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DLN: 93493135013205

# Form **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		pplicable	C Name of organization	30-2014	D Employ	er iden	ntification number	
_	ress cl		Society of Asian Scientists & Engineers		26-150	09658	<b>.</b>	
— <sub>Nai</sub>	me cha	inge	Doing Business As					
_ Init	ial retu	ım	Number and street (or P O box if mail is not delivered to street address) Room/s	uite	E Telephor	ne numl	per	
Ter	mınate	ed	PO Box 147139		(303) 2	246-5	208	
Am	ended	return	City or town, state or province, country, and ZIP or foreign postal code Edgewater, CO 802147139		(303)2		200	
App	olication	n pending	Eagenater, 60 GOLTIVISS		<b>G</b> Gross re	ceipts \$	469,854	
			F Name and address of principal officer Khanh Vu		s this a group i	eturn	for	
			PO Box 147139	S	ubordinates?		✓ Yes  No	
			Edgewater, CO 802147139		re all subordin	ates	<b>▽</b> Yes <b>□</b> No	
<b>T</b> Ta	x-exen	npt status	✓ 501(c)(3)		ncluded? f "No." attach a	alist	(see instructions)	
		<u> </u>	w saseconnect org	1				
				1 11(-)	Group exemption			
	n of or <b>rt I</b>		Corporation  Trust  Association  Other ►	<b>L</b> Year	of formation	М	State of legal domicile	
Ра			escribe the organization's mission or most significant activities					
Governance		Is to pre	epare Asian heritage scientists and engineers for success in the globa ne workplace, and to provide opportunities for members to make contrib					
₫								
<u> </u>	2	Check th	his box দ if the organization discontinued its operations or disposed	of more th	an 25% of its i	net as	sets	
	-	CHECK C	ins box F <sub>1</sub> in the organization discontinued its operations of disposed	or more en	dii 25 % 01 105 1	ice as.	3003	
Activities &	3	Number	of voting members of the governing body (Part VI, line 1a) $ \cdot  \cdot  \cdot $			3	9	
Ē	l		of independent voting members of the governing body (Part VI, line 1b		- t	4	9	
<b>≣</b>	l		mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	4	
∢	l		mber of volunteers (estimate if necessary)		· · ·	6	125	
			related business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34			7a 7b	0	
	-	Net unite	stated business taxable income noni Form 990-1, inte 34	<del></del>	· · · Prior Year	<b></b>	Current Year	
	8	Contri	butions and grants (Part VIII, line 1h)		605,1	52	469,845	
횰	9		am service revenue (Part VIII, line 2g)	. —	0		0	
Revenue	10		tment income (Part VIII, column (A ), lines 3, 4, and 7d)		1	72	9	
ď	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	0	
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), lir	ne	605,3	24	469,854	
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)			0	0	
	14		its paid to or for members (Part IX, column (A), line 4)			0	0	
re.	15		es, other compensation, employee benefits (Part IX, column (A), lines		1215		121 207	
Expenses	1.5-	5-10)	•		121,5	0	131,307	
<u>क</u>	16a		ssional fundraising fees (Part IX, column (A), line 11e)	•		-	0	
Δ	b   17		indraising expenses (Part IX, column (D), line 25) $\blacktriangleright^0$ expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		547,4	9.2	592,202	
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	-	669,0	_	723,509	
	19		nue less expenses Subtract line 18 from line 12		-63,7	_	-253,655	
\$ 8 6 8				_	nning of Curren	t	End of Year	
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)		<b>Year</b> 410,3	9 3	140,100	
AB.	21		liabilities (Part X, line 26)		21,3	_	4,729	
25 25 25	22		ssets or fund balances Subtract line 21 from line 20	-	389,0	_	135,371	
Pai	t II		ature Block		7-	<u> </u>	,	
my kı	nowled	dge and as any ki Signa	perjury, I declare that I have examined this return, including accompa belief, it is true, correct, and complete Declaration of preparer (other t nowledge ature of officer					
пег	=		nh Vu Executive Director e or print name and title					
Paid	٠	/     P	Print/Type preparer's name   Preparer's signature   lan Thomas	Date	self-employed	PTIN P01267	359	
	a pare		Firm's name Logan Thomas & Johnson LLC		Firm's EIN 🟲			
Use	•		Firm's address ► 5023 W 120th Ave 165		Phone no (719)	937-42	71	

