# \*\* PUBLIC DISCLOSURE COPY \*\*

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning J	<u>UL 1, 2013</u> and	ل ending	UN 30, 20	14
<b>B</b> c	heck if pplicabl	C Name of organization  ACHIEVEMENT REWARDS FO	R COLLEGE		D Employer ide	ntification number
	Addre _chang	S SCIENTISTS SEATTLE CHA				
	Name chang	IDOC TOTAL			91	-1042292
<u> </u>	Initial return	Number and street (or P.0. box if mail is not del		Boom/suite	E Telephone nur	
	Termir ated		ivesea to su cet address)	Tioongaale	1	3-782-1238
	Amen		ZIP or foreign postal code		G Gross receipts \$	674,141
	Applic		3 ,		H(a) Is this a grou	
	pendi	F Name and address of principal officer:DEB	ORAH MIZRAHI		1	nates? Yes X No
		SAME AS C ABOVE			l .	ates included? Yes No
ı T	ax-ex		◀ (insert no.) 4947(a)(1)	or 527	1	ch a list. (see instructions)
		e: MTTP://WWWW.SEATTLEARC			H(c) Group exem	•
			sociation Other >		<del></del>	8 M State of legal domicile: W
	ırt I	Summary	· · · · · · · · · · · · · · · · · · ·		o	O 111 Ocaco of Jugar dominato, 112
		Briefly describe the organization's mission or most	significant activities: PROV	TDE FE	TILOWSHIPS	ΨO
Governance	1	ACADEMICALLY OUTSTANDING				
na.	1	Check this box  if the organization disco				
Ve	1	Number of voting members of the governing body				3
Ğ		Number of independent voting members of the go	verning body (Part VI, line 1b)			4 2:
ర		Total number of individuals employed in calendar y				5
itie		Total number of volunteers (estimate if necessary)				6 8
Activities &		Total unrelated business revenue from Part VIII, co				7a 0
ď		Net unrelated business taxable income from Form				7b 0
		Not difficulted business taxable free from 101111 offi	500 1, III 10 0		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)			950,69	
		Program service revenue (Part VIII, line 2g)			23,28	
, e		Investment income (Part VIII, column (A), lines 3, 4				8. 444
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c			-39,31	
	Į.	Total revenue - add lines 8 through 11 (must equal			934,76	
	,	Grants and similar amounts paid (Part IX, column (			1,005,00	
		Benefits paid to or for members (Part IX, column (A		I .		0. 823,730
	I	Salaries, other compensation, employee benefits (l				0. 0
Ses		Professional fundraising fees (Part IX, column (A), I			· · · · · · · · · · · · · · · · · · ·	0. 0
Expenses		Total fundraising expenses (Part IX, column (D), lin				
Ĕ					137,96	2. 142,835
		Other expenses (Part IX, column (A), lines 11a-11d Total expenses. Add lines 13-17 (must equal Part I			1,142,96	
		Revenue less expenses. Subtract line 18 from line			-208,20	
-S	19	neveride less expenses. Subtract line 10 from line	12		ginning of Current Ye	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			2,008,25	
4sse Bai	20	, , , , , , , , , , , , , , , , , , , ,			1,150,00	
Set	21	Net assets or fund balances. Subtract line 21 from	line 20		858,25	
	art II	Signature Block	iiie 20		030,23	J. 407,413
	<del></del> -	Ities of perjury, I declare that I have examined this return,	including accompanying schedule	e and etatem	ente and to the heet	of my knowledge and helief, it is
		t, and complete. Declaration of preparer (other than office				* * *
	, 001100	L and complete: Declaration of preparer (office than office	i ) is based on all illiornation of w	mon proparci	nas any knowledge.	
Sign		Signature of officer			Date	
Her		DEBORAH MIZRAHI, PRESI	TYPNTT			
nei	e	Type or print name and title	TABLE T			
		Print/Type preparer's name	Preparer's signature	I	Date Check	PTIN
Paid	I		STEVEN BASS, CP		5/06/15 self-e	<b>—</b> І
	arer	Firm's name CLIFTONLARSONALL		<u> </u>		
	Only	Firm's address 3000 NORTHUP WAY			Firm's EIN	► 4T_0\40\43
J36	Jiny	BELLEVUE, WA 980			Dhone no	(425) 250-6100
NA~	, the 15	RS discuss this return with the preparer shown abo			Frione no.	
ividy	/ urie li	no discuss this return with the preparer shown abo	ver (see instructions)			X Yes No

# ACHIEVEMENT REWARDS FOR COLLEGE

	n 990 (2013) SCIENTISTS SEATTLE CHAPTER	91-1042292	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:		
	ARCS FOUNDATION ADVANCES SCIENCE AND TECHNOLOGY IN THE	מיים מיידותון	יפ
	BY PROVIDING FINANCIAL AWARDS TO ACADEMICALLY OUTSTANDI		INS
	STUDYING TO COMPLETE DEGREES IN SCIENCE, ENGINEERING AN		
	RESEARCH. SINCE 1978, THE SEATTLE CHAPTER OF ARCS FOUND	ATION HAS	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Vac	X No
	If "Yes," describe these new services on Schedule O.		L22.1140
_	· · · · · · · · · · · · · · · · · · ·		[ <del></del> ]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	?Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by expense	S.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	• •	
	revenue, if any, for each program service reported.	ore, are total experiess,	Tario.
4a			)
	FELLOWSHIP GRANTS ARE MADE TO THE UNIVERSITY OF WASHING	TON (UW) AND	)
	WASHINGTON STATE UNIVERSITY (WSU). THERE WERE 97 UW FEL	LOWSHIPS AND	33
	WSU FELLOWSHIPS GRANTED DURING THE FISCAL YEAR.		
	Who I had white did it had been a first the same of th		
4b	(Code:) (Expenses \$	15	405.)
40			
	MEMBER FIELD TRIPS PROVIDE AN EDUCATIONAL EXPERIENCE FO		
	CONJUNCTION WITH ARCS MEMBER MEETINGS, SPEAKERS ARE GEN	ERALLY INVIT	'ED
	TO THESE MONTHLY MEETINGS. PRESENTATIONS IN 2013/2014 C	OVERED TOPIC	SIN
	SCIENCE, ENGINEERING, TECHNOLOGY, AND MATH.		
4c	(Code:) (Expenses \$ including grants of \$ ) (Rever	nue \$	1
	/ / / / / / / / / / / / / / / / / / /	146 ψ	,
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	١	
4-			
4e	Total program service expenses ▶ 883,332.		000 45 = 151
		⊢orm ₹	<b>90</b> (2013)

