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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2016

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury

▶ 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.

		nue Service					
AF	or the	2016 calend	ar year, or tax year beginning July 1 , 2016, and ending		June 30		
B Check if applicable			C Name of organization ?	D Emp	Employer identification number		
=	Address cl	•			41127067 		
	Name chai	-	E Telephone number				
=	nitial retur	n n/terminated	P.O. Box 260692		303	3-900-2662 	
=	mai retuir Amended i		City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exen	nption	
=		n pending	Lakewood, CO. 80215	Nur	nber 🕨	9225	
G A	ccount	ing Method.	☐ Cash 🗸 Accrual Other (specify) 🕨	Check	▶ ☐ ıf	the organization is not	
	/ebsite		swe-rms.org			ich Schedule B	
J Ta	x-exem	npt status (che	ck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	(Form 9	90, 990	-EZ, or 990-PF).	
			☐ Corporation ☐ Trust				
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	assets			
			v) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$		
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	ınstru	ctions	for Part I) ?	
			the organization used Schedule O to respond to any question in this Part I				
?	1		ons, gifts, grants, and similar amounts received		1	56414	
?	2		ervice revenue including government fees and contracts		2	13439	
?	3	=	ip dues and assessments		3	4585	
?	4	Investmen	•		4	18	
	5a		unt from sale of assets other than inventory 5a				
	b		or other basis and sales expenses				
	l c		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		50		
	6		d fundraising events				
	а		ome from gaming (attach Schedule G if greater than				
ē	-		6a				
Revenue	Ь	•	me from fundraising events (not including \$ of contribution	 1S			
ě			aising events reported on line 1) (attach Schedule G if the				
ш	ļ		th gross income and contributions exceeds \$15,000) 6b				
	C		t expenses from gaming and fundraising events 6c				
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract			
		line 6c)			6d		
	7a	Gross sale	s of inventory, less returns and allowances				
	b		of goods sold				
	C		it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c		
	8		nue (describe in Schedule O)		8		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	. •	9	74456	
	10		d similar amounts paid (list in Schedule O)		10	11697	
	11		aid to or for members		11		
ű	12		ther compensation, and employee benefits 2		12		
3Se	13		al fees and other payments to independent contractors 2		13		
Expenses	14		y rent utilities and maintenance	 7 .	14	11003	
X	15		ublications, postage, and shipping	. .	15	357	
	16		enses (describe in Schedule O) ?	ايوا.	16	39818	
	17		enses. Add lines 10 through 16	S	17	62875	
	18	Excess or	(deficit) for the year (Subtract line 17 from line 9) . S	<i>φ</i> .	18	11581	
ëts	19	Net assets	s or fund balances at beginning of year (from line 27, column (A)) (must agree	₩th	1300	· · · · · · · · · · · · · · · · · · ·	
188		end-of-yea	ar figure reported on prior year's return)	. {.	19	71278	
Net Assets	20	-	nges in net assets or fund balances (explain in Schedule 0)	 -	20		
ž	21		or fund balances at end of year. Combine lines 18 through 20	. ▶	21	82859	
_						5 000 F7 (0)10	

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form **990-EZ** (2016



Form 990-EZ (2016)

