Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2014

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.

B Check if applicable Address change Name changes in the provided provid	<u>A</u>	For the 2	014 calendar year, or tax year beginning 07/01 , 2014, and	ending	06/30	, 20 15						
Instance change Instance	В	Check if a	oplicable: C Name of organization Student Research and Development		D Em	nployer identification	number					
Initial return Final etumnemiates Final etum		Address c	nange Doing business as StudentRND			26-4742589						
Initial return Final return F		Name cha	Number and street (or P.O. box if mail is not delivered to street address) Ro	oom/suite	E Tele	ephone number						
Frest examinational Amended return Amended return Saattle, WA, 99102 Saattle, WA, 99102 Saattle, WA, 99102 Saattle, WA, 99102 Plane and address of principal officer: Tyler Menezes Nath Application pending Plane and address of principal officer: Tyler Menezes Nath Application pending Plane and address of principal officer: Tyler Menezes Nath Application Nath Applic						425-780-7901						
Amended return Ame	П		0" 1 170 () 170									
Application pending Rame and address of principal afferer. Tyler Menezes Mol bits a groun stant for autoritated. Ves. No No No No No No No N	$\overline{\Box}$				G Gro	oss receipts \$	301.291					
Tax-sowerite status:	$\overline{\Box}$			H(a) is		•						
Tax-evenery status: Strick(S) Strick(S) Meave that Strick(S		, ipplicatio										
Webster https://studentrind.org/ Webster Web	_	Tay oyom		16 "1			.s 110					
Part Summary	<u>:</u>	•			Group evem	notion number						
Part Summary	_					•	· \\\\					
Briefly describe the organization's mission or most significant activities: Education of the public, primarily K-12 and postsecondary students, in technology and engineering. 2	_			TOTTIALIOTI.	2007	otate of legal doffliche	· VVA					
Postsecondary students, in technology and engineering.	-		<u> </u>	Education of	the nublic	primarily K 12 ap						
b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h)	Φ			Education of	the public,	, primarily K-12 and	u 					
b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h)	ŭ		postsecondary students, in technology and engineering.									
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b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h)	įŧ	l .		-								
b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h)	Ę											
Prior Year Current Year 35,913 229,851	⋖						0					
8 Contributions and grants (Part VIII, line 1h)		b N	let unrelated business taxable income from Form 990-1, line 34									
9 Program service revenue (Part VIII, line 2g)	enne											
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							229,851					
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					120,		70,626					
Total revenue (Part VIII, Column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	že	l .					0					
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	_	l .					486					
Here 14 Benefits paid to or for members (Part IX, column (A), line 4)		+			156,	,035	300,963					
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 43,028 71,011 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 15 Total fundraising expenses (Part IX, column (D), line 25) 13,247 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 82,877 248,498 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 125,905 319,509 19 Revenue less expenses. Subtract line 18 from line 12 30,130 -18,546 20 Total assets (Part X, line 16) 74,654 52,095 21 Total liabilities (Part X, line 26) 22,477 18,464 22 Net assets or fund balances. Subtract line 21 from line 20 52,177 33,631 Part II Signature Block Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Paid Preparer Signature Preparer's signature Date Check if PTIN						0	0					
16a Professional fundraising fees (Part IX, column (A), line 11e)						0	0					
Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 Net assets or fund balances. Subtract line 21 from line 20 25 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Part II Signature of officer Tyler Menezes, Executive Director Type or print name and title Paid Print/Type preparer's name Preparer's signature Preparer's signature Firm's name Firm's sin Print Pri	S				43,	,028	71,011					
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19 Revenue less expenses. Subtract line 18 from line 12 30,130 -18,546	Ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		82,	,877	248,498					
Beginning of Current Year End of Year		18 7	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		125,	,905	319,509					
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Tyler Menezes, Executive Director Type or print name and title Paid Preparer Use Only Firm's name Firm's address Firm's address Phone no.	P	art II	Signature Block									
Sign Here Signature of officer Date	Un	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and	d statements, ar	nd to the bes	st of my knowledge ar	nd belief, it is					
Tyler Menezes, Executive Director Type or print name and title Paid Preparer Use Only Firm's name ► Firm's address ► Preparer's signature Preparer's signature Preparer's signature Date Check ☐ if self-employed Firm's EIN ► Firm's address ► Phone no.	tru	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which pr	reparer has any	knowledge.							
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	Ma	y the IRS			_		es No					

