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Form **990-E**Z

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	or the	2013 calenda	ar year, or tax year beginning , 2013, a	ind ending			, 20			
В	Check if app	plicable:	C Name of organization	D Emp			tification number			
Address change Ac			Academy for Math, Engineering & Science Foundation	n			0076086			
		me change Number and street (or P O. box, if mail is not delivered to street address) Room/suite			E Teleph	E Telephone number				
	Initial return 5715 South 1300 E					801-	278-9460			
=	Terminated		City or town, state or province, country, and ZIP or foreign postal code		F Group	p Exem	ption			
Ħ	Amended return Application pending Salt Lake City, UT 84121 Num						•			
G		ing Method:	☐ Cash	н	Check ▶	√] _f ·	the organization is not			
	V ebsite	-					ch Schedule B			
JT	ax-exem	npt status (che	eck only one) - 501(c)(3) 501(c) () (insert no) 4947(a)(1) or	527	-		EZ, or 990-PF).			
			✓ Corporation ☐ Trust ☐ Association ☐ Other							
L	Add lines	s 5b, 6c, and	7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or r	nore, or if tota	al assets					
(Pa	ırt II, colı	u <mark>mn (B) belo</mark> v	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ		:	\$	5946.58			
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balanc	es (see the	instruc	tions				
		Check if	the organization used Schedule O to respond to any question i	n this Part I			🗆			
	1	Contribution	ons, gifts, grants, and similar amounts received		T	1	5765.00			
	2	Program s	ervice revenue including government fees and contracts		[2				
	3		ip dues and assessments		[3				
	4	Investmen	t income		[4	181.58			
	5a	Gross amo	ount from sale of assets other than inventory 5a							
	b	Less: cost								
	c	Gain or (lo		5c						
	6	Gaming ar								
•	a		ross income from gaming (attach Schedule G if greater than							
Revenue	Ι.	•								
. §	b	Gross inco	ns							
6 —			raising events reported on line 1) (attach Schedule G if the	1						
25			ch gross income and contributions exceeds \$15,000)							
<u> </u>	C		ct expenses from gaming and fundraising events 6c	1.05	.1-44					
	d		ne or (loss) from gaming and fundraising events (add lines 6a and	d 6b and su	ibtract					
T?	1 _	line 6c)	· · · · · · · · · · · · · · · · · · ·		• •	6d				
	7a		es of inventory, less returns and allowances							
	Ь	Less: cos	of goods sold	1000						
	C	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c				
	8		enue (describe in Schedule O)			8				
_	9		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	· · · · · · · · · · · · · · · · · · ·	·	∌9	5946.58			
'	10		d similar amounts paid (list in Schedule O)	19.	1.63	10	9000.00			
	11	Denents p	aid to or for members	212 /	as of	11				
Fxnenses	12	Salaries, (other compensation, and employee benefits	1.0 1. 1.	<i>J</i>	12				
Ě	13		nal fees and other payments to independent contractors	<i>.</i>	13					
Ş	14	•	cy, rent, utilities, and maintenance		14	_ _				
ш	- .0			15						
	16		enses (describe in Schedule O)			16	110.00			
	17	l otal exp	enses. Add lines 10 through 16	• • • •	<u> ▶</u>	17	9110.00			
ţ.	18		(deficit) for the year (Subtract line 17 from line 9)			18 2±33	-3163.42			
90	19		s or fund balances at beginning of year (from line 27, column (A) ar figure reported on prior year's return)							
Not Accete		•				19	40445.34			
Ž	20		anges in net assets or fund balances (explain in Schedule O)			20	<u> </u>			
_	21	Net asset	s or fund balances at end of year. Combine lines 18 through 20	<u> </u>	<u> ▶</u>	21	37281.92			

if

Par	t II	Balance Sheets (see the instructions for	or Part II)				
		Check if the organization used Schedule (O to respond to an	y question in this	Part II	٠.	<u> </u>
				Ĺ	(A) Beginning of year	<u>L</u>	(B) End of year
22	Casi	h, savings, and investments		[····	22	37281.92
23		d and buildings		[23	
24		er assets (describe in Schedule O)				24	
25		al assets				25	37281.92
26				[<u></u>	26	
27		assets or fund balances (line 27 of column				27	37281.92
Part	Ш	Statement of Program Service Accomp	•		,	.]	Expenses
		Check if the organization used Schedule					quired for section
		organization's primary exempt purpose?				١.	(c)(3) and 501(c)(4) anizations and section
		ne organization's program service accomplis					7(a)(1) trusts; optional
as m perso	easure ons be	ed by expenses. In a clear and concise man enefited, and other relevant information for each	anner, describe the ch program title.	services provide	d, the number of	for	others.)
		to Academy for Math, Engineering & Science (A		er school, to help p	ay for a Science		
	Fair C	oach. AMES Students excel in the Science Fair	as a result of their co	oaching.		1	1
						1	
	(Gran	ts \$ 9000.00) If this amount	includes foreign gra	nts, check here .	▶ 🗆	28	a 9000.00
29						1	
						İ	