Broomfield, CO 80020

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

	2013/					raye Z
Par		nt of Program Servion hedule O contains a respo			I	
1	Briefly describe th	ne organization's mission				
		age scientists and engine e opportunities for membe			s world, celebrate diversity on o	campuses and in the
2	the prior Form 990	on undertake any significa o or 990-EZ?			which were not listed on	┌ Yes ┌ No
_		these new services on Sc				
3	services?			changes in how it cond	ducts, any program	┌ Yes ┌ No
4	Describe the organexpenses Section	these changes on Schedu nization's program service 501(c)(3) and 501(c)(4) s, and revenue, if any, for e	accomplishm organizations	are required to report t	e largest program services, as he amount of grants and alloca	measured by tions to others,
4a	(Code	) (Expenses \$	638,637	ıncludıng grants of \$	) (Revenue \$	461,071 )
	,	- 1,360 attendees, Regional con	•		, , , , ,	
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
<b>4</b> c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d		ervices (Describe in Sche		<b>.</b>	) (Payanua d	`
	(Expenses \$		ding grants of	<del>*************************************</del>	) (Revenue \$	)
4e	Total program se	rvice expenses 🗠	638,637			

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		N o
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

(:	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	. l No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   0			.40
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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)?	4a		N
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
2	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	Yes	
•	Organizations that may receive deductible contributions under section 170(c).			
3	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
)	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
2	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
L	required?	/ <u>y</u>		
	Form 1098-C?	7h		
•	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
) -	Sponsoring organizations maintaining donor advised funds.	ο-		
a L	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
_	Section 501(c)(7) organizations. Enter  Instruction focal and constal contributions uncluded on Bort VIII. Inc. 12			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them )			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
_				
đ	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
2	Enter the amount of reserves on hand	Į		
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI
---

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	organization's maining address? If res, provide the hames and addresses in schedule O	•		INO
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R		ıe Cod	
Se			ue Cod <b>Yes</b>	
				e.)
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	e.)
10a b	Did the organization have local chapters, branches, or affiliates?	evenu 10a	<b>Yes</b> Yes	e.)
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes Yes	e.)
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes Yes	e.)
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes	e.)
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed ▶OH
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
  ►Khanh Vu PO Box 147139

# Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related organizations below	Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer institution or director direct						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	dotted line)	Individual trustée or director	Institutional Trustee	<u> </u>	Ke) emplojee	Highest compensated employee	ĕ			organizations
(1) Shekhar Mıtra	2 50	x		х				0	0	0
President (2) Thomas Fernandez	2 50									
Secretary	2 50	×		х				0	0	0
(3) Jennifer Jao	1 50									
Member		X						0	0	0
(4) Sanjay Correa	1 50									
Member		Х						0	0	0
(5) Dennis Hirotsu	1 50									
Mambar		Х						0	0	0
Member (6) Tabrez Malık	2 50									
		х		Х				0	0	0
Treasurer (7) Shirley Yap	1 50						_			
	1 30	х						0	0	0
Member (8) Young Bang	1 50									
	1 50	х						0	0	0
Member (a) Les Gelettes										
(9) Lei Schlitz	1 50	×						0	0	0
Member										
(10) Mike Nguyen	0 00	l x		×				0	0	0
President - SASE Colorado Professional Chapter		,,		<u> </u>				ŭ		
(11) David Le	0 00	x		×				0	0	0
Secretary - SASE Colorado Professional Chapter		_ ^						Ů	0	0
(12) Victor Sam	0 00	x		×				0	0	0
Treasurer - SASE Colorado Professional Chapter		^		^				١	U	U
(13) Ricky Nguyen	0 00	,								
Member - SASE Colorado Professional Chapter		X						0	0	0
(14) Lisa Troung	0 00									
Member - SASE Colorado Professional Chapter		X						0	0	0
(15) Kristyna Smith	0 00									
President - SASE Boston		Х		Х				0	0	0
(16) George Luo	0 00									
		х		х				0	0	0
Vice President - SASE Boston (17) Teresa Hoang	0 00			$\vdash$						
		х		х				0	0	0
President - SASE Profession DC Chapter										
										Form <b>990</b> (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot ect	note boo	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensatio from related	Reportable ompensation rom related		ated of other isation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)				zation lated ations
(18) Chris Soong	0 00	x		Х						0		0
Treasurer - SASE Profession DC Chapter	40.00									1		
(19) Khanh Vu Executive Director	40 00			х				65,00	0	0		0
										+		
										+		
										$\dashv$		
										+		
						Ļ						
1b Sub-Total			•	•		-						
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	·-			٠.		<u> </u>		65,000		0		0
Total number of individuals (including b \$100,000 of reportable compensation	ut not limited to	those	liste	ed al	bove	e) who	rec	eıved more than				
3 Did the organization list any <b>former</b> offi on line 1a? <i>If "Yes," complete Schedule 3</i>			e, key	/ em	nplo	yee, o	r hıg	Jhest compensat	ed employee		Yes	No
4 For any individual listed on line 1a, is to organization and related organizations and individual	ne sum of report	table c								3		No No
5 Did any person listed on line 1a receive services rendered to the organization?									individual for	5		No
Section B. Independent Contracto	ors											
Complete this table for your five highes compensation from the organization. Re	t compensated										tax year	
Name and b	(A) usiness address							Descript	(B) tion of services		(C Comper	)
DRS 6139 E Pageantry Street Long Beach CA 90808								Conference pla	nning	$\frac{1}{2}$		114,300
										+		
2 Total number of independent contractors	(including but i	not lim	ıted t	o th	nose	listed	dabo	ove) who receive	d more than	7		