Part	· · · · · · · · · · · · · · · · · · ·
4	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
Ū	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
4	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.
	the total expenses, and revenue, if any, for each program estimate reported.
40	(Code:) (Expenses \$ 210,311 including grants of \$ 0) (Revenue \$ 56,892)
4a	
	CODEDAY is a 24-hour event to teach students about programming. We ran 73 CodeDay events across 48 US cities from July 1,
	2014 - June 30, 2015, serving over 7,000 student attendees. 75% of these students were new to programming, but over 80%
	reported they were still programming 3 months after attending CodeDay.
	(O. I
4b	(Code:) (Expenses \$ 65,284 including grants of \$) (Revenue \$ 0)
	StudentRND is a fiscal sponsor for HACKER FUND, a program which shows teaches students about technology through
	programming events held in conjunction with schools, and matches students with mentors.
4c	(Code:) (Expenses \$ 13,545 including grants of \$ 0) (Revenue \$ 13,734)
4c	· · · · · · · · · · · · · · · · · · ·
4c	STUDENTRND LABS is a summer program which helps students (in part from other programs) gain in-depth knowledge about an
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	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. We ran StudentRND Labs with 15 students in Seattle WA.
4c	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. We ran StudentRND Labs with 15 students in Seattle WA. Contact the students of the students
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Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	•	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	<i>'</i>	,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
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? <i>If "Yes," complete Schedule D, Part IV </i>	9		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
	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		,
	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? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		~
	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? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		~
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 .	11e		\(\triangle \)
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		~
13	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?	14a		~
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		,
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		,
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	1	l

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

Part	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 domestic 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 or for domestic individuals 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	23		~
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		,
	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		
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</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	25b		,
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 "Yes," 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 b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28a 28b		ν ν
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	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>	29 30		v v
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		✓
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, Part VI </i>	37		,
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	,	

	00 (2014)			Page
Part				_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. L
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 18		res	NO
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	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 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	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: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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?	7.		
لہ	in the second	7c		
d e	If "Yes," indicate the number of Forms 8282 filed during the year	70		
f	Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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			
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			
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		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
U	y the state of the state			

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? .

14a

14b

13b

13c

Form 990 (2014) Page **6**

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 ~ 1 14 Did the organization have a written document retention and destruction policy? 14 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 / 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. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Tyler Menezes, (206)739-4741

Part VI

Form 990 (2014)	Page 7
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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 heither the organization not	r any relate	a orga	anız	atic	n c	ompe	nsa	ited any curren	t onicer, airecto	r, or trustee.	
				(0	C)			_			
(A)	(B)	(do n	ot of		ition	e than o	200	(D)	(E)	(F)	
Name and Title	Average					is both		Reportable	Reportable	Estimated	
	hours per week (list any		_		_	or/trus		compensation from	compensation from related	amount of other	
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations	compensation	
	related organizations	rect	l tio	Ř	emp	est c	ਜੁ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	below dotted line)	or tra	nal t		loye	omp				and related organizations	
	iiiie)	stee	rust		ď	bens				organizations	
			8			ated					
Tyler Menezes	40										
Executive Director, Member of the Board	0	~		~				30,000	0	(0
Edward Jiang	5										
Chairman of the Board, Labs Program Manager	0	~						5,154	0	(0
Christy Wilson	1	,									,
Member of the Board	0							0	0		_
Charlie Kindle Member of the Board	1 0	~						0	0		r
Welliber of the Board	0	_						0	0		_
											_
											-
											-
											-
											-
	†										
											•
										1	