	(Gran	ts \$) If this amount	includes foreign gra	nts, check here .	<u> ▶ □</u>	29	a [
30						1	
]	
	/0	λ		nto charle have		120	
24	(Gran	r program services (describe in Schedule O)	includes foreign gra			30	<u>a </u>
31	(Gran		includes foreign gra			31	<u> </u>
32		program service expenses (add lines 28a t				32	
Par		List of Officers, Directors, Trustees, and Key					
		Check if the organization used Schedule			•		
			(b) Average	(c) Reportable	(d) Health benefits		
		(a) Name and title	hours per week	compensation (Forms W-2/1099-MIS			e) Estimated amount of other compensation
			devoted to position	(if not paid, enter -0-			
Brett	Wilso	n, President					
			1 hr/week		o	0	0
Gonz	alo Pa	Iza, Director				T	· · · · · · · · · · · · · · · · · · ·
			1 hr/week		0	0	0
Hele	n Seltz	er, Director				1	
			1 hr/week		0	0	0
Larry	Jone	s, Director				- 1	
			1 hr/week	}	0	0	0
			-				
			 	 	 		
			}		1	- }	
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	_		,	,	,	1	

r ar t	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for that vy check in the organization aged confedure of to respond to any question 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		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		
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		整整	
b 38a	Did the organization file Form 1120-POL for this year?	37b	建	/
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		V
	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
a 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 ▶ ; 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			
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 ▶			
42a		801-2		<u>i0</u>
h	Located at ► 5715 S 1300 E Salt Lake City, UT At any time during the calendar year, did the organization have an interest in or a signature or other authority over	84	121	No
U	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	_	1/0
	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 and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	► □
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		No V
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	441		
c d	Did the organization receive any payments for indoor tanning services during the year?	440		\
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)			

Form 99	0-EZ (2013)		_			Page 4
46	Did the organization engage, directly or in to candidates for public office? If "Yes," or					
Part	VI Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51. Check if the organization used Sci	s must answer que			nplete the	e tables for lines
47 48 49a b 50	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par Is the organization a school as described in Did the organization make any transfers to If "Yes," was the related organization a secomplete this table for the organization's employees) who each received more than	activities or have a still	section 501(h) election	n in effect d Schedule E zation? ner than offic	· · · · · · · · · · · · · · · · · · ·	. 47
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health I contributions to benefit plans, a compensation	o employee and deferred	(e) Estimated amount of other compensation
None						
f 51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the organization (a) Name and business address of each independent	's five highest companization. If there is no				received more than
None						
52 Under	Total number of other independent contr Did the organization complete Schedule nonexempt charitable trusts must attach penalties of penuly, I declare that I have examined this	A? Note. All section a completed Schedusterturn, including accompa	501(c)(3) organization lle A	nents, and to the	best of my k	► ✓ Yes ☐ No
Sign Here		ar ourcer, is based on all im	отпации от which preparer	Dat	1/0/20	14
Use	Print/Type preparer's name parer Only Firm's name Firm's address the IRS discuss this return with the prepare	Preparer's signature			Check _ self-empl m's EIN ▶	

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization Academy for Math, Engineering & Science Foundation 27-0076086 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III–Functionally integrated **d** Type III–Non-functionally integrated **b** Type II e 🖸 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported (iii) Type of organization (v) Did you notify (ii) EIN (vi) Is the (vii) Amount of monetary in col (i) listed in your the organization in organization in col. organization (described on lines 1-9 support governing document? col. (i) of your (i) organized in the above or IRC section support? U S.? (see instructions)) Yes Nο Yes Yes No (A) Academy for Math, Engineering & Scien 20-0136281 9000.00 (B) (C) (D) (E) Total