Part V	/HT	Statement of Revenue				
		Check if Schedule O contains a response or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1a	Federated campaigns 1a				
tributions, Gifts, Grants Other Similar Amounts	ь	Membership dues 1b				
90L	C	Fundraising events 1c				
ξĘ						
Ei ia	d					
ns,	е	Government grants (contributions) <b>1e</b>				
er ë	f	All other contributions, gifts, grants, and similar amounts not included above				
혈통	g	Noncash contributions included in lines				
Contributions, Gifts, Grants and Other Similar Amounts		1a-1f \$  Total. Add lines 1a-1f	469,845			
ರ ಹ	_ n	•	403,043			
e E	_	Business Code				
Program Serwce Revenue	2a					
<u>윤</u>	b					
Š	C					
Š	d e					
Ta T	f	All other program service revenue				
ĬQ	•					
<u> </u>	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and other similar amounts)	9			9
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(1) Real (11) Personal				
	6a	Gross rents Less rental				
	•	expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	(I) Securities (II) Other Gross amount				
	/a	from sales of assets other				
		than inventory				
	b	Less cost or other basis and				
	С	sales expenses Gain or (loss)				
	d	Net gain or (loss)				
en	8a	events (not including				
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18				
<u>.</u>		a				
¥	b	Net income or (loss) from fundraising events				
•	C 9a	Net income or (loss) from fundraising events				
	"	See Part IV, line 19				
		a				
	b	Less direct expenses b				
		Net income or (loss) from gaming activities				
	100	returns and allowances .				
		a				
	b	Less cost of goods sold b				
		Net income or (loss) from sales of inventory				
	11a	Miscellaneous Revenue Business Code				
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
	12	T-A-1				
		iotal revenue. See Instructions	469,854	0	0	9

Form	990 (2013)				Page <b>10</b>
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			olete column (A )	
	Check if Schedule O contains a response or note to any line in this	Part IX	(B)		
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and	60,600	24 200	24 200	
_	key employees	68,600	34,300	34,300	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	51,640	47,464	4,176	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	11,067	7,526	3,541	
11	Fees for services (non-employees)				
а	Management				
b	Legal	5,378		5,378	
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	11,851		11,851	
13	Office expenses	8,632		8,632	
14	Information technology	16,559		16,559	
15	Royalties				
16	Occupancy				
17	Travel	115,604	115,604		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	401,200	401,200		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	435		435	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Other	30,553	30,553		
Ь	Dues and subscriptions	1,990			
c	·		, -		
d		1			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	723,509	638,637	84,872	0
26	Joint costs. Complete this line only if the organization	1 ==,= 33	22,23	3.,2.2	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here F   if following SOP 98-2 (ASC 958-720)				