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, ar	nd F	lighe	st C	ompensated E	mployees (contin	ued)	-	
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck s pe	rson	e than o is both or/trust	n an	(D) Reportable compensation	(E) Reportable compensation from				
		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		compe fror orgar and i	ther ensation in the nization related izations	
1b c d	Sub-total							> > >	35,154 35,154		0			0
2	Total number of individuals (including bur reportable compensation from the organic		to th			ed	above	e) w		ore than \$1		0 of		
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete s</i>	ficer, direc	tor, c					-	oloyee, or high	=			Yes	No 🗸
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portal	ole d	con	nper	nsatio					е		<i>v</i>
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind				_
Section	on B. Independent Contractors	,	,						•					•
1	Complete this table for your five highest compensation from the organization. Repyear.													ıx
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compens	ation	
None														
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 contains a	a resp	onse 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
ıts its	1a	Federated campaigns	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	0				
s, G Am	С	Fundraising events	1c	0				
Sift: ar /	d	Related organizations	1d	0				
s, C imil	е	Government grants (contributions)	1e	0				
tion r S	f	All other contributions, gifts, grants,						
ibul		and similar amounts not included above	1f	229,851				
ntri d O	g	Noncash contributions included in lines 1a-	1f: \$	0				
Сс an	h	Total. Add lines 1a-1f		▶	229,851			
ıue				Business Code				
e.	2a	CodeDay		611420	56,892	56,892	0	0
Program Service Revenue	b	StudentRND Labs		611420	13,734	13,734	0	0
vic	С							
Sel	d							
ram	е							
rog	f	All other program service revenue			0	0	0	0
Ь	g	Total. Add lines 2a–2f			70,626			
	3	Investment income (including and other similar amounts)						
	4	Income from investment of tax-exem		L	0	0	0	0
	4 5		•	· · · · · ·	0	0	0	0
	3	Royalties	· ·	(ii) Personal	U	U	U	U
	6a	Gross rents	0	0				
	b	Less: rental expenses	0	0				
	C	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0	0	0	0
	7a	Gross amount from sales of (i) Securities		(ii) Other		J		
		assets other than inventory	0	0				
	b	Less: cost or other basis and sales expenses .	0	0				
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)		▶	0	0	0	0
Other Revenue		Gross income from fundraising events (not including \$ 0 of contributions reported on line 10 See Part IV, line 18	a	0				
ō		Net income or (loss) from fundrai					0	0
		Gross income from gaming activit See Part IV, line 19	ies.	0	0		0	0
	h	Less: direct expenses		0				
		Net income or (loss) from gaming			0	0	0	0
		Gross sales of inventory, le returns and allowances	ess	814				
	b	Less: cost of goods sold	. b	328				
		Net income or (loss) from sales o		ntory ►	486	486	0	0
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С							
	d	All other revenue	L					
	е	Total. Add lines 11a–11d			0			
	12	Total revenue. See instructions.		🟲	300,963	71,112	0	0

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	II other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		🔲
	t include amounts reported on lines 6b, 7b, o, 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 domestic organizations				
	and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign		•		
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	D (1)	0	0		
5	Compensation of current officers, directors,	,			
_	trustees, and key employees	30,000	24,000	3,000	3,000
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	34,612	26,605	0	8,007
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	186	0	186	0
10	Payroll taxes	6,213	4,909	248	1,056
11	Fees for services (non-employees):				
a	Management	40,885	40,885	0	0
b	Legal	0	0	0	0
c d	Accounting	0	0	0	0
e	Lobbying	0	U	U	0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
Ū	(A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	4,499	4,307	192	0
13	Office expenses	1,756	0	1,299	457
14	Information technology	11,996	8,468	3,528	0
15	Royalties	0	0	0	0
16	Occupancy	3,074	0	3,074	0
17	Travel	23,561	21,817	1,414	330
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
40		0	0	0	0
19 20	Conferences, conventions, and meetings . Interest	1,469	0	1,139	330
21	Interest	0	0	0	0
22	Depreciation, depletion, and amortization .	108	0	108	0
23	Insurance	990	495	428	67
24	Other expenses. Itemize expenses not covered	770	170		<u> </u>
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	CodeDay: Meals, Supplies, Venues	86,579	86,579	0	0
b	Hacker Fund: Meals, Supplies, Venues	65,284	65,284	0	0
С	StudentRND Labs: Meals, Supplies, Venues	5,791	5,791	0	0
d					
е	All other expenses	2,506	0	2,506	0
25	Total functional expenses. Add lines 1 through 24e	319,509	289,140	17,122	13,247
26	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)				