	- 2
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Page	-

Pa	Balance Sheets (see the instructions	-		D		, 4
	Check if the organization used Schedule	O to respond to a	ny question in this	Part II		(B) End of year
22	Cash, savings, and investments			67278	22	82859
23	Land and buildings				23	
24	Other assets (describe in Schedule O)			4000		
25	Total assets			71278		82859
26	Total liabilities (describe in Schedule O)		[·	26	
27	Net assets or fund balances (line 27 of column	n (B) must agree witl	h line 21)	71278	27	82859
Par	t III Statement of Program Service Accom	plishments (see th	ne instructions for I	Part III)		
	Check if the organization used Schedule				l .	Expenses
Wha	t is the organization's primary exempt purpose?	Support women eng	ineers and introduce	girls to STEM		juired for section c)(3) and 501(c)(4)
Desc	cribe the organization's program service accompli	ishments for each o	f its three largest p	rogram services.		nizations, optional for
as m	neasured by expenses. In a clear and concise m	nanner, describe the			othe	rs.)
<u> </u>	ons benefited, and other relevant information for e					
28	GESTEM: Girls Exploring Science, Technology, Eng	_		•		
	STEM flelds through hands-on activities and interac	tions with STEM prof	essionals. 1000 giris	participate		
	annually.				ļ	44400
?	(Grants \$) If this amount	includes foreign gra	ants, check here .	.	28a	41193
29	Outreach Activities: essay contest, Colorado Science more than 20 youth benefiting.	ce & Engineering Fair,	, Certificates of ivierit	& Scholarships, \	-	
	more than 20 youth benefiting.					
	(O					12054
-00	(Grants \$) If this amount SWE RMS Mini-conference: one day event with sess	includes foreign gra	tor women engineer	nrofessionals	29a	12054
30	and an awards banquet to recognize professionals					
	and an area banquet to recognize protectionals					
	(Grants \$) If this amount	includes foreign gra	onte chock hore		30a	4916
31	Other program services (describe in Schedule O)			<u> </u>	30a	
٥.		includes foreign gra		▶ □	31a	0
32	Total program service expenses (add lines 28a	through 31a)	into, oncorriere :		32	58163
Par						ctions for Part IV)
	Check if the organization used Schedule					🗀
		(b) Average	(c) Reportable ?	(d) Health benefits,	1.,	
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC	contributions to employ benefit plans, and		Estimated amount of ther compensation
		devoted to position	(if not paid, enter -0-)	deferred compensatio	n	, · ·
Meg	an Schulze	8				
Pres	ldent		jo		0	0
	Woodward	. 4				
	President		0		0	0
	alene Fetsch 	4				
	surer		0	<u> </u>	0	0
	nkheana Chhun	4	_			_
	etary		0	<u> </u>	0	
	yn Bunker Ion Representative	4	_			^
	Fisher	-	0	<u> </u>	0	0
	ion Representative	4				0
	her Munoz				0	0
	Ion Representative	4			0	0
	ey Kreuder		 	 	4	
	ion Representative	4	٥		0	0
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Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	v 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	100	o
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		7
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		_ <u>-</u> _
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		V
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			
b 38a	Did the organization file Form 1120-POL for this year?	37b	(1979-1979)	900.16.001.3
30a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9		A. S.	
40a	Gross receipts, included on line 9, for public use of club facilities			
40a	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 1, Part I	40b		الأنالية ال
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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	The digalization's books are in care of P	303-90 80304		2
ь	Located at ► 1321 Balsam Avenue #1, Boulder, CO ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	00304	Yes	No
-	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		<u> </u>
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country: ▶	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		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	den min	<u> </u>
b	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)	45b		

Form 99	0-EZ (2	2016)							age 4
46		he organization engage, directly or in indidates for public office? If "Yes," o						Yes	No
Part	_	Section 501(c)(3) organizations		, raitr	· · ·		. 46	<u> </u>	
<u> </u>	-	All section 501(c)(3) organization		estions 47–49b ar	nd 52, ar	nd complete th	e tables t	or line	es
		50 and 51.							
		Check if the organization used Sc	hedule O to respond	d to any question i	n this Pa	<u>rt VI</u>	<u> </u>	1	
47		the organization engage in lobbying? If "Yes," complete Schedule C, Par		section 501(h) elec		ffect during the		Yes	No
48	•	e organization a school as described i				ıle F	47	 	7
49a		he organization make any transfers t						 	V
b		es," was the related organization a se					. 49b		
50		plete this table for the organization's							
	empi	oyees) who each received more than		nsation from the or		n. If there is non- Health benefits,	e, enter "r	vone."	
	(a)	Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contrib	utions to employee	(e) Estimate		
			devoted to position	(Forms W-2/1099-MIS	(.) I	plans, and deferred compensation	other cor	npensat	ion
				<u></u>					
									
				1					
				l					
51		number of other employees paid ov plete this table for the organization			nt contra	 actors who each	received	more	than
	\$100	,000 of compensation from the orga	inization. If there is no	one, enter "None."					
	(a)	Name and business address of each independ	dent contractor	(b) Type of s	ervice	(c)	Compensati	 on	
				-		Ì			
	· · · · · · · · · · · · · · · · · · ·								
						1			
d	Total	number of other independent contra	actors each receiving	over \$100,000 .	. ▶				
52		the organization complete Schedu pleted Schedule A	lle A? Note: All se	ction 501(c)(3) or	ganizatio		a . ⊳ V es	- - 🗆 N	No
		of perjury, I declare that I have examined this in disconnected Declaration of preparer (other than					owledge and	l belief,	ıt ıs
		Madalene Felodo				11/13/17			
Sign		Signature of officer				Date			
Here	?	Madalene Fetsch Type or print name and title							
		Print/Type preparer's name	Preparer's signature	— т	Date		PTIN		
Paid		Typo proparer o name			-	Check L self-employ	ıf		
Prepa Use (Firm's name				Firm's EIN ▶			
J36 (Jilly								

