	000
Form	330

Return of Organization Exempt From Income Tax

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

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

20**18** Open to Public

OMB No. 1545-0047

Inter	nal Rever	nue Service	Go to www.irs.gov/Form990 for instructions and the lates	t information.		Inspection					
Α	For the	e 2018 cale	ndar year, or tax year beginning 07/01 , 2018, and end	ing O	6/30	, 20 19					
в	Check if	f applicable:	C Name of organization Student Research and Development		D Employ	er identification number					
~	Address	s change	Doing business as CodeDay			26-4742589					
	Name c	Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number									
	Initial return 340 S Lemon Ave PMB 7763 888-607-7763										
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code								
		ed return	Walnut, CA, 91789		G Gross re	eceipts \$ 224,736					
	Applicat	tion pending	F Name and address of principal officer: Tyler Menezes	H(a) Is this a	group return for	subordinates? 🗌 Yes 🗹 No					
			425 15th Ave E, Office 466, Seattle, WA 98112			s included? 🗌 Yes 🗌 No					
<u> </u>	Tax-exe	empt status:	✓ 501(c)(3) □ 501(c) () ◄ (insert no.) □ 4947(a)(1) or □ 527	If "No," att	ach a list. (s	ee instructions)					
J	Website	e: ► http	os://www.srnd.org/	H(c) Grou	p exemption	number 🕨					
		organization:	✓ Corporation Trust Association Other ► L Year of form	nation: 2009	M State	of legal domicile: WA					
P	art I	Summ	•								
	1	Briefly de	escribe the organization's mission or most significant activities: Edu	cation of the p	oublic, prin	narily K-12 and					
Activities & Governance		postsecc	ndary students, in technology and engineering.								
nar											
ver	2		is box \blacktriangleright \Box if the organization discontinued its operations or disposed			its net assets.					
ő	3					4					
ي مە	4		of independent voting members of the governing body (Part VI, line 1) nber of individuals employed in calendar year 2018 (Part V, line 2a)	,		4					
itie	5			3							
ćţ	6		nber of volunteers (estimate if necessary)			140					
Ă	7a		elated business revenue from Part VIII, column (C), line 12		. 7a	0					
	b	Net unre	ated business taxable income from Form 990-T, line 38		. 7b	0					
	_			Prior Y		Current Year					
e	8		tions and grants (Part VIII, line 1h)		122,219	205,475					
Revenue	9	-	service revenue (Part VIII, line 2g)		40,733	18,739					
Be	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)		7	23					
	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6	499					
	12		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		162,965	224,736					
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		0	0					
	14		paid to or for members (Part IX, column (A), line 4)		0	0					
Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		54,866	74,244					
ens	16a		nal fundraising fees (Part IX, column (A), line 11e)		0	0					
Ř	b		draising expenses (Part IX, column (D), line 25) 6,512								
_	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		104,786	117,896					
	18	•	benses. Add lines 13–17 (must equal Part IX, column (A), line 25) .		159,652	192,140					
	19	Revenue	less expenses. Subtract line 18 from line 12	Beginning of C	3,313	32,596 End of Year					
Net Assets or Fund Balances	00	Tatal s	ate (Deut V. line 10)	beginning of C							
Asse	20		ets (Part X, line 16)		107,462	116,840					
Vet /	21		ilities (Part X, line 26)		72,992	49,776					
<u>~</u> ت	22		ts or fund balances. Subtract line 21 from line 20		34,470	67,064					

Part II 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 Here	Signature of officer <u>Tyler Menezes, Executive Director</u> Type or print name and title			Date							
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if if self-employed	PTIN					
Use Only	Firm's name 🕨	Firm's EIN ►									
	Firm's address ►	Phone no.									
May the IRS	May the IRS discuss this return with the preparer shown above? (see instructions)										
For Paperwo	rk Reduction Act Notice, see the separa	te instructions.	Cat. No. 11282Y			Form 990 (2018)					