Form 990 (2013) SCIENTISTS SEATTLE CHAPTER
Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(S) or 4947(a)(1) (other than a private foundation)?  1 If Yes, complete Schedule C, section of the Schedule C, Schedule of Contributors?  2 Is the organization required to complete Schedule C, Schedule of Contributors?  3 J X  2 Is the organization engage in detect or indicat opticities campaign activities on behalf of or in opposition to candidates for public office? If Yes, complete Schedule C, Part II  3 J X  4 Section 501(6)(3) organization. Did the organization engage in lobbying activities, or have a section 501(f) election in effect of during the tax year? If Yes, complete Schedule C, Part II  4 J X  5 Is the organization a section 501(6)(5) (501(6)(5) Corgonization that receives membership dutis, assessments, or similar amounts as defined in Revenue Procedure 58-192 if Yes, complete Schedule C, Part III  5 J Schedule C, Part III  6 J Schedule C, Part III  7 Did the organization marked and your advised finds or any similar turds or accounts of 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  7 Did the organization members of hold a conservation easement, including easements to preserve open space.  8 Life the organization members of hold a conservation easement, including easements to preserve open space.  9 Life the organization members of works of art, historical treasures, or other similar assets? If Yes, complete Schedule D, Part II  9 Did the organization members and the part of the foliation of the schedule D, Part II  10 Did the organization report an amount for Part X, line 21, for escore or custodial account fability, serve as a custodian for amounts not lettled IP Part X or provide cacidal customers, determined and part X, line 10 fart Yes, complete Schedule D, Part IV  10 Did the organization report an amount for investments - other social assets reported in Part X, line 10 fart Yes, complete Schedule D, Part IV  110 Did the organization re				Yes	No
2 X Section 501(20) and indicate of indirect printerior political campains activition on behalf of or in opposition to candidates for public office? If "Yes," cumplete Schedule C, Part I Section 501(6) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Section 501(6) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Personal Section 501(6) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Personal Section 501(6) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Personal Section 501(6) electron to a section 501(6) organization that receives membership dues, assessments, or similar amounts as defined in Newneur Proceeding electrons of 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 II Personal Section 501(6) electron of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Personal Section 501(6) electrons of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Personal Section 501(6) electrons of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Personal Section 501(6) end organization report an amount in Part X, line 21, for excrew or custodial account liability; serve as a custodian for amounts to relate the part X, line 19 Part X, line 21, for excrew or custodial account liability; serve as a custodian for amounts to relate organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi and ownersts? If "Yes," complete Schedule D, Part IV II Personal S	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3		If "Yes," complete Schedule A	1		
public office? If "Yes," currupter's Schedule C, Part I Section SO(6)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) electron in effect during the tax year? If "Yes," complete Schedule C, Part III S is the organization a socion SO1(ii) SO(ii) (SO) of SO1(ii) Graphization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule 98-197 if "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the anvironment, historic leaf areas, or historic of areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization meport an amount in Part X, line 21, for escrive or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide cold counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part II Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent andowments, or quasi-andowments II "Yes," complete Schedule D, Part V, line 12 that is 5% or more of its total assets reported in Part X, line 147 X, line 157 II "Yes," complete Schedule D, Part X, line 127 II "Yes," complete Schedule D, Part X, line 127 II "Yes," complete Schedule D, Part X, line 128 II "Yes," complete Schedule D, Part X, line 128 II "Yes," complete Schedule D, Part X, line 128 II "Ye			2	X	
4 Section 501(c)(3) organizations. Did the organization engage in kebbying activities, or have a section 501(r)) election in effect during the tax year? If "Yes," complete Schedule C, Part III  5 Is the organization as section 501(c)(f), 501(c)(S), or 501(c)(G) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 93.197 if "Yes," complete Schedule C, Part III  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 II  7 Did the organization resorter or hold a conservation easement, including assements to preserve open space.  8 Did the environment, historic land areas, or historics structures? If "Yes," complete Schedule D, Part II  9 Did the organization report an amount in Part X, Inn 21, for excrew or onstodial account liability, serve as a custodian for amounts not listed in Part X; or provide caddic comissing, debt management, credit repair, or debt repostations services?  9 If "Yes," complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  11 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI  12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI  12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part XI  13 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 X II  1	3				
during the tax year? If "Yes," complete Schedule C, Part II			3		X
5 Is the organization a section 501(c)(6), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if 'Yes,' complete Schedule C, Part II'  5 Did the organization maintain any donor advised funds or any similar funds or accounts? if 'Yos,' complete Schedule D, Part II'  7 Did the organization mereive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yos,' complete Schedule D, Part II'  8 Did the organization against collections of works of art, historical trosaurcs, or other similar assets? If "Yes,' complete Schedule D, Part III'  9 Did the organization and the structure of the structures? If 'Yes,' complete Schedule D, Part II'  10 'Yes,' complete Schedule D, Part IV'  10 'Yes,' complete Schedule D, Part IV'  11 If the organization' answer to any of the following questions is 'Yes,' then complete Schedule D, Part V'  12 If the organization' answer to any of the following questions is 'Yes,' then complete Schedule D, Part V'  13 If the organization' answer to any of the following questions is 'Yes,' then complete Schedule D, Part V'  14 If the organization' answer to any of the following questions is 'Yes,' then complete Schedule D, Part V'  15 Did the organization report an amount for investments - other securilies in Part X, line 10? If 'Yes,' complete Schedule D, Part V'  16 Did the organization report an amount for investments - other securilies 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 X II  2 Did the organization report an amount for other liabilities 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 X II  2 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 X II  2 Did	4				
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6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I I 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 X Did the organization report an amount in Part X, line 21, for escrow or outstodial 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 10 Did the organization report an amount in Part X, line 21, for escrow or outstodial 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 V 10 Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part V 11 If Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11 If Did the organization report an amount for investments - other assests 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 X 11 If Did the organization report an amount for investments or the tax year include a footnote that admitteress the organization report an amount for other assets i	5	titi till till till till till till till			.,
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Bid the organization maintain collections of works of art, historical treasures, or other similar asserts? If "Yes," complete Schedule D, Part III Schedule D, Part III 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 10 Did the organization, directly or through a related organization, hold asserts in temporarily restricted endowments, permanent endowments, or quasi-endowments! If "Yes," complete Schedule D, Part V 11 If the organization assert to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Ib Did the organization report an amount for investments - order 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 11 Did the organization report an amount for other assets 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 11 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 VIII 11 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization is separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 11 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII Did the organization action obtain separate, independent audit	7		6		_ X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 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 Did the organization report an amount for liand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 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 V 11 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 V 11 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 X 11 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11 Did the organization obtain separate, independent audited financial statements for the tax year include a fortionte that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 1 and X 11 Did the organization as shoot described in	•		_		- T
Schedule D, Part III  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?  #*Yes," complete Schedule D, Part V  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? #*Yes," complete Schedule D, Part V  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? #*Yes," complete Schedule D, Part VI, VII, VIII, VIII, VIII, VIII, X, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? #*Yes," complete Schedule D, Part VI  b Did the organization report an amount for investments - other securities in Part X, line 10? #*Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? #*Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other assots in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? #*Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other assots in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? #*Yes," complete Schedule D, Part X  11 Expendition obtain separate or consolidated financial statements for the tax year include a footnote that addressess the organization slability for uncertain tax positions under FIN 48 (ASC 740)? #*I*Yes," complete Schedule D, Part X  11 Expendition obtain separate, independent audited financial statements for the tax year? #*I*Yes," complete Schedule D, Part X  12a Did the organization obtain separate, independent audited financial statements for the tax year? #*I*Yes," complete Schedule D, Part X  12b Was t	Ω				
b) bid 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	0				v
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  ## 179s, "complete Schedule D, Part IV  Did the organization, firettly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? ## 19es, "complete Schedule D, Part V II 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.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? ## "Yes," complete Schedule D, Part VI II	q		8		
10   10   10   10   10   10   10   10	J	·			
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			۵		x
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V    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.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI    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    c 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    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 X III    Z Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X    11d    X    11d	10		3		- 21
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.  2			10	x	
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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  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  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  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 X	ıo		4-		v
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  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  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  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  The schedule G, Part IIII  The schedule G, Part III	16		15		
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.  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.  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.	10		40		v
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  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  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 X	17		16		
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  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 X	11	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	4"7		Y
1c and 8a? If "Yes," complete Schedule G, Part II  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  18 X  19 X	12		17		Δ_
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	10		10	Y	
complete Schedule G, Part III	19		10	<u> </u>	
20a Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H	,,,		10		x
	20a	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H			
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?					