Firm's address

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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047 2016

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▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number Society of Women Engineers, Rocky Mountain Section 84-1127067 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university: 10 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.) ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (III) Type of organization (IV) Is the organization (i) Name of supported organization (ii) EIN (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D)

(E) **Total** Part II

								_
Part	Support Schedule for Organiz	ations Descr	ibed in Secti	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	i)	_
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under								
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)		
	on A. Public Support							_
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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	1						
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							_
3	each person (other than a							
	governmental unit or publicly							
	supported organization) included on					1		
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4		i di ji					
	on B. Total Support							
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	_
7	Amounts from line 4							_
8	Gross income from interest, dividends,							
	payments received on securities loans,	<u>'</u>						
	rents, royalties and income from similar		,					
_	sources							_
9	Net income from unrelated business	l						
	activities, whether or not the business is regularly carried on					}		
10			 -					_
10	Other income Do not include gain or loss from the sale of capital assets							
	(Explain in Part VI.)			i				
11	Total support. Add lines 7 through 10							_
12	Gross receipts from related activities, etc	a hi d maraka a hiti ruti hi rut anni	ons)	<u> </u>	<u> </u>	12		-
13	First five years. If the Form 990 is for the	•	•	d. third. fourth	. or fifth tax ve		n 501(c)(3)	-
	organization, check this box and stop he						`` ` ► []
Secti	on C. Computation of Public Suppor	rt Percentage	 e		_			=
14	Public support percentage for 2016 (line	6, column (f) di	vided by line 1	1, column (f))		14	%	,
15	Public support percentage from 2015 Scl			1.00		15	%	,
16a	331/3% support test—2016. If the organ					31/3% or more,	check this	_
	box and stop here. The organization qua			-			. ▶ []
b	33 ¹ / ₃ % support test—2015. If the organi						ore, check	_
	this box and stop here. The organization	qualifies as a	oublicly suppor	rted organizatı	on		▶ []
17a	10%-facts-and-circumstances test—2							
	10% or more, and if the organization me							
	Part VI how the organization meets the "	tacts-and-circ	umstances" te	st. The organi	zation qualifies	as a publicly	supported _	_
	organization						. ▶	ل
b	10%-facts-and-circumstances test—2							
	15 is 10% or more, and if the organiza							
	Explain in Part VI how the organization r				-	•	a publicly	_
10	supported organization						- _	١
18	Private foundation. If the organization di	u not check a l	box on line 13,	10a, 10b, 1/a	i, or 17b, cneci	k inis box and	see	7

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

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	55525	65993	70755	108988	60999	362260
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 .	3743	6784	2254	21111	13439	47331
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid	!					
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the		_				_
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	59268	72777	73009	130099	74438	409591
7a	Amounts included on lines 1, 2, and 3				•		•
	received from disqualified persons .	0	0	0	0	0	0
b	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	- 0	0	0	0	0
c	Add lines 7a and 7b	0	·	·	<i>Will M. M. M. St. M. * M.</i>	7	
8	Public support. (Subtract line 7c from						409591
	line 6.)		P. C. May 6 - M. M. Mark			ta ta tala "Um 3 ta ta dalla d	403391
	on B. Total Support	(-) 0040	(L) 0010	(-) 0014	(-1) 0015	(-) 0016	(6 T-4-1
	dar year (or fiscal year beginning in)	(a) 2012 59268	(b) 2013	(c) 2014 73009	(d) 2015 130099	(e) 2016 74438	(f) Total 409591
9	Amounts from line 6		, , , , ,			, , , , ,	
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources .	452	125	12	11	18	618
_	Unrelated business taxable income (less						
þ	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	o	0	0	0	0
•	Add lines 10a and 10b	452	125	12	11	18	618
С 11	Net income from unrelated business	-					
• • •	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	. 0	0	0	o	0
12	Other income Do not include gain or	-	-				
	loss from the sale of capital assets						
	(Explain in Part VI)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	59720	72902	73021	130110	74456	410209
14	First five years. If the Form 990 is for t	he organization	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	ere					▶ □
Secti	on C. Computation of Public Suppo	rt Percentag	je				
15	Public support percentage for 2016 (line	8, column (f) d	ivided by line 1	13, column (f))		15	99.8 %
16	Public support percentage from 2015 Sc	hedule A, Part	III, line 15 .		<u> </u>	16	99.7 %
Secti	on D. Computation of Investment Ir	ncome Perce	ntage				
17	Investment income percentage for 2016	(line 10c, colur	nn (f) divided b			17	0.2 %
18	Investment income percentage from 201	5 Schedule A,	Part III, line 17			18	0.3 %
19a	331/3% support tests-2016. If the organ	nızatıon did not	check the bo	x on line 14, a	nd line 15 is m	ore than 331/39	
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2015. If the organi						
	line 18 is not more than 331/3%, check this						-
20	Private foundation. If the organization of	lid not check a	box on line 14	, 19a, or 19b, <u>c</u>	check this box	and see instru	ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
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id ie	3b		
3)	3c		
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on •d 3)	4c		
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ly	5a 5b	131	
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or h	7		
?	8		
e d	9a		
h	9b		
ıt	9c		
n d	10a		
0	10b		