Form 99	0 (2018) Page
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 US 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.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 101,762 including grants of \$0) (Revenue \$ 18,739)
Tu	CODEDAY is a 24-hour event to introduce and educate newer students in computer science and programming. We continued to
	CodeDay across the US. 8,612 students attended a CodeDay during the fiscal year, with approximately 70% from a background
	traditionally underrepresented in technology.
	X
	(Code: A) $(Expansion f)$ $(Expansion f)$ $(Expansion f)$
4b	(Code:) (Expenses \$0 including grants of \$0) (Revenue \$0) CODELABS is a semi-virtual summer program which provides online classes and mentorship for students across the US. We
	provided the program to 1,018 students at the beginning of this fiscal year, and registered 1,011 for the program to start at the
	haging of part flood year
4c	(Code:) (Expenses \$51,252 including grants of \$0) (Revenue \$0)
	CS FAIRS provide educational Computer Science field trips for school groups. Events were hosted in Atlanta GA, El Paso TX,
	Houston TX, Austin TX, Birmingham AL, and Detroit MI. 1,211 students registered to attend these events through school partnerships.
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 1
	(Expenses \$ 610 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ► 153,624

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	r	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	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		~
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</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 "Yes," 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 "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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 reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		r
12a	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		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	~	<u> </u>
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? <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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	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? <i>If "Yes," complete Schedule G, Part II</i> .	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i> .	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d 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 "Yes," 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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		~
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <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	29		~
00	conservation contributions? If "Yes," complete Schedule M	30		~
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 "Yes," 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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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	~	
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 b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable11Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable11	-		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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	~	
	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?	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. Did a donor advised fund maintained by the			
	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		
	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			
C	Enter the amount of reserves on hand	4.4 -		
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		-
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		~
	excess parachute payment(s) during the year?	15		
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		V
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		-

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sc	hedule O. Se	e ins		ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>			~
Sect	ion A. Governing Body and Management				
1a	Enter the number of voting members of the governing body at the end of the tax year	4		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation any other officer, director, trustee, or key employee?	ship with	2		r
3	Did the organization delegate control over management duties customarily performed by or under supervision of officers, directors, or trustees, or key employees to a management company or other personal supervision of officers.		3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	filed?	4		~
5 6	Did the organization become aware during the year of a significant diversion of the organization's as Did the organization have members or stockholders?	sets? .	5 6		レ レ
7a	Did the organization have members, stockholders, or other persons who had the power to elect of one or more members of the governing body?	or appoint	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) stockholders, or persons other than the governing body?	members,	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertak the year by the following:	en during			
а	The governing body?		8a	~	
b	Each committee with authority to act on behalf of the governing body?	_	8b	~	
9			9		~
Secti	ion B. Policies (This Section B requests information about policies not required by the Inter	rnal Revenu	ie Co		
		Г		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such affiliates, and branches to ensure their operations are consistent with the organization's exempt pur	poses?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	j the form?	11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	V	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to		12a	~	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy?	? If "Yes,"	120 12c	~	
13	Did the organization have a written whistleblower policy?	-	13	~	
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 ap independent persons, comparability data, and contemporaneous substantiation of the deliberation and	proval by			
а	The organization's CEO, Executive Director, or top management official		15a	~	
b	Other officers or key employees of the organization		15b	~	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arr with a taxable entity during the year?		16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ever participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	organization's exempt status with respect to such arrangements?		16b		
	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990 (3)s only) available for public inspection. Indicate how you made these available. Check all that apple v Own website v Another's website v Upon request Other (<i>explain in Schedule</i>)	у.	(Sec	tion 5	501(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co financial statements available to the public during the tax year.	onflict of inte	rest	oolicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's bo Tyler Menezes, (206)739-4741	oks and rec	ords	▶	

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, 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 nor any related organization compensated any current officer, director, or trustee.

