Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

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

_	For the 2	013 calendar year, or tax year beginning 01/01 , 2013, and el	naing i	2/31	, 20 13	
В	Check if ap	pplicable: C Name of organization Student Research and Development		D Employ	er identification n	umber
	Address ch	nange Doing Business As StudentRND			26-4742589	
	Name char	Number and street (or P.O. box if mail is not delivered to street address) Room	n/suite	E Telephor	ne number	
	Initial return				425-780-7901	
П	Terminated	011				
$\overline{\Box}$	Amended r			G Gross re	eceipts \$	116,872
$\overline{\Box}$	Application		H(a) Is this a		subordinates? Yes	
_	, ipplication	25806 NE 4th PL, Sammamish, WA 98074	I		s included? Tes	
$\overline{}$	Tax-exemp		16 "11 "		see instructions)	
<u>.</u>	Website:			p exemption	number ▶	
_		anization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo			of legal domicile:	WA
_	art I	Summary	2007	otato		****
		riefly describe the organization's mission or most significant activities: Ed	lucation of the r	uhlic nrin	narily K-12 and	
ø		postsecondary students, in technology and engineering.	deation of the p	Jubile, prii	namy K-12 and	
auc	1.	ostsecondary students, in technology and engineering.				
ž	2 0	heck this box ▶ ☐ if the organization discontinued its operations or dispos	ed of more tha	n 25% of	ite net accete	
ove.	1			1 _ 1	its riet assets.	4
ر مح		lumber of voting members of the governing body (Fart VI, line Ta):	16)			
ş			•			3
Ę		otal number of individuals employed in calendar year 2013 (Part V, line 2a)				3
Activities & Governance		otal number of volunteers (estimate if necessary)		. 6		20
⋖		otal unrelated business revenue from Part VIII, column (C), line 12		. 7a		0
	b N	et unrelated business taxable income from Form 990-T, line 34		. 7b	C	0
		(5)	Prior Y		Current Y	
ne		fontributions and grants (Part VIII, line 1h)		76,372		27,027
Revenue	1	rogram service revenue (Part VIII, line 2g)		9,250		84,219
	1	evestment income (Part VIII, column (A), lines 3, 4, and 7d)		0		0
		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0		0
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12		85,622	111,246	
	1	irants and similar amounts paid (Part IX, column (A), lines 1-3)		0		0
	14 B	enefits paid to or for members (Part IX, column (A), line 4)		0		0
S	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		5,969		32,172
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0		0
xbe	b T	otal fundraising expenses (Part IX, column (D), line 25) ▶				
Ш	17 C	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		90,400		72,623
	18 T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		96,369		104,795
	19 R	evenue less expenses. Subtract line 18 from line 12		-10,747		6,451
o S	3		Beginning of C	urrent Year	End of Ye	ear
Net Assets of Fund Balance	20 T	otal assets (Part X, line 16)		19,621		43,915
t As	21 T	otal liabilities (Part X, line 26)		4,025		21,868
ξĒ	22 N	et assets or fund balances. Subtract line 21 from line 20		15,596		22,047
P	art II	Signature Block				
Ur	nder penaltie	es of perjury, I declare that I have examined this return, including accompanying schedules and	statements, and to	the best of r	ny knowledge and	belief, it is
tru	ie, correct, a	and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knov	vledge.		
Sig	gn	Signature of officer	D	ate		
He		Tyler Menezes, Secretary				
		Type or print name and title				
_		Print/Type preparer's name Preparer's signature	Date	0	T : PTIN	
Pa				Check self-emp	if bloyed	
	eparer	Firm's name	F:		,	
Us	se Only	Firm's name		m's EIN ►		
Ma	v the IRS	Firm's address ► discuss this return with the preparer shown above? (see instructions)		one no.	\(\text{Ye}	s No
	٠, ٠.٠٠ ١١١٥	and the state of t	· · · ·			<u> </u>