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	73,654	1	21,973
	2	Savings and temporary cash investments	0	2	100
	3	Pledges and grants receivable, net	1,000	3	27,450
	4	Accounts receivable, net	0	4	0
	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	669
	9	Prepaid expenses and deferred charges	0	9	500
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	0	10c	
	11	Investments—publicly traded securities	0	11	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	1,403
	16	Total assets. Add lines 1 through 15 (must equal line 34)	74,654	16	52,095
	17	Accounts payable and accrued expenses	10,968		2,827
	18	Grants payable	0	18	0
	19	Deferred revenue	11,509	19	15,637
	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
⊐	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	22,477	26	18,464
ces		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	52,177	27	33,631
Ва	28	Temporarily restricted net assets	0	28	0
nd	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	
t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
$\frac{8}{8}$	33	Total net assets or fund balances	52,177	33	33,631
	34	Total liabilities and net assets/fund balances	74,654	34	52,095

Form 990 (2014) Page **12**

Part	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		30	0,963
2	Total expenses (must equal Part IX, column (A), line 25)	2		31	9,509
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	8,546
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5	2,177
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		3	33,631
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				$\perp \sqcup$
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piairi	ırı		
0-			. 2a		V
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:	olled (
	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:	Ju 011	~		
	☐ 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 o	versia	ht		
	of the audit, review, or compilation of its financial statements and selection of an independent account				
	If the organization changed either its oversight process or selection process during the tax year, ex	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?		. За		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	_	ne		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			Fo	m 990	(2014)

Form **990** (2014)

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.

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	of the organization					Employer identification	n number
Stude	ent Research and Development					26-47	42589
Part	Reason for Public Cha	rity Status (All	organizations must	t comple	te this p	art.) See instructio	ons.
The o	rganization is not a private founda	ation because it	is: (For lines 1 through	n 11, ched	ck only or	ne box.)	
	☐ A church, convention of church			ibed in s e	ection 17	0(b)(1)(A)(i).	
	A school described in section						
	A hospital or a cooperative ho						
4	A medical research organization hospital's name, city, and state	•	onjunction with a hosp	pital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned c	r operate	ed by a government	al unit described ir
	☐ A federal, state, or local gover☐ An organization that normally described in section 170(b)(1	receives a subs	stantial part of its sup				n the general public
8	☐ A community trust described		•	Part II.)			
	✓ An organization that normally				from con	tributions, members	ship fees, and gross
	receipts from activities relate support from gross investme acquired by the organization a	d to its exempt ent income and	functions—subject to unrelated business	certain taxable i	exception	ns, and (2) no more ess section 511 ta	e than 331/3% of its
10 11	 ☐ An organization organized and ☐ An organization organized and one or more publicly supporte the box in lines 11a through 11 	operated exclus d organizations o	ively for the benefit of, described in section 5	to perfor 09(a)(1) o	m the fun	octions of, or to carry 509(a)(2). See sect	ion 509(a)(3). Check
а	☐ Type I . A supporting organization(sorganization. You must con	zation operated, s) the power to re	supervised, or control	lled by its	supporte	ed organization(s), ty	pically by giving
b	☐ Type II. A supporting organic control or management of the organization(s). You must c	ne supporting org	ganization vested in th				
С	☐ Type III functionally integrated its supported organization(s						y integrated with,
d	☐ Type III non-functionally in that is not functionally integree requirement (see instruction	rated. The organ	ization generally must	satisfy a	distributi	on requirement and	
е	Check this box if the organize functionally integrated, or Ty						II, Type III
f	Enter the number of supported	organizations .					
g	Provide the following information	n about the supp	oorted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			(000 mon donomo))	Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