				(0	C)						
(A)	(B)	Position						(D)	(E)	(F)	
Name and Title	Average	(do not check more than one box, unless person is both an					an	Reportable	Reportable	Estimated	
	hours per week (list any	officer and a director/trustee)				or/trust	ee)	compensation from	compensation from related	amount of other	
	hours for	Individual trustee or director	Inst	Officer	Key	High	Former	the	organizations	compensation	
	related organizations	vidu lirec	itutio	cer	em	nest ploye	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	below dotted	al tr	Institutional trustee		Key employee)e com				and related	
	line)	uste	trus		ee	pen				organizations	
		Φ	tee			Highest compensated employee					
						<u>u</u>					-
Tyler Menezes	40.00										
Executive Director and Board Member	0.00	~			~	~		48,846	0	(0
Zaq Wiedmann	1.00										
Board Chair	0.00	~						0	0	(0
Bob Crimmins	1.00										
Board Member	0.00	~						0	0	(0
Ana Pooley	1.00										_
Board Member	0.00	~						0	0	(0
											-
											-
											_
											_
											_
											_
		R.									
											—
											_

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yees	s, ar	nd H	lighes	st C	ompensated E	mployees	(contin	ued)		
					(0	C)								
	(A)	(B)	(do n	ot ch		ition	e than c	200	(D)	(E)			(F)	
	Name and title	Average					is both		Reportable	Reportat			mated	
		hours per week (list any		er and		irect	or/trust	<i>,</i>	compensation from	compensatio related			ount of ther	
		hours for	Individual trustee or director	Inst	Officer	Key	High	Form	the	organizati	ons		ensatio	n
		related organizations	lirec	ituti	cer	Key employee	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-I	MISC)		m the nizatior	
		below dotted	tor ta	ona		ploy	e on		(00-2/1099-00130)			•	related	
		line)	uste	Institutional trustee		/ee	nper					orgar	nization	S
			Å	stee			Highest compensated employee							
							đ							
		+	-											
			-											
				-										
		+												
		+												
			-											
			1											
			1											
			-											
			-											
											-			
1b	Sub-total			•	·	• •	•		48,846		0			0
С А	Total from continuation sheets to Part			•	•	• •	•		10.04/					
d									48,846	are then ¢1	0	0 of		0
2	Total number of individuals (including but reportable compensation from the organi			iose	i iisi	lea	above	<i>*)</i> vv	no received mo	bre man \$1	00,00	0 01		
	reportable compensation from the organ								0				Yes	No
3	Did the organization list any former of	ficer direc	tor c	or tr	ueta	20	kov c	mr	alovee or high	est comp	oneato	d	103	
U	employee on line 1a? If "Yes," complete									-		3		V
4	For any individual listed on line 1a, is the										om th			-
4	organization and related organizations	areater th	an \$	01e (1.50		10ei 17 /:	isatio f "Ye	па °"	complete Sch	ensalion n edule .1 fr	on u	h		
	individual							., 				4		~
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	froi	m anv	' un	related organiz	ation or in	dividu			
	for services rendered to the organization											5		~
Sectio	on B. Independent Contractors													
1	Complete this table for your five highest	compensat	ed ind	depe	end	ent	contra	acte	ors that receive	d more that	an \$10	0,000 of	:	
-	compensation from the organization. Rep													ax
	year.													
	(A)								(B)			(C)		
	Name and business add	iress							Description of se	ervices		Compens	ation	
None														

2	Total number of independent contractors (including but not limited to those listed above) who	
	received more than \$100,000 of compensation from the organization ► 0	