Form 990 (2013)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this $\mbox{\bf P}$	art X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		369,980	1	140,100
	2	Savings and temporary cash investments		40,413	2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees Complete Part II Schedule L	of		5	
ıts	6	Loans and other receivables from other disqualified persons (as defined section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , a employers and sponsoring organizations of section $501(c)(9)$ volumbeneficiary organizations (see instructions) Complete Part II of Sch	nd contributing tary employees'		6	
Assets	7	Notes and loans receivable, net			7	
ď	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D				
	ь	Less accumulated depreciation	10a 10b		10c	
	11	Investments—publicly traded securities		11		
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		410,393	16	140,100
	17			21,367	17	4,729
	18	Accounts payable and accrued expenses	21,307	18	4,729	
		Deferred revenue			19	
	19					
	20	Tax-exempt bond liabilities			20	
<u>je</u> s	21	Escrow or custodial account liability Complete Part IV of Schedule			21	
Liabiliti	22	Loans and other payables to current and former officers, directors, t key employees, highest compensated employees, and disqualified				
<u> </u>		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X of D	of Schedule		25	
	26	Total liabilities. Add lines 17 through 25		21,367	26	4,729
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ an lines 27 through 29, and lines 33 and 34.				
or Fund Balance	27	Unrestricted net assets		389,026	27	135,371
<u>- 프</u>	28	Temporarily restricted net assets			28	
<u>=</u>	29	Permanently restricted net assets			29	
ä		Organizations that do not follow SFAS 117 (ASC 958), check here	- □ and			
<del>_</del>		complete lines 30 through 34.	,			
	30	Capital stock or trust principal, or current funds		30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
Šet	33	Total net assets or fund balances		389,026	33	135,371
_	34	Total liabilities and net assets/fund balances		410,393	34	140,100
	•				F	orm <b>990</b> (2013)

Par	t XI	Reconcilliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI	· ·	• •	• • •	
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		4	69,854
2	Total	expenses (must equal Part IX, column (A), line 25)	2		7	23,509
3	Rever	nue less expenses Subtract line 2 from line 1	3		- 2	253,655
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	889,026
5	Net u	nrealized gains (losses) on investments	5			
6	Donat	red services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9		changes in net assets or fund balances (explain in Schedule O)	9			0
10		ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10		1	.35,371
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				. <u></u>
					Yes	No
1		unting method used to prepare the Form 990				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed or			
		eparate basis				
b		the organization's financial statements audited by an independent accountant?		2b		No
	basıs	s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
		eparate basis				
C	audıt,	s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?		e <b>2</b> c		
	Sched					
	Single	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	e	3a		No
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493135013205

**Employer identification number** 

OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

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.

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

2013

Open to Public Inspection

Name of the organization Society of Asian Scientists & Engineers

26-1509658 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) 1 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) 3 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) 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). 11 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 Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated 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 II, or Type III supporting organization, check this box 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) Yes No and (III) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11a(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11q(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization (described on lines 1 - 9 above or IRC section (see		(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is to organizate col (i) organizate col (i) organizate	on in anized	(vii) A mount of monetary support	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed t	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part I	11.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 2015	(5) Tabal
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
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						
6	(f) <b>Public support.</b> Subtract line 5 from						
	line 4						
S	ection B. Total Support						
Cal	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	in) ►	(-,	(=,====	(-,	(-,	(-,	(-,
7 8	Amounts from line 4 Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
_	sources Net income from unrelated						
9	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)					<u> </u>	
12	Gross receipts from related activities					12	
13	First five years. If the Form 990 is the						
	this box and stop here ection C. Computation of Pub				<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
14	Public support percentage for 2013			11 column (f))		14	
15	Public support percentage for 2012			11, 001011111 (1))		<b>—</b>	
		· ·	•			15	1 11 1
16a	<b>33</b> 1/3% support test—2013. If the cand stop here. The organization qua				iine 14 is 33 1/3%	or more, che	ck this box ►
Ь	33 1/3% support test—2012. If the				, and line 15 is 33	3 1/3% or more	
	box and <b>stop here.</b> The organization	qualifies as a pi	ublicly supported	organızatıon			<b>▶</b> ┌
17a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization mee						
	organization	is the lacts-and	a-circumstances	test The organi	izativii qualilles a	o a publicity S	upported <b>F</b>
b	10%-facts-and-circumstances test-	<b>-2012.</b> If the org	anızatıon dıd not	check a box on li	ne 13, 16a, 16b,	or 17a, and lı	
	15 is 10% or more, and if the organ	ızatıon meets th	e "facts-and-cırc	umstances" test	, check this box a	nd stop here.	
	Explain in Part IV how the organizat	ion meets the "f	acts-and-circum	stances" test Th	ne organization qu	alıfıes as a pı	
18	supported organization <b>Private foundation.</b> If the organizat	ion did not chect	cahoxon line 13	16a 16h 17a	or 17h check thi	s hox and see	. ▶□
	instructions	a.a noceneer	55% 511 11110 15	, _ 0 a, _ 0 b, _ 1 a,	1. 1. D, CHECK CIII	_ 55% and 566	▶□

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

(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.)