Part	
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Education of the public in technology. We run events and programs around the world which educate students and the public about
	programming and engineering.
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
·	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 31,722 including grants of \$ 0) (Revenue \$ 11,691)
	The STUDENTRND WORKSPACE was an open-access tech lab where middle-school through college students could drop-in to
	use tools and get help from mentors. The workspace reached approximately 500 students in the Seattle, Washington area. The
	workspace program was shut down in December 2013.
4b	(Code:) (Expenses \$35,602 including grants of \$0) (Revenue \$72,528)
	CODEDAY is a 24-hour event to teach students about programming. We ran 12 CodeDay events in 2013 across 7 cities
	throughout the USA, with approximately 900 attendees.
4c	(Code:) (Expenses \$ 18,491 including grants of \$ 0) (Revenue \$ 0)
	STUDENTRND LABS is a summer program which helps students (in part from other programs) gain in-depth knowledge about an
	area of programming, electrical engineering, or robotics. This is the first time we have run the program, and we piloted it with 50
	students in the Seattle, Washington area.
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 1
→u	(F
	(Expenses \$ 8,484 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ▶ 94,299
4e	LOTAL PROGRAM CONTION OVER CONTION STATE OF THE STATE OF

Checklist of Required Schedules Part IV Nο 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 ~ 2 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 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 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent 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," 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b 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 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X ... 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E..... 13 **14 a** Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking. fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Part l	V 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		,
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		,
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			,
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	23 24a		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	24d 25a		_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25a		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		~
С	Schedule L, Part IV	28b		V
	·	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		\(\tau \)
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		V
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
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? <i>If "Yes," complete Schedule R,</i>			
38	Part VI	37		~
	19? Note. All Form 990 filers are required to complete Schedule O	38	'	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	~	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			4
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		~
b	If "Yes," enter the name of the foreign country: ▶	4a		
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	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			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	00		
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
b 10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
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		
	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 organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 990 (2013) Page **6**

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ~ 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a V b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ► Edward Jiang, (425)780-7901

Form 990 (2013)	Page 7
-----------------	---------------

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.

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

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
				(0						
(A)	(B)	(-1	-4 -1-	Pos		. 41		(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	unles	s pe	rson	e than o is both or/trust	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Edward Jiang	40									
CEO and Director	0	~		~				13,800	0	(
Jesse Li	1									
Director	0	~						0	0	(
Kevin Chen	1									
Director	0	~						0	0	(
Amy Fan	1									
Director	0	~						0	0	(
Adam Ryman	40									
Chief Operating Officer	0				~			7,800	0	(
Tyler Menezes	40									
Program Director	0				~			6,000	0	(

Part	Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (contin	ued)	
	(A) Name and title	(B) Average hours per	oer officer and a director/trus						(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatic (W-2/1099-N		other compensation from the organization and related organizations	
1b c	Sub-total	 VII, Sectio	 n A					>	27,600		0		0
d	Total number of individuals (including but		to th				above	▶ e) w	ho received m	ore than \$1	0,00 00,00	0 of	0
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete or any the angle of the an</i>	ficer, direc	tor, c					-	oloyee, or high	=		ed	No ~
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	porta	ble (con	npei	nsatio	n a	and other comp	ensation fr	om th	eh	<u> </u>
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	lividu:	al	<u>, </u>
Section	on B. Independent Contractors		- 1-										
1	Complete this table for your five highest compensation from the organization. Repyear.												<
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compensation	
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abo	ove) who			