Part IV Checklist of Required Schedules (continued)

			Yes	No
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	X	
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		х
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? If "Yes," complete			
	Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
¢	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		
	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			l
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	251		37
ne	Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		X_
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
		26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
A. I	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
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 IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			32
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		X
34				v
250	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
Ų	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	0.00		
	If "Yes," complete Schedule R, Part V, line 2	36		х
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2013)

SCIENTISTS SEATTLE CHAPTER Part V Statements Regarding Other IRS Filings and Tax Compliance

91-1042292

Page 5

	Check if Schedule O contains a response or note to any line in this Part V		••••••					
					Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	2			i in ing		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
c	Did the organization comply with backup withholding rules for reportable payments to vendors and rules	eportable gami	ng					
	(gambling) winnings to prize winners?	•••••		1c	X			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			5.55				
	filed for the calendar year ending with or within the year covered by this return	2a	0			Naba		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					ini d		
3a	District and Color and Col			За		X		
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other							
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?		4a		X		
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 A	Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
	any contributions that were not tax deductible as charitable contributions?	=		6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribut							
	were not tax deductible?	_		6b				
7	Organizations that may receive deductible contributions under section 170(c).							
а	a 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?							
b								
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w							
	to file Form 8282?			7с		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	**********	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7 <del>1</del>		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as red	quired?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form	n 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Discourage of the section $509(a)(3)$ supporting organizations and $509(a)(3)$ supporting organizations.	d the supporting				1. The		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during t	the year?	8				
9	Sponsoring organizations maintaining donor advised funds.							
а	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				
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders	11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
12a	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 year	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		<del></del>		
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the	. I						
	organization is licensed to issue qualified health plans	13b						
	Enter the amount of reserves on hand	13c						
		,,		14a		Х		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	∍O	-1	14b				
				Form	990 (	(2013)		

91-1042292

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year			uthir.					
	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.								
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 23								
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		X					
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		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6	Х						
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	х						
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	х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			\$1,380					
a	The governing body?	8a	х	interative at					
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
ŭ	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
	The second secon		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104							
~	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х					
b									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	antilit i i					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	ILU	21						
•	in Schedule O how this was done	12c	x						
13	Post of the control o	13	X						
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		gjyradili					
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
-		45-		v					
a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a		X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b							
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
ioa				v					
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		X					
Ð									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
500	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed WA	., .							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	avadab	ie						
	for public inspection. Indicate how you made these available. Check all that apply.								
Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial						
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:								
	THE ORGANIZATION - 203-782-1238								
	4616 25TH AVE NE. SEATTLE. WA 98105								

Form **990** (2013)

