Complete this table for the organization's employees) who each received more than	s five highest compen	sated employees (ot			ors, trus	stees a	
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions to benefit plans, a compen	o employee and deferred		nated ame	
none								
				·			-	
f	Table was a state and a state	\$1.00.000						
51	Total number of other employees paid over Complete this table for the organization \$100,000 of compensation from the organization fr	's five highest compe	ensated independent one, enter "None."	contractors	who each	receive	ed mor	e than
(a)	Name and address of each independent contractor pa	ald more than \$100,000	(b) Type of ser	vice	(c)	Compens	sation	-
none								
					<u></u>		 -	
	Total number of other independent contro	actors each receiving	Over \$100,000					
52	Did the organization complete Schedule nonexempt charitable trusts must attach	A? Note: All section 5	01(c)(3) organizations	and 4947(a)	• •	► 🗆 Y	es 🏻	No
Under p	penalties of perjury, I declare that I have examined this rrect, and complete. Declaration of preparer (other tha	return, including accompan n officer) is based on all info	ying schedules and statem ormation of which preparer	ents, and to the has any knowled	best of my kn lge.	owledge	and belie	f, it is
	micholos an							
Sign Here	Nick Au, VP of Finance 21				113 / 2014			
	Type or print name and title	Preparer's signature		210	1	PTII	NI .	
Paid Prep		Preparer's signature		ate	Check Self-employ	rf	14	
Use	Only Firm's name ►				n's EIN ▶			
May th	Firm's address ▶ Phone no. e IRS discuss this return with the preparer shown above? See instructions						No	
	aloodoo tillo rotoitti mitti tile prepare	. Showin above: See		<u> </u>			<u> </u>	110

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization 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.

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Employer identification number

Science & Engineering Business Association	74-3095414				
Form 990-EZ Other Expenses (Line 16)					
Description:					
5 1 4B					
Food and Beverages for Speaker Events and Sponsored Events - \$10204.05					
Event Supplies - \$1148.07	••••••				
Website Development - \$1747.34	••••••				
State and Federal Taxes - \$1611.80					
Travel and Meetings - \$465.02					
Event and Member Sponsorships - \$7964.83					
Merchant Bank Account Fees - \$4529.90					
Telephone, Telecommunications - \$164.25					
Membership Attendance Fees - \$15470.00					
Board Retreat - \$333557 \$ 6 3 5 9 6 9 7					
Total to form 990-EZ, Line 16 - \$45654.66\$ 49655.20					
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	••••••••••••••••				
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