Part VIII Statement of Revenue

		Check if Schedule O co	ontains a resp	oonse or note to	any line in this	Part VIII		🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns .	1a	0				
irar oun	b	Membership dues		0				
s, G	С	Fundraising events	1c	0				
ar /	d	Related organizations .	1d	0				
imil	е	Government grants (contrib	outions) 1e	0				
tion r S	f	All other contributions, gifts,						
ibu He		and similar amounts not includ		27,027				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included	•	0				
	h	Total. Add lines 1a-1f.			27,027			
Program Service Revenue	0-			Business Code				
eve	2a	CodeDay Events Program		611420	72,528	72,528	0	0
Б	b			611600	11,691	11,691	0	0
ë	c d							
Š	e							
grar	f	All other program service	e revenue		0	0	0	0
Pro	g g	Total. Add lines 2a–2f.		•	84,219	<u> </u>		<u> </u>
	3	Investment income (inc			0.1,2.17			
		and other similar amoun	nts)	•	0	0	0	0
	4	Income from investment of	f tax-exempt bo	ond proceeds ►	0	0	0	0
	5	Royalties		▶	0	0	0	0
			(i) Real	(ii) Personal				
	6a	Gross rents	0	0				
	b	Less: rental expenses	0	0				
	С	Rental income or (loss)	0	0				
	d	Net rental income or (los			0	0	0	0
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other 5,626				
	b	Less: cost or other basis and sales expenses .	0	5,626				
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)		▶	0	0	0	0
Other Revenue	8a	Gross income from fund events (not including \$ of contributions reported of See Part IV, line 18	on line 1c).	0				
듈	b	Less: direct expenses .	b	0				
		Net income or (loss) from		events . >	0		0	0
		Gross income from gamin See Part IV, line 19	a	0				
		Less: direct expenses .		0				
		Net income or (loss) from		vities ►	0	0	0	0
		Gross sales of inver returns and allowances	···a	0				
		Less: cost of goods sold		0				
	С	Net income or (loss) from			0	0	0	0
	44	Miscellaneous Reve	enue	Business Code				
	11a							
	b							
	C d	All other revenue						
	u e	Total. Add lines 11a–11a		•	0			
	12	Total revenue. See instr			111,246	84,219	0	0
					,	1 7		

Part IX Statement of Functional Expenses

Sectic	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	27,600	22,650	4,950	0
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	268	268	0	0
10	Payroll taxes	4,304	3,532	772	0
11	Fees for services (non-employees):		_	_	
a	Management	0	0	0	0
b	Legal	0	0	0	0
c C	Accounting	0	0	0	0
d e	Lobbying	0	0	0	0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column	0	U	U	0
9	(A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	5,178	5,178	0	0
13	Office expenses	9,758	9,758	0	0
14	Information technology	1,975	0	1,975	0
15	Royalties	0	0	0	0
16	Occupancy	27,080	27,080	0	0
17	Travel	6,245	3,888	2,357	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	823	823	0	0
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			-	
a	CodeDay: Meals and Supplies	12,638	12,638	0	
b	WASABI Robotics: Parts	8,484	8,484	0	0
Q C					
d	All other expenses	440		440	
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	104 705	04 200	10.496	0
26	Joint costs. Complete this line only if the	104,795	94,299	10,496	0
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	13,995	1	40,915
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	3,000
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
ts	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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	5,626	10c	
	11	Investments—publicly traded securities	0,020		0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,621		43,915
	17	Accounts payable and accrued expenses	4,025		1,201
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	20,667
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
abi		disqualified persons. Complete Part II of Schedule L	0	22	0
ב	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	0		
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	4,025	26	21,868
seo		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	15,596	27	22,047
Ва	28	Temporarily restricted net assets	0	28	0
pu	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Š	33	Total net assets or fund balances	15,596	33	22,047
	34	Total liabilities and net assets/fund balances	19,621	34	43,915

Form 990 (2013) Page **12**

Part	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		11	1,246
2	Total expenses (must equal Part IX, column (A), line 25)	2		10	4,795
3	Revenue less expenses. Subtract line 2 from line 1	3			6,451
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	5,596
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
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		2	2,047
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	<u> </u>	<u>, </u>
	A			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	ماداما			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piairi	III		
0-			. 2a		~
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com-				
	reviewed on a separate basis, consolidated basis, or both:	piled			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		_
b	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on			
	separate basis, consolidated basis, or both:	ou on	~		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	versia	ht		
	of the audit, review, or compilation of its financial statements and selection of an independent according				
	If the organization changed either its oversight process or selection process during the tax year, e.	plain	in		
	Schedule O.	-			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
	the Single Audit Act and OMB Circular A-133?		. 3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.			
			Fo	rm 990	(2013)

Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

name of the organization							⊏mployer i	aenuncauo	n number		
Student Research and D	evelopment							26-47	42589		
Part I Reason f	or Public Cha	rity Status (All orga	ınization	s must c	omplete	this pa	rt.) See	instructio	ons.		
The organization is not	a private founda	ation because it is: (Fo	or lines 1 t	through 1	1, check	only one	box.)				
1 A church, con	vention of churc	hes, or association of	churches	s describe	ed in sec	tion 170	(b)(1)(A)(i).			
2 A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	ch Sched	ule E.)							
3 A hospital or a	cooperative ho	spital service organiza	ation desc	cribed in	section ⁻	170(b)(1)	(A)(iii).				
4 A medical rese		on operated in conjune:	ction with	a hospit	al descri	bed in se	ection 17		(iii). Ente	r the	
	on operated for ()(1)(A)(iv). (Com	the benefit of a colle	ge or uni	versity o	wned or	operated	l by a go	vernmen	tal unit c	lescrit	oed in
7 An organization	n that normally	nment or government receives a substantia ((A)(vi). (Complete Par	al part of					nit or fror	n the ge	neral	public
8 A community t	rust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	art II.)						
9 An organization receipts from support from	n that normally activities related gross investme	receives: (1) more that d to its exempt funct ent income and unre lifter June 30, 1975. Se	an 33¹/₃% ions−sul lated bus	of its subject to desiness tax	upport fro certain ex xable inc	xceptions come (les	s, and (2 ss section) no more	e than 3	3¹/₃%	of its
10 An organizatio	n organized and	l operated exclusively	to test fo	or public s	safetv. Se	ee sectio	n 509(a)	(4).			
11 An organization purposes of o	on organized ar ne or more pub	nd operated exclusive blicly supported organ describes the type of	ely for th	ie benefit described	t of, to p	perform ion 509(a	the func a)(1) or s	tions of, ection 50	9(a)(2). S		
a 🗌 Type I	b Type	II c ☐ Type II	I-Functio	nally inte	grated	d 🗌	Type III-I	Non-func	tionally ir	ntegra	ted
	ndation manage	that the organization ers and other than one									
f If the organization	ation received a	a written determination	on from	the IRS t	that it is	а Туре	I, Type	II, or Typ	oe III su	pporti	ng
_	heck this box .										. ¯ П
g Since August following personal		he organization acce	pted any	gift or co	ontributio	on from a	any of the	Э			
		ndirectly controls, eithody of the supported								Yes	No
(ii) A family m	ember of a perso	on described in (i) abo	ove?								
	-	a person described in							11g(ii		
		ion about the support								7	
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the c	organization sted in your document?	(v) Did y the organ col. (i)	ou notify nization in of your port?	organiza (i) organ	Is the tion in col. ized in the .S.?	(vii) Amount of moneta support		
		(Yes	No	Yes	No	Yes	No			
(A)											
(B)											
(C)											
(D)											
(E)											

Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	on A. Public Support	· · · · ·		•	·	•	
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	,					,,
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						<u> </u>
	on B. Total Support		T	1	1	T	
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	•			12	
13 Secti	First five years. If the Form 990 is for the organization, check this box and stop heron C. Computation of Public Support	re			=		on 501(c)(3) ▶ □
14	Public support percentage for 2013 (line 6			I 1 column (fl)		14	%
15 16a	Public support percentage from 2012 Sch 331/3% support test—2013. If the organization	nedule A, Part zation did not	II, line 14 . check the box	on line 13, and	 d line 14 is 33¹	15 /3% or more, o	% check this
	box and stop here. The organization qua			-			_
b	check this box and stop here. The organization qualifies as a publicly supported organization						
17a	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b							
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

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.)