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

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

#### 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, and 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.

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

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

Cast Stroom and Down Hotelor and Organization		T	<b>4</b> , 114_(			···po	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(A)	(B)			Pos	C) itior	1		(D)	(E)	(F)
Name and Title	Average		not c	not check more than one unless person is both an			Reportable	Reportable	Estimated	
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	ē	Γ				Г	the	organizations	compensation
	hours for	individual trustee or director				-		organization	(W-2/1099-MISC)	from the
	related	iee or	stee			ınsate		(W-2/1099-MISC)	(** = *, *******************************	organization
	organizations	i i i	nal tri		oyee	dE o				and related
	below	vidua	nstitutional trustee	) je	Key employee	Highest compensated employee	Former			organizations
	line)	2	last.	Officer	Key	三三	호			
(1) ANDREA THORESON	10.00									
IMMEDIATE PAST PRESIDENT		X	<u> </u>	X				0.	0.	0.
(2) JACQUE DOANE	10.00	1			ĺ					
DIRECTOR OF LONG RANGE PLANNING		X		X				0.	0.	0.
(3) MA SANGEORZAN	10.00						İ			
VP/DEVELOPMENT		X		Х	<u> </u>	ļ	<u> </u>	0.	0.	0.
(4) AMY RUDOLF	10.00									
VP/FINANCE		X		X			<u> </u>	0.	0.	0.
(5) EMER DOOLEY	10.00									
VP/UNIVERSITY RELATIONS		X		X				0.	0.	0.
(6) MARCIA MCGREEVY LEWIS	10.00									
PRESIDENT ELECT		X		X			<u> </u>	0.	0.	0.
(7) CHERYL HADLEY	10.00									
VP/COMMUNICATIONS		X		X	ļ		ļ	0.	0.	0.
(8) DEBORAH MIZRAHI	30.00	1								
PRESIDENT		X	ļ	Х	L.	ļ	<u> </u>	0.	0.	0.
(9) BETH TOOMEY	10.00									
VP/MEMBERSHIP		X		X				0.	0.	0.
(10) NANCY MEE	10.00	4								
VP/PROGRAMS		X	1	X				0.	0.	0.
(11) SANDRA CARLSON	5.00									
ADVISOR-AT-LARGE		X		Х				0.	0.	0.
(12) LYNN MOWE	5.00	_								
ADVISOR-AT-LARGE		X	ļ	X		ļ	<u> </u>	0.	0.	0.
(13) JENNY WYATT	5.00	4								
CORPORATE SECRETARY		X	ļ	Х		<u> </u>		0.	0.	0.
(14) CORI KIRKPATRICK	10.00	1								
VP/MEMBERSHIP		X		X				0.	0.	0.
(15) PATRICIA ROGERS	10.00	4.		_						
VP/PROGRAMS		X	<u> </u>	X	<u> </u>	ļ	ļ	0.	0.	0.
(16) BROOKE DEBOUTRAY	10.00	1								
2014 LUNCHEON CO-CHAIR		X	ļ	X	<u> </u>	ļ	<b> </b>	0.	0.	0.
(17) ANNE MCCUTCHEON	10.00	-								
2014 LUNCHEON CO-CHAIR		X		X		<u>L.</u>	<u>L</u>	0.	0.	0.
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Part VII Section A. Officers, Directors,	1	ploy	ees			ighe	st C	1		
(A)	(B)				C) ition			(D)	(E)	(F)
Name and title	Average hours per		Position (do not check more tox, unless person is			e than one		Reportable compensation	Reportable	Estimated
	week		cer an					from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	or director				ited		organization	(W-2/1099-MISC)	from the
	related organizations	B	truste			suadi		(W-2/1099-MISC)		organization
	below	lual tr	tlona		ploye	st com				and related organizations
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) WENDY RUSH	10.00				_					
2014 LUNCHEON CO-CHAIR		X		Х	L.			0.	0.	0.
(19) APRIL PRIDE ALLISON	10.00									
2015 LUNCHEON CO-CHAIR	10.00	X		Х	ļ			0.	0.	0.
20) SARAH DUNHAM WATTS	10.00								_	
2015 LUNCHEON CO-CHAIR	10.00	X		X	ļ	-		0.	0,	0.
21) MICKI FLOWERS	10.00	7.7		ι,						
2015 AUCTION CO-CHAIR	10.00	Х		X	-			0.	0.	0.
22) CARMEN GAYTON 2015 AUCTION CO-CHAIR	10.00	х		Х				0.	0.	
OUTS AUCTION CO-CHAIR		Λ	-	Δ			╁	0.	<u> </u>	0.
		ļ				ļ	<u> </u>			
					ļ	<u> </u>				
1b Sub-total		<u> </u>	l				▶	0.	0,	0.
c Total from continuation sheets to Pa								0.	0.	
d Total (add lines 1b and 1c)								0.	0.	
2 Total number of individuals (including							no re			
compensation from the organization									,	
										Yes No
3 Did the organization list any former of				-	•	,	•		10.00 0 0 0 0 0 0	
line 1a? If "Yes," complete Schedule										3 X
4 For any individual listed on line 1a, is t	•							•	the organization	
and related organizations greater than										4 X
5 Did any person listed on line 1a receiv								-		
rendered to the organization? If "Yes," Section B. Independent Contractors	complete Scheaul	e J te	or st	icn	pers	son		***************************************		5 X
Complete this table for your five higher	est compensated in	depe	ende	nt c	ontr	racto	ors t	hat received more than	\$100,000 of compen	sation from
the organization. Report compensatio										
(A	<b>(</b> )							(B)		(C)
Name and bus	iness address	NC	NE	5				Description of s	ervices (	Compensation
							-			
							$\dashv$			
	<del></del>									
O Talalanah Sili	1 C1 II									
2 Total number of independent contract \$100,000 of compensation from the o		ot lir	nited	d to	tho:	_	sted	above) who received m	ore than	
wroo,ooo or compensation from the o	nyanizativit P					ي				Form <b>990</b> (2013)
										- UIIII UUU (2010)

Form 990 (2013) SCIENTISTS SEATTLE CHAPTER 91-1042292 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 107,000. b Membership dues 200,133. c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 339,359. similar amounts not included above g Noncash contributions included in lines 1a-1f; \$ 646,492 h Total. Add lines 1a-1f. Business Code 2 a MEMBER FIELD TRIPS 900099 15,405 15,405 Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f 15,405. Investment income (including dividends, interest, and other similar amounts) 444 444. 4 Income from investment of tax-exempt bond proceeds Royalties ..... 5 (i) Real 6 a Gross rents b Less: rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ \_\_\_\_\_ 200,133. of contributions reported on line 1c). See 11,800 Part IV, line 18 a 78,414. b Less: direct expenses b -66,614 -66,614. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 \_\_\_\_\_a b Less: direct expenses b c Net income or (loss) from gaming activities .... 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d

9

595,727.

15,405.

-66,170.

Form **990** (2013)

Total revenue. See instructions.