Part	(Complete only if you checked th	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
04	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	() 0040	(1) 0044	() 0010	(1) 0040	1) 001 1	(0 T
1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
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.						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for the		n's first, secon	id, third, fourth	n, or fifth tax y	ear as a secti	on 501(c)(3)
	organization, check this box and stop he						> 🗆
	on C. Computation of Public Suppor						
14	Public support percentage for 2014 (line 6		-			14	%
15	Public support percentage from 2013 Sch					15	%
16a	33 ¹ /3% support test—2014. If the organize box and stop here. The organization qua						
b	331/3% support test—2013. If the organ	-		-			_
	check this box and stop here. The organ						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts- acts-and-circu	and-circumsta umstances" te	nces" test, chest. The organiz	eck this box ar ation qualifies	nd stop here. as a publicly s	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part VI how the organization m supported organization	tion meets the leets the "fact	e "facts-and-c s-and-circums	ircumstances" tances" test. T	test, check the organization	nis box and s n qualifies as	top here.
18	Private foundation. If the organization di						l 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	on A. Public Support			, , ,	1	,	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	28,115	76,372	27,027	35,913	229,851	397,278
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	19,037	9,250	84,219	120,122	56,892	289,520
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	47,152	85,622	111,246	156,035	286,743	686,798
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	23,000	58,705	26,858	35,000	87,000	230,563
	Add lines 7a and 7b	23,000	58,705	26,858	35,000	87,000	230,563
8	Public support (Subtract line 7c from						
04	line 6.)						456,235
	on B. Total Support	() 0040	(1) 0044	1) 0010	(1) 0040	() 004.4	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	47,152	85,622	111,246	156,035	286,743	686,798
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	U	U	0	0	U	0
b	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	J			- J		
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or		-	-	-	-	
	loss from the sale of capital assets						
	(Explain in Part VI.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	47,152	85,622	111,246	156,035	286,743	686,798
14	First five years. If the Form 990 is for the	ne organization	's first, second	d, third, fourth	, or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop he						▶ 🗆
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2014 (line 8					15	66.43 %
16	Public support percentage from 2013 Sch					16	60.41 %
	on D. Computation of Investment In						
17	Investment income percentage for 2014 (.,			17	0 %
18	Investment income percentage from 2013					18	0 %
19a	331/3% support tests—2014. If the organi						
_	17 is not more than 331/3%, check this box						
b	331/3% support tests—2013. If the organiz						
00	line 18 is not more than 33½%, check this b	_	_		· · · · · · · ·		_
20	Private foundation. If the organization di	и посспеска і	JUX UH IIHE 14,	19a, Of 19b, C	HECK THIS DOX	anu see mstru	ctions 🕨 📋

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
_	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	E L		
С	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If</i> "Yes," <i>provide detail in Part VI.</i>			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial	6		
•	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
С	the supporting organization had an interest? If "Yes," provide detail in Part VI. Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9b		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)	9c		
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		
D	determine whether the organization had excess business holdings.)	10b		

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

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instructions).

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

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions	,	,	Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
е	From 2013			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount			
<u>i</u> _	Carryover from 2009 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

	Form 990 or 990-EZ) 2014 Pag	
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; an Part III, line 12. Also complete this part for any additional information. (See instructions.)	d

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► 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. Employer identification number

Open to Public Inspection

Student Research and Development	26-4742589
Form 990, Part III, Line 2 - In the July 1, 2014-June 30, 2015 fiscal year, StudentRND began a fiscal	sponsorship of HACKER FUND, a
program which works with schools in the California area to run technology education events for hi	
Form 990, Part VI, Section B, Line 11b - Form 990 and all schedules are provided to the governing I	body in advance of submission to the
IRS.	
Form 990, Part VI, Section B, Line 12c - If the governing board or committee has reason to believe	a member has failed to disclose actual
or possible conflicts of interest, it shall inform the member of the basis of such belief, and afford the	he member to explain the alleged failure
to disclose. If, after hearing the member's response and after further investigation as warranted by	the situation, the governing board or
committee determines the member has failed to disclose an actual or possible conflict of interest,	it shall take appropriate diciplinary and
corrective action.	
Form 990, Part VI, Section B, Line 15 - The board reviews all compensation for full-time employees	. In the case that a full-time employee is
also a member of the board, that employee shall not participate in discussions of his or her compe	ensation.
Form 990, Part VI, Section C, Line 19 - All governing documents, statements, board minutes, and ta	
studentrnd.org/open, and in other formats upon request. Forms 990 are also provided on the organ	nization's GuideStar profile.