Secti	Section A. Public Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees							
•	received. (Do not include any "unusual grants.")	3,557	25,755	28,115	76,372	27,027	160,826	
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	0	0	19,037	9,250	84,219	112,506	
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513	0	0	0	0	0	0	
4	Tax revenues levied for the							
	organization's benefit and either paid							
_	to or expended on its behalf	0	0	0	0	0	0	
5	The value of services or facilities							
	furnished by a governmental unit to the organization without charge			_				
_		0	0	0	0	0	0	
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	3,557	25,755	47,152	85,622	111,246	273,332	
1 a	received from disqualified persons .						0	
	· ·	0	0	0	0	0	0	
b	Amounts included on lines 2 and 3 received from other than disqualified							
	persons that exceed the greater of \$5,000							
	or 1% of the amount on line 13 for the year	o	25,000	23,000	58,705	26,858	133,563	
С	Add lines 7a and 7b	0	25,000	23,000	58,705	26,858	133,563	
8	Public support (Subtract line 7c from		23,000	25,000	30,703	20,030	133,303	
	line 6.)						139,769	
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
9	Amounts from line 6	3,557	25,755	47,152	85,622	111,246	273,332	
10a	Gross income from interest, dividends,							
	payments received on securities loans, rents,							
	royalties and income from similar sources .	0	0	0	0	0	0	
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975	0	0	0	0	0	0	
С	Add lines 10a and 10b	0	0	0	0	0	0	
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is regularly carried on							
12		0	0	0	0	0	0	
12	Other income. Do not include gain or loss from the sale of capital assets							
	(Explain in Part IV.)	0	0	0	0	0	0	
13	Total support. (Add lines 9, 10c, 11,		U	0	U	- U		
	and 12.)	3,557	25,755	47,152	85,622	111,246	273,332	
14	First five years. If the Form 990 is for the							
	organization, check this box and stop he	re					🕨 🗸	
Secti	on C. Computation of Public Suppor	rt Percentage	•					
15	Public support percentage for 2013 (line 8	B, column (f) div	vided by line 1	3, column (f))		15	%	
16	Public support percentage from 2012 Sch					16	%	
Secti	tion D. Computation of Investment Income Percentage							
17	Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) 17 %							
18	Investment income percentage from 2012 Schedule A, Part III, line 17							
19a								
_	17 is not more than 33 ¹ / ₃ %, check this box	_	-	-		_	_	
b	331/3% support tests—2012. If the organiz							
20	line 18 is not more than 33½%, check this line 18 is not more than 33½%, check this line 18 is not more than 33½%.		=	· ·			_	
ZU	ato roundation, ii the didalikation di	a not oncor a l	JOA OH HHE 14.	100. UI 100. U	LICON LING DUX	a, 14 555 11 13 11 U	/.iUIIU 🚩	

chedule A (A (Form 990 or 990-EZ) 2013 Page						
Part IV							

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

► 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

Employer identification number Name of the organization Student Research and Development 26-4742589 Form 990, Part III, Line 2 - In 2013 we started two programs. CODEDAY, as described in Part III, Line 4b, which is a is a 24-hour event to teach students about programming, and; STUDENTRND LABS, as described in Part III, Line 4c, is a summer program which allows students to get in-depth knowledge of programming, engineering, or robotics. Form 990, Part III, Line 3 - In 2013 we ceased conducting one program, the STUDENTRND WORKSPACE which, as described in Form 990, Part III, Line 4a, was an open-access tech workspace allowing middle school through college students to drop in to use equipment and tools. Because the workspace operated at a loss and was not scalable, we discontinued the program in December 2013. Form 990, Part VI, Section B, Line 11b - Form 990 and all required schedules are provided to the current governing body in advance of submission to the IRS. Form 990, Part VI, Section B, Line 12c - If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action. Form 990, Part VI, Section C, Line 19 - Governing documents, including the conflict of interest policy, are available on our website or by request; financial statements are available upon request.

Schedule O, Statement 1

Student Research and Development 26-4742589

Form: 990 Page: 2

Line Number: Part III Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	WASABI ROBOTICS is a competitive team allowing students to learn about electronics,	8,484	0	0
	software, and robotics through robotics competitions.			
Total:		8,484	0	0