332009 10-29-13

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A), Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, (D) Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 823,750 823,750 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 Grants and other assistance to governments, 3 organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees ..... Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages \_\_\_\_\_ 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 10 Fees for services (non-employees): 11 Management Legal 19,887. 19,887 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 48,403. 12,103. 19,520. 16,780. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 9.912. 255. 9,657. Office expenses 13 Information technology 15,910. 15,910. 14 Royalties \_\_\_\_\_ 15 Occupancy 16 4,556 4,556 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings ..... 1,097. 1.097 19 Interest 20 2,525. 2,525 Payments to affiliates ..... 21 22 Depreciation, depletion, and amortization 3.031 3,031 23 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.) ..... 19,227. 19,227 PROGRAM EXPENSE DONOR DEVELOPMENT 11,853. 11,853. c SITE VISITS 5,751. 5,751 683. a GIFTS 683 e All other expenses 966,585 883,332. 54,620. 25 Total functional expenses. Add lines 1 through 24e 28,633. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2013)
Part X Balance Sheet

Par	T.A.	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	391,536.	1	180,196
	2	Savings and temporary cash investments	907,615.	2	923,372
	3	Pledges and grants receivable, net	692,336.	3	639,750
	4	Accounts receivable, net	16,772.	4	
	5	Loans and other receivables from current and former officers, directors,		New Y	
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	Militaria de la composición de la composición de la contrata de la composición del composición de la composición del composición de la composición del composición de la composición de la composición de la compo	5	
	6	Loans and other receivables from other disqualified persons (as defined under			
	_	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
so l		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	PERCONAL AND PERCONAL ADDRESS AND A
Assers	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	The state of the s		9	7,851
		Prepaid expenses and deferred charges  Land, buildings, and equipment: cost or other		9	7,631
	IVa				
		basis. Complete Part VI of Schedule D 10a		40	Hallyan area and the lown of 1540.
		Less: accumulated depreciation 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	2 000 050	15	1 851 160
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,008,259.	16	1,751,169
	17	Accounts payable and accrued expenses	1,150,000.	17	1,263,750
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	Facilitatina de la compania de la c	21	notices in consideration of an 17.7
es	22	Loans and other payables to current and former officers, directors, trustees,			
Ĭ		key employees, highest compensated employees, and disqualified persons.		Silk	
Liabilities		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 third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,150,000.	26	1,263,750
		Organizations that follow SFAS 117 (ASC 958), check here			
ė,		complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets	409,090.	27	328,017
8	28	Temporarily restricted net assets	424,169.	28	134,402
ğ	29	Permanently restricted net assets	25,000.	29	25,000
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
0		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
585	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
er /	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	858,259.	33	487,419
	34	Total liabilities and net assets/fund balances	2,008,259.	34	1,751,169

# ACHIEVEMENT REWARDS FOR COLLEGE

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	990 (2013) SCIENTISTS SEATTLE CHAPTER	91-104	.2292	Pag	ge <b>12</b>
Pa	rt XI Reconciliation 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	59!	5,7	<u> 27.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	960	5,5	<u>85.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	370	0,8	58.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	858	3,2	<u>59.</u>
5	Net unrealized gains (losses) on investments	5			<u> 18.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	48	7,4	<u> 19.</u>
Pa	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	Accounting method used to prepare the Form 990: L Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X.	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			450	
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c		_X_
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			

332012 10-29-13 Form 990 (2013)

# SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **2013** 

Open to Public Inspection

Internal Revenue Service

Name of the organization

ACHIEVEMENT REWARDS FOR COLLEGE SCIENTISTS SEATTLE CHAPTER

Employer identification number 91-1042292

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 5 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.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% 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). 10 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 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 I, 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? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s). (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organization in col. lin coL (i) listed in your! organization in col. (described on lines 1-9) organization (i) organized in the U.S.? support governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

91-1042292 Page 2

Schedule A (Form 990 or 990-EZ) 2013 SCIENTISTS SEATTLE CHAPTER 91-10422

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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 qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning 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.")	801,763.	554,004.	706,108.	950,694.	646,492.	3,659,061.
2	Tax revenues levied for the organ- ization'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	801,763.	554,004.	706,108.	950,694.	646,492.	3,659,061.
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						3,032,001,
	amount shown on line 11,						100 010
^	column (f)						100,948.
	Public support. Subtract line 5 from line 4.	<u>Indeludrangonas energe</u>	Resolver Colonianian Colo	proping a large regerça VIII	<u> </u>	Asilan gara masma ras cupatrianna intri a	3,558,113.
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(-) 2012	/D Total
	Amounts from line 4	801,763.	554,004.	706,108.	950,694.	(e) 2013 646, 492.	(f) Total
	Gross income from interest,	001,703.	334,0040	700,1001		040,452.	3,659,061.
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	8,958.	4,710.	2,365.	98.	444.	16,575.
9	Net income from unrelated 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.)				0,000		
	<b>Total support.</b> Add lines 7 through 10						3,675,636.
	Gross receipts from related activities,	•	,	****		12	216,318.
13	First five years. If the Form 990 is for	<del>-</del>	first, second, thin	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	. —
Sec	organization, check this box and storection C. Computation of Publ		rcentage	***************************************			<b>&gt;</b>
	Public support percentage for 2013 (			olumn (fl)		14	96.80 %
	Public support percentage from 2012					15	95.69 %
	33 1/3% support test - 2013. If the o					<del></del>	
,	stop here. The organization qualifies	_				•	
b	33 1/3% support test - 2012. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	organization		▶□
b	10% -facts-and-circumstances tes						I0% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and :	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
	·				Sche	dule A (Form 990	or 990-EZ) 2013