Scriedu	e A (FORTH 990 OF 990-E2) 2010		1	Page :
Part	Supporting Organizations (continued)			
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	Yes	No
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Secu	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		in the second
Secti	on C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	Yes	No
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	Sont III	30.35
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instruc	tions	
a b c	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity 	(see ins	tructi	ons).
2	Activities Test. Answer (a) and (b) below.	[Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		7
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	7/6-7		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		-
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	y in	tegrated Type III supporting	g organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continued)	
Secti	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	orted		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızatıons	
4_	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			<u></u>
6_	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.	.ii. e		
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive	
	(provide details in Part VI). See instructions		·····	
9	Distributable amount for 2016 from Section C, line 6		·-	
10	Line 8 amount divided by Line 9 amount			
_	- Marie - Biskille Miss Allegations (as a implementations)	(i)	(ii)	(iii)
56	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
		8 (H 88, % (H) HH) (H) H(H) (F16-2010	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	5		W: U: 18: 19: 0 AUU > 4: 4: 4: 4: 4: 4: 4: 4: 4: 4: 4: 4: 4:
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required – explain in Part VI). See			
	instructions.		*# \$.#. ## \$ \$ \$ \$ \$ ## \$ ## ## ## ## ## ## ##	
3	Excess distributions carryover, if any, to 2016:			
<u>a</u>				
<u>b</u> _	Francisco Code			
<u> </u>	From 2013			
d	From 2015			
<u>e</u> f	Total of lines 3a through e			
g	Applied to underdistributions of prior years		<u> </u>	
<u>9</u> h	Applied to 2016 distributable amount			<u> </u>
<u>;;</u>	Carryover from 2011 not applied (see instructions)			
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	\$ \$ \$46.55, 5; \$66.496.46.55, \$65.5, \$66.46, \$6.46.46.46		
4	Distributions for 2016 from			
-	Section D, line 7.			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	4		
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:	and the first of t		
а				<u> </u>
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			6. F.E.
е	Excess from 2016	azasa dan Francisco de Carlo d		<u> 18 : An Francis Artistan Artistan Antonio (</u>

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Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

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.

OMB No 1545-0047 2016

Employer identification number

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

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.

Open to Public Inspection

Society of Women Engineers, Rocky Mountain Section	84-1127067			
Line 10: Grants and similar amounts paid:				
_\$10,500 in College Scholarships: \$1,750 Hannah Capek, \$1,750 Kristine Guo, \$1,750 Allison Kerker, \$	31,750 Priscilla Dao,			
\$1,750 Hanna Flamme, \$875 Michelle Fenn, \$875 Gillian Fahey				
\$564 for Great Women in Science and Engineering Essay Contest for 6th graders: prizes	·			
-\$365 Colorado Science & Engineering Fair				
\$268 Certificates of Merit program, recognizing High School Seniors for achievement in Math and Science: supplies				
Line 16: Other Expenses				
-\$30,191 GESTEM (Girls Exploring Science, Technology, Engineering and Math) outreach event for 10	100 6th grade girls			
-\$4917 SWE RMS Mini-Conference professional development event in partnership with the CU SWE s	ection			
\$3759 for officer travel to Society conferences and leadership events				
\$386 Payment processing fees and administrative expenses				
\$269 Professional Development events including Tech Talks				
-\$200 Girls Lead The Way Outreach Event: provided lunch for the volunteers for this outreach event f	or HS girls considering engineering			
\$96 Membership events				

scriedule O (Form 990 of 990-EZ) (2016)	
Name of the organization Society of Women Engineers, Rocky Mountain Section	Employer identification number 84-1127067
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