	• • • • • • • • • • • • • • • • • • • •						U
Part	Support Schedule for Organiza	tions Descr	ibed in Secti	ons 170(b)(1	(A)(iv) and 1	70(b)(1)(A)(vi	
	(Complete only if you checked th	e box on line	5, 7, or 8 of	Part I or if the	e organizatior	failed to qua	llify under
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	ease complet	te Part III.)	
	n A. Public Support						
Calend	lar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and				}	ļ	
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the			1			
	organization's benefit and either paid to or expended on its behalf]				
3	The value of services or facilities					-	
3	furnished by a governmental unit to the		}]		
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by					NEW TIME	
3	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.		FOX-HISKEY				L
	on B. Total Support		1 01 0010	1 (1004)	1 (0.0010	() 2242	(a = 1)
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	}	 	 	 		
8	Gross income from interest, dividends, payments received on securities loans,		İ	1		!	
	rents, royalties and income from similar	}		ļ		}	
	sources		1		Į.		
9	Net income from unrelated business			-	†		
•	activities, whether or not the business				1		
	is regularly carried on	}			1]	j
10	Other income. Do not include gain or						
	loss from the sale of capital assets		j	ļ			\
	(Explain in Part IV.)				<u> </u>		<u> </u>
11	Total support. Add lines 7 through 10				1		
12	Gross receipts from related activities, etc					12	504()(0)
13	First five years. If the Form 990 is for t organization, check this box and stop he						
Sooti	on C. Computation of Public Suppo			· · · · ·		· · · · · ·	<u> ▶ □</u>
14	Public support percentage for 2013 (line			11 column (f)		14	%
15	Public support percentage from 2012 Sc		•			15	%
16a	331/3% support test—2013. If the organ						
	box and stop here. The organization qua						
b	331/3% support test-2012. If the orga	ınization did r	ot check a bo	x on line 13 o	or 16a, and line	e 15 is 33¹ദ%	or more,
	check this box and stop here. The organ	nization qualifi	es as a publicly	y supported or	ganization		▶ □
17a	10%-facts-and-circumstances test-2	2013. If the org	ganization did r	not check a bo	x on line 13, 10	6a, or 16b, and	l line 14 is
	10% or more, and if the organization me						
	Part IV how the organization meets the "			-	•	-	supported
	organization						▶ □
b	10%-facts-and-circumstances test-2						
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization r					on qualifies as	a publicly
18	supported organization						► <u>[</u>
13	instructions	in not check i		o, 10a, 10b, 17	a, or irb, one		▶ Γ

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

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

	11 the organization rails to quality	under the te	SIS listed beig	w, piedse co	inpiete i aiti	1.)	
	on A. Public Support		1 1			2.22.2	
_	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees		ļ			ļ	
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		}				
	furnished in any activity that is related to the		1				
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid]	
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the]				
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		l				
b	Amounts included on lines 2 and 3		1		J		,
~	received from other than disqualified					[
	persons that exceed the greater of \$5,000			ŀ			
	or 1% of the amount on line 13 for the year		-	}	}	}	
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	-					
10a	Gross income from interest, dividends,						i
	payments received on securities loans, rents,	}	}	ł		}	}
	royalties and income from similar sources .			ļ			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses	ĺ				[Ï
	acquired after June 30, 1975	}			ļ		
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether		ļ		Ì		i
	or not the business is regularly carried on	}	}	}	1	1	
12	Other income. Do not include gain or					Ţ	
	loss from the sale of capital assets						
	(Explain in Part IV.)					<u> </u>	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			<u> </u>	<u> </u>	<u> </u>	
14	First five years. If the Form 990 is for t	_	•				
	organization, check this box and stop he			· · · · ·	<u> </u>	<u> </u>	<u> ► □</u>
Sect	on C. Computation of Public Suppo						
15	Public support percentage for 2013 (line						%
16	Public support percentage from 2012 Sc			<u> </u>	_ 	. 16	%
	ion D. Computation of Investment Ir						
17	Investment income percentage for 2013	•		-			<u>%</u>
18	Investment income percentage from 201						%
19a	331/3% support tests—2013. If the organ						
	17 is not more than 331/3%, check this box	-	_	-		-	
b							
	line 18 is not more than 331/3%, check this		-	-	•		=
20	Private foundation. If the organization of	lid not check	a box on line 1	4, 19a, or 19b,	check this bo	x and see instr	uctions 🕨 🗌

SCHEDULE 0 (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.

2013

OMB No 1545-0047

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► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

lame of the organization	Employer identification number
Academy for Math, Engineering & Science Foundation	27-0076086
Oant 4 Jime 46: Other sympasses - Amusel commercia renewal fee \$40 Charitable C	Organization Dormit #100
Part 1 - line 16: Other expenses - Annual corporate renewal fee \$10; Charitable C	organization Permit \$100
Part 1 - line 10: Grant to Academy for Math, Engineering & Science \$9000	
	·
<u> </u>	