## 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.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 18 for the year c Add lines 7a and 7b 8 Public support (Sithate line 1/2 feet lines) Section B. Total Support	Section A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
memborahip less incivited, (Do not incide any "trussal grants")  2. Gross neceipts from administration, mechanistic sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exampt purpose of gross neceipts from administration that are not an unrelated trade or business under section 513  4. Tax revenues levided for the organization's tax-exampt purpose of the programment of	Calendar year (or fiscal year beginning in) 📂	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
include any "unusual grants.")  Gross necepits from admissions, merchandles cold or services per formed, or facilities fruinshed in any activity that is related to the organization's tax-exampt purpose  3. Gross necepits from admissions that are not an unrelated trade or basiness under section 513  4. Tax revenues levels for the organization's benefit and either post to or expended on its behalf  5. The value of services or facilities furnished by a governmental unit to the organization's benefit and either post to or expended on its behalf  6. Total. Add lines 1 through 5.  7. A mount is facilitied on lines 1, 2, and 3. received from disqualified persons by Amounts formed times at a freeded from the translation without charge  6. Total. Add lines 1 through 5.  7. A mount is facilitied on lines 1, 2, and 3. received from the translation expenses the greatest lines 3 and streets from the translation of the companization of the translation of the companization without charge in the sease who greatest lines 3 and streets from the translation of the companization of t	1 Gifts, grants, contributions, and						
2 Gross receipts from admissions, merchandles sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exampt purpose a Gross receipts from activities that are not an unrelated rade or business under section 513  4 Tax revenues levied for the organization's bearing and the paid to or expended on its behalf or expended or	membership fees received. (Do not	1					
merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization's trave-empt purpose of organization's trave-empt purpose of consistent of the organization's trave-empt purpose of the organization's trave-empt purpose of the organization's trave-empt purpose of the organization's several several travelled for the organization's benefit and either paid to or expended on its behalf or expended on the set of the organization without charge of the organization	include any "unusual grants.")						
formed, 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.  1. Tax revenues levied for the organization's trade and the section of the particular to provide any activities and income from similar to the organization without charge is furnished by a governmental unit to the organization without charge is furnished by a governmental unit to the organization without charge is furnished by a governmental unit to the organization without charge is for the section of the section	2 Gross receipts from admissions,						
any activity that is related to the organization's tax-exampl 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'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.  7. a Mounts included on lines 1, 2, and 3 received from disqualified persons  b. Amounts included on lines 1, 2, and 3 received from disqualified persons  b. Amounts included on lines 1, 2, and 3 received from disqualified persons to the organization to lines 1 to the top year.  6. Add lines 7 and 7 to 2.  8. Public support included in line 1 (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calledary are to fixed year beginning in   →	•						
originization's tax exempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 4 Tax revenues levied for the organ- ization'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 7 A mounts included or lines 1, 2, and 3 received from disqualified persons 1 A mounts included on lines 1, 2, and 3 received from disqualified persons 1 A mounts included on lines 2 and 3 received from sheet tran disqualified persons 1 A mounts included on lines 2 and 4 received from sheet tran disqualified persons 1 A mounts included on lines 2 and 4 received from sheet tran disqualified persons 1 A mounts included on lines 2 and 4 received from sheet tran disqualified persons 1 A mounts included on lines 2 and 4 received from sheet tran disqualified persons 1 A mounts included on lines 2 and 4 received from sheet tran disqualified persons 2 Add lines 7 and 7 b  8 Public support (seeker 18 Rewalles)  Section B. Total Support  2 A mounts from line 6  10 a Cross income from instead.  4 Add lines 7 and 7 b  3 A mounts from line 6  10 a Cross income from instead.  5 A mounts income from instead.  6 Add lines 7 total support  6 Add lines 10 and 10 b  10 a Cross income from instead.  6 Add lines 10 and 10 b  11 A mount included under the support person lines of the support per	*						
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 7 A mounts included on lines 1, 2, and 3 received from disqualified persons by a mount service of the secret and againstee parsons that exceed the exceeding persons that exceed the exceeding persons that exceeding persons that exceeding exceeding persons that exceeding exceeding persons that exceeding exceeding persons that exceeding exceeding exceeding persons that exceeding exceeding exceeding exceeding persons that exceeding ex							·
iness under section 513 4 Tax revenues levied for the organization's benefit and either paid to or axpended 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	3 Gross receipts from activities that	:					
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  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons by amount or lines 1, 2, and 3 received from disqualified persons by amounts included on lines 2 and a received from disqualified persons by amounts or lines 1 for the year.  Add lines 7 and 7 b  8 Public support similar services or disputation of the form of the for	are not an unrelated trade or bus-	į					
ization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 through 5  7a Amounts included on lines 1, 2, and 3 received from disquisitified persons by amounts included on lines 1, 2, and 3 received from disquisitified persons by amounts included on lines 3 and 3 received among the management of the following the services of the person of the disquisition of the person by amounts included in line 3 and 3 received among the management of the following the services of the person of the disquisition of the person	iness under section 513						
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The value of services or facilities furnished by a governmental unit to the organization without charge in the organization in the organization is not in the organization of livestiment income percentage from 2013 Schedule A Part III, line 15 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization in the 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization is possible in the organization of the organization did not check a box on line 14, and line 16 is more than 33 1/3%, and line 16 is nore than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization is line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 18 18 18 18 18 18 18 18 18 18 18 18 18	ization's benefit and either paid to	İ					
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15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2012 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2013 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2012 Schedule A, Part III, line 17  18 Investment income percentage from 2012 Schedule A, Part III, line 17  19 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 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    Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2012 Schedule A, Part III, line 13, column (f)   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2013 (line 10c, column (f))   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage from 2012 Schedule A, Part III, line 17   Investment income percentage fro							<b>&gt;</b>
16 Public support percentage from 2012 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2012 Schedule A, Part III, line 17  18 Investment income percentage from 2012 Schedule A, Part III, line 17  19 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 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    Investment income percentage from 2012 Schedule A, Part III, line 17   18			<del>_</del>				
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2012 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 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    IT							
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2012 Schedule A, Part III, line 17  19 a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 b 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						16	
18 Investment income percentage from 2012 Schedule A, Part III, line 17				no 10 nolumn (6)		47	
19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 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							
more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <b>b</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization			• • • • • • • • • • • • • • • • • • • •				
b 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		-					
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
	• •	-			•	,	
						-	

# ACHIEVEMENT REWARDS FOR COLLEGE

Schedule A	. (Form 990 or 990	-EZ) 2013 SCIENTIST	'S SEATTLE	CHAPTER		91-1042292 Page
Part IV	Supplement	al Information. Provide	the explanations re	quired by Part II, line	e 10; Part II, line 17a or	17b; and Part III, line 12.
	Also complete th	nis part for any additional info	ormation. (See instr	uctions).	. ,	,
		,		······································		
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# Schedule A

# Identification of Excess Contributions Included on Part II, Line 5

2013

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
EVE & CHAP ALVORD	90,000.	16,487.
CHARLES & LINDA BARBO	92,500.	18,987.
LYNN & MIKEL THOMSEN	127,500.	53,987.
ZCI, ZEVENBERGEN CAPITAL INVESTMENTS, LLC	85,000.	11,487.
Fotal Excess Contributions to Schedule A, Part II, Line 5		100,948.