	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	(e) 2013	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,000	127,500	547,790	605,152	469,845	1,756,287
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 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	6,000	127,500	547,790	605,152	469,845	1,756,287
7a	A mounts included on lines 1, 2, and 3 received from disqualified						0
b	persons Amounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c	Add lines 7a and 7b						0
8	<b>Public support</b> (Subtract line 7c from line 6)						1,756,287
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) 🟲	(a) 2009	( <b>b)</b> 2010	(C) 2011	(u) 2012	( <b>e</b> ) 2013	(I) I otal
9	A mounts from line 6	6,000	127,500	547,790	605,152	469,845	1,756,287
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	648	655	337	172	9	1,821
b	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after June 30, 1975						
c	from businesses acquired after June 30, 1975 Add lines 10a and 10b	648	655	337	172	9	1,821
c 11	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	648	655	337	172	9	1,821
	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	648	655	337	172	9	1,821
11	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)	6,648	128,155	548,127	605,324	469,854	1,758,108
11 12 13 14	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	6,648 or the organization	128,155 n's first, second,	548,127	605,324	469,854	1,758,108
11 12 13 14 Se	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	6,648 or the organization	128,155 n's first, second,	548,127 third, fourth, or fil	605,324	469,854 501(c)(3) organi	1,758,108 Ization,
11 12 13 14 See 15	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	6,648 or the organization ic Support Per (line 8, column (f)	128,155 n's first, second, rcentage i divided by line 1	548,127 third, fourth, or fil	605,324	469,854 501(c)(3) organi	1,758,108 Ization, P 99 900 %
11 12 13 14 Se 15 16	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	6,648 or the organization ic Support Per (line 8, column (f) 2 Schedule A, Par	128,155 n's first, second, rcentage divided by line 1 t III, line 15	548,127 third, fourth, or fit 3, column (f))	605,324	469,854 501(c)(3) organi	1,758,108 Ization, ▶☐
11 12 13 14 See 15 16 See	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	6,648 or the organization ic Support Per (line 8, column (f) 2 Schedule A, Par estment Incon	128,155 n's first, second, rcentage divided by line 1 t III, line 15 ne Percentag	548,127 third, fourth, or fit 3, column (f))	605,324 fth tax year as a	469,854 501(c)(3) organi 15 16	1,758,108 Ization, P 99 900 % 99 800 %
11 12 13 14 Se 15 16	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	6,648 or the organization ic Support Per (line 8, column (f) 2 Schedule A, Par estment Incon	128,155 n's first, second, rcentage divided by line 1 t III, line 15 ne Percentag	548,127 third, fourth, or fit 3, column (f))	605,324 fth tax year as a	469,854 501(c)(3) organi	1,758,108 Ization, P 99 900 %
11 12 13 14 See 15 16 See	from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Per (line 8, column (f) 2 Schedule A, Par estment Incom	128,155 n's first, second, rcentage I divided by line 1 t III, line 15 ne Percentag umn (f) divided b	548,127 third, fourth, or fit 3, column (f)) e y line 13, column	605,324 fth tax year as a	469,854 501(c)(3) organi 15 16	1,758,108 Ization, P 99 900 % 99 800 %

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II ne 12. Also complete this part for any additional information. (See instru			
Facts And Circumstances Test					
Retu	ırn Reference	Explanation			
		Schodulo A / Forms C	000 er 000 E7) 201		

Schedule A (Form 990 or 990-EZ) 2013

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Society of Asian Scientists & Engineers **Employer identification number** 

26-1509658

Pai	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	□ Travel for companions    □ Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee     ▼ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	· , ,
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990

Schedule J (Form 990) 2013

## Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference **Explanation** 

Schedule J (Form 990) 2013

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**SCHEDULE 0** 

(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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization	Employer identification number
Society of Asian Scientists & Engineers	
	26-1509658

### 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	The return is reviewed once completed
Form 990, Part VI, Section B, line 12	Annually, the Board of Directors signs a Conflict of Interest form and discloses any conflicts
Form 990, Part VI, Section B, line 15	Board chairs discuss with board without executive director. Executive director discusses with board and through budget approval process.
Form 990, Part VI, Section C, line 19	Upon request