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

# Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

ACHIEVEMENT REWARDS FOR COLLEGE

OMB No. 1545-0047

2013

Employer identification number

SCIENTISTS SEATTLE CHAPTER 91-1042292 Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule 🔟 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization
ACHIEVEMENT REWARDS FOR COLLEGE
SCIENTISTS SEATTLE CHAPTER

Employer identification number

91-1042292

Panı	Contributors (see instructions). Use duplicate copies of Part Lif additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) <sup>·</sup> No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 17,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$ <u>18,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$57,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$17,500.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

Name of organization

ACHIEVEMENT REWARDS FOR COLLEGE SCIENTISTS SEATTLE CHARTED

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part (	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Name of organization ACHIEVEMENT REWARDS FOR COLLEGE

Employer identification number

SCIENT	ISTS SEATTLE CHAPTER		91-1042292		
Part III	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	he following line entry. For organizations c., contributions of <b>\$1,000 or less</b> for th	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter ne year. (Enter this information once.)		
(a) No. from Part I	(b) Purpose of gift (c) Use of		(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(a) Transfer of gift			
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

# SCHEDULE D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ACHIEVEMENT REWARDS FOR COLLEGE

SCIENTISTS SEATTLE CHAPTER

Employer identification number 91-1042292

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	r Account	s.Complete if th	e
	organization answered "Yes" to Form 990, Part IV, lin	e 6.			
		(a) Donor advised funds	(b) Funds	and other accou	nts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in		funds		
	are the organization's property, subject to the organization's	exclusive legal control?		Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of		-		
	impermissible private benefit?			Yes	No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part	IV, line 7.		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).			
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histori	cally importa	ant land area	
	Protection of natural habitat	Preservation of a certified			
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservatio	n easement on ti	ne last
	day of the tax year.				
			He	eld at the End of the	Тах Үеаг
а	Total number of conservation easements		2a		
b	<b>-</b>		1 1		
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure			
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization di	uring the tax	
	year >				
4	Number of states where property subject to conservation ea	sement is located			
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements i	t holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements durin	g the year 🕨	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, and				
8	Does each conservation easement reported on line 2(d) above				
	and section 170(h)(4)(B)(ii)?			Yes	L No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense sta	tement, and	l balance sheet, a	ınd
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization	i's accounting for	
D-	conservation easements.	f A + 1 E + - i - 1 T OII	0::11	A	
Pa	t III Organizations Maintaining Collections o		er Similar	Assets.	
	Complete if the organization answered "Yes" to Form				
1a	If the organization elected, as permitted under SFAS 116 (AS				
	historical treasures, or other similar assets held for public ext		of public se	rvice, provide, in	Part XIII,
_	the text of the footnote to its financial statements that descr				
Ь	If the organization elected, as permitted under SFAS 116 (AS				
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, pro	vide the following	amounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1				
					<del></del>
2	If the organization received or held works of art, historical tre	-	in, provide		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:			
2	Revenues included in Form 990 Part VIII line 1		Φ. Φ.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2013

b Assets included in Form 990, Part X

ACHIEVEMENT REWARDS FOR COLLEGE SCIENTISTS SEATTLE CHAPTER Schedule D (Form 990) 2013 91-1042292 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Nο If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 25,000 25 000 25,000 25.000. **b** Contributions c Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs f Administrative expenses End of year balance 25.000. 25,000. 25,000. 25,000. 25,000. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 a Board designated or quasi-endowment b Permanent endowment ► Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No (i) unrelated organizations 3a(i) Х (ii) related organizations X 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) depreciation 1a Land

Schedule D (Form 990) 2013

e Other

b Buildingsc Leasehold improvementsd Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

SCIENTISTS SEATTLE CHAPTER

(a) Description of security or category (including name of security)	to Form 990, Part IV, line (b) Book value			nd-of-year market value
) Financial derivatives	(-)	\ <del>-</del> /		Ta or your market raide
c) Closely-held equity interests				·····
i) Other				
(A)				
(B)				
(C)				
(D)				
(E)			<del> </del>	
(F)				
(G)				
(H)				
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990 Part IV line	11c. See Form 99	0 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method o	of valuation: Cost or e	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		s triffication pages is for		
	Description	i ia. See Form 99	U, Part X, line 15.	(b) Book value
(1)				
(2)	*****			
(3)				
(4)				
(5)				
(5) (6)				
(5) (6) (7)				
(5) (6) (7) (8)				
(5) (6) (7) (8) (9)				
(5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line	» 15.)			
(5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.				5,
(5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line	to Form 990, Part IV, line			5.
(5) (6) (7) (8) (9) Mal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Mal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9)  Stal. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  (1) Federal income taxes (2)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9)  Stal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  (1) Federal income taxes (2) (3)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Part X Other Liabilities.  Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.
(5) (6) (7) (8) (9) Mal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	to Form 990, Part IV, line	l1e or 11f. See Fo		5.

332053 09-25-13

Part XI Reconciliation of Revenue per Audited Finan-	cial Statements With Reven	ue per Return.
Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.	•
1 Total revenue, gains, and other support per audited financial stater	nents	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1	***************************************	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part		
Part XII Reconciliation of Expenses per Audited Finar		
Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	
b Prior year adjustments		<b>工厂</b>
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		#11.114. 1914.11
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	** 1
c Add lines 4a and 4b		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Pa	rt I, line 18.)	5
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XII, lines 2d and 4b.		Part V, line 4; Part X, line 2; Part XI,
PART V, LINE 4:		
RESTRICTED ENDOWMENT		

### **SCHEDULE G**

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990

	MENT REWARDS FOR C						ntification number
	STS SEATTLE CHAPTE				'	1042	
	Complete if the organization answe		es" to	Form 990, Part IV, I			
<ul> <li>1 Indicate whether the organization rais a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, Pablif "Yes," list the ten highest paid indicompensated at least \$5,000 by the</li> </ul>	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	ion of ion of fundra (includ	non-g gover ising of ding of ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or	Yes	·
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contrib	trol of	(iv) Gross receipts from activity	(v) Amoun to (or retain fundrain listed in c	ned by) ser	(vi) Amount paid to (or retained by) organization
		Yes	No				
	· · · · · · · · · · · · · · · · · · ·					:	
					112.10		
			•				
3 List all states in which the organization	n is registered or licensed to solicit o	ontrib	utions	s or has been notified	it is exemp	t from re	egistration
or licensing.				. ,,,,			
		-					
<u>, , , , , , , , , , , , , , , , , , , </u>						<del></del>	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2013

ACHIEVEMENT REWARDS FOR COLLEGE Schedule G (Form 990 or 990-EZ) 2013 SCIENTISTS SEATTLE CHAPTER 91-1042292 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through AUCTION LUNCHEON col. (c)) (event type) (event type) (total number) Revenue 32,450. 179,483 211,933. 1 Gross receipts 23,550 176,583 200,133. 2 Less: Contributions 8,900. 2,900. 11,800. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 39,602. 39,602. 6 Rent/facility costs Food and beverages 8 Entertainment 11,967. 26,845. 38,812. Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 78,414. 11 Net income summary. Subtract line 10 from line 3, column (d) -66,614. Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain:

Schedule G (Form 990 or 990-EZ) 2013

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain:

332082 09-12-13

# ACHIEVEMENT REWARDS FOR COLLEGE

Sch	edule G (Form 990 or 990-EZ) 2013 SCIENTISTS SEATTLE CHAPTER 91-	1042	292	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	□ No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13a		%
	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$			
c	If "Yes," enter name and address of the third party:			
	Name >			
	Address >			
16	Garning manager information:			
	Name			
•	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	ines 9,	9b, 10	)b, 15b,
	13c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).			
				··· <u>-</u>
		<del></del>		

SCHEDULE! (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Open to Public OMB No. 1545-0047 2013

Inspection

▶ Attach to Form 990.

internal Revenue Service	Informat	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	(Form 990) and its	instructions is at	www.irs.gov/form98	90.	Inspection
Name of the organization ACHIEVEMENT REWARDS SCIENTISTS SEATTLE C	NT REWARD S SEATTLE	OS FOR COLLEGE CHAPTER	E E				Employer identification number 91-1042292
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate th		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	;
criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance?stance?	toring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	United States. C	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	55,000. Part II car	be duplicated if additi	ional space is neec	led.	to botton		
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(r) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON PO BOX 359505							
SEATTLE WA 98195	91-6001537	501 (C) 3	457,250,	0			FELLOWSHIP FUNDS
WASHINGTON STATE UNIVERSITY PO BOX 641030 PULLMAN, WA 98164	91-1075542	501 (C) 3	241,500.	0,0			FELLOWSHIP FUNDS
							·
		·					
2 Enter total number of section 501(c)(3) and government organizations	nd government or	ganizations listed in the	listed in the line 1 table				<b>A</b>
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					<b>A</b>
LHA For Paperwork Reduction Act Notice, see the Instructions for For	see the Instruct	tions for Form 990.					Schedule I (Form 990) (2013)

# ACHIEVEMENT REWARDS FOR COLLEGE

91-1042292 SCIENTISTS SEATTLE CHAPTER Schedule I (Form 990) (2013)

Page 2

(f) Description of non-cash assistance (book, FMV, appraisal, other) Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

			Schedule I (Form 990) (2013)
			29
			332102 10-29-13

# SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

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

OMB No. 1545-0047

Name of the organization

ACHIEVEMENT REWARDS FOR COLLEGE SCIENTISTS SEATTLE CHAPTER

Employer identification number 91-1042292

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:			
DEGREES IN SCIENCE, MEDICINE AND ENGINEERING, THEREBY CONTRIBUTING TO			
THE ADVANCEMENT OF SCIENCE AND TECHNOLOGY.			
FORM 990, PART I, LINE 6:			
ARCS HAS 80 ACTIVE MEMBERS WHO EITHER SUPPORT OR ATTEND			
THE ANNUAL AUCTION AND FELLOWSHIP LUNCHEON, VARIOUS FIELD TRIP			
MEETINGS, SERVE AS COMMITTEE MEMBERS FOR THESE EVENTS, OR AS BOARD			
MEMBERS OF ARCS.			
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:			
AWARDED GRADUATE FELLOWSHIPS TO OUTSTANDING UNITED STATES CITIZENS			
COMPLETING PHD DEGREES IN SCIENCE, ENGINEERING AND MEDICAL RESEARCH AT			
THE UNIVERSITY OF WASHINGTON AND WASHINGTON STATE UNIVERSITY. OVER			
\$13.7 MILLION HAS BEEN CONTRIBUTED BY THE SEATTLE CHAPTER TO OVER 900			
TALENTED STUDENTS PURSUING THEIR DREAMS TO SOLVE THE SCIENTIFIC			
CHALLENGES FACING OUR WORLD TODAY. THESE MONIES HAVE GIVEN OUR STATE'S			
RESEARCH UNIVERSITIES A COMPETITIVE EDGE AS THEY RECRUIT THE NATION'S			
FINEST DOCTORAL CANDIDATES TO THEIR PREMIER PROGRAMS.			
FORM 990, PART VI, SECTION A, LINE 6:			
ARCS IS A MEMBERSHIP ORGANIZATION. THE CATEGORIES OF			
MEMBERSHIP SHALL BE ACTIVE, ASSOCIATE AND AMBASSADOR. ONLY ACTIVE MEMBERS			
SHALL BE ENTITLED TO VOTE.			

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization ACHIEVEMENT REWARDS FOR COLLEGE Employer identification number SCIENTISTS SEATTLE CHAPTER 91-1042292 FORM 990, PART VI, SECTION A, LINE 7A: ACTIVE MEMBERS OF THE CORPORATION SHALL HAVE THE RIGHT TO VOTE ON THE ELECTION OF THE BOARD AND OFFICERS AT THE ANNUAL MEETING. FORM 990, PART VI, SECTION A, LINE 7B: ACTIVE MEMBERS OF THE CORPORATION SHALL HAVE THE RIGHT TO VOTE ON ANY MATTERS SUBMITTED TO THEM BY THE BOARD OR EXECUTIVE COMMITTEE AND ANY MATTERS REQUIRED BY THE BY LAWS. FORM 990, PART VI, SECTION B, LINE 11: THE VICE PRESIDENT OF FINANCE AND PRESIDENT OF THE BOARD REVIEW THE FORM 990 BEFORE MAKING IT AVAILABLE TO THE BOARD OF DIRECTORS FOR REVIEW AND DISCUSSION PRIOR TO IT BEING FILED WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: MEMBERS HAVE A DUTY TO DISCLOSE ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST TO THE DIRECTORS OR MEMBERS OF COMMITTEES WITH BOARD-DELEGATED POWERS. ANY CHAPTER DIRECTOR OR OFFICER MAY REQUEST THAT A MATTER BE REFERRED TO THE BOARD FOR REVIEW AND VOTE. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERSTED PERSON, SHE SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED ON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERSTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, SHE SHALL LEAVE THE

MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR

ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

Schedule O (Form 990 or 990-EZ) (2013)		Page 2	
Name of the organization ACHIEVEMENT REWARDS SCIENTISTS SEATTLE		Employer identification number 91-1042292	
FORM 990, PART VI, SECTION C, LIN	E 19:		
THE GOVERNING DOCUMENTS, CONFLICT	OF INTEREST POLICY, AND		
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.			
·			
		· · · · · · · · · · · · · · · · · · ·	