Form 990 (2018)
Part VIII Statement of Revenue

r ar	. •	Check if Schedule C		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	з 1а	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1 b	0				
s, o	С	Fundraising events .	1c	0				
lar J	d	Related organizations	5 1d	0				
ini ini	е	Government grants (con		0				
r S	f	All other contributions, g						
Contributions, Gifts, and Other Similar Ar		and similar amounts not inc	luded above 1f	205,475				
d of	g	Noncash contributions includ		0				
	h	Total. Add lines 1a-1	f	🕨	205,475			
Program Service Revenue				Business Code				
evel	2a	CodeDay Admissions		611420	18,739	18,739	0	0
еŘ	b							
<u>vi</u>	С							
Sei	d							
ram	е							
rogi	f	All other program ser			0	0	0	0
<u> </u>	g	Total. Add lines 2a-2			18,739			
	3	Investment income and other similar amo		enas, interest, ►				
					23	23	0	0
	4	Income from investmen			0	0	0	0
	5	Royalties	(i) Real	(ii) Personal	0	0	0	0
	60	Gross rents						
	6a	Gross rents Less: rental expenses	0	0				
	b c	Rental income or (loss)	0	0				
	d	Net rental income or (-		0	0	0	0
	-	Gross amount from sales of	(IOSS) (i) Securities	(ii) Other	U	0	U	U
	7a	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	8a	Gross income from fu events (not including \$	Indraising 0					
r Rev		of contributions reported. See Part IV, line 18	,					
the	h	,	u	0				
ō		Less: direct expenses Net income or (loss) f		•	0		0	
		Gross income from ga	0		0		U	0
	Ju	See Part IV, line 19		0				
	b	Less: direct expenses		0				
		Net income or (loss) f		-	0	0	0	0
		Gross sales of in	• •		0	U	0	0
		returns and allowance		0				
	b	Less: cost of goods s		0				
		Net income or (loss) f		entory ►	0	0	0	0
		Miscellaneous R		Business Code				
	11a							
	b							
	с							
	d	All other revenue .			499	499	0	0
	е	Total. Add lines 11a-		🕨	499			
	12	Total revenue. See in	nstructions .	🕨	224,736	19,261	0	0

Par	Statement of Functional Expenses				Page 10
	on 501(c)(3) and 501(c)(4) organizations must com	•	-	•	
	Check if Schedule O contains a response t include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	se or note to any lin (A) Total expenses	e in this Part IX . (B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	expenses 0	general expenses	expenses
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	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	51,923	41,539	5,192	5,192
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 8	Other salaries and wages	11,909	11,909	0	0
9	section 401(k) and 403(b) employer contributions) Other employee benefits	0	0	0	0
9 10	Payroll taxes	10,332	5,854	4,053	425
11	Fees for services (non-employees):	10,002	0,001	1,000	120
а	Management	0	0	0	C
b	Legal	0	0	0	C
С	Accounting	0	0	0	C
d		0	0	0	0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0			0
f g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0	0	0 0
12	Advertising and promotion	5,120	4,347	590	183
13	Office expenses	3,590	0	3,590	C
14	Information technology	10,298	3,460	6,706	132
15	Royalties	0	0	0	0
16		16,623	9,704	6,919	0
17 18	Travel	21,896	20,041	1,275	580
19	Conferences, conventions, and meetings .	1,503	859	644	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	56	0	56	0
23		1,000	1,000	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.)				
а	Program Meals	33,660	33,660	0	0
b	Program Supplies NOC	17,551	17,551	0	0
С	Shipping	3,347	3,316	31	0
d	Card processing and bank fees	1,868	0	1,868	0
e	All other expenses	1,384	384	1,000	0
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e 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)	192,140	153,624	32,004	6,512

Form 990 (2018)

Part 2	X Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Pa	t X	•	. 🗌
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	10,439	1	8,838
2	Savings and temporary cash investments	37,005	2	100,002
3	Pledges and grants receivable, net	59,626	3	8,000
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
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			
Assets		0	6	0
SSV 7	Notes and loans receivable, net	0	7	0
U U	Inventories for sale or use	0	8	0
9 10a	Prepaid expenses and deferred charges	0	9	0
	b Less: accumulated depreciation 10b 0	202	10c	0
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		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)	107,462	16	116,840
17	Accounts payable and accrued expenses	6,829	17	5,766
18	Grants payable	0,029	18	0
19	Deferred revenue	66,163	19	44,010
20	Tax-exempt bond liabilities	0	20	0
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
liat	disqualified persons. Complete Part II of Schedule L	0	22	0
20	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 of Schedule D		05	
06		0	25	
26 ഗ്ല	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Image: Colspan="2">Image: Colspan="2" (Colspan="2") Organizations that follow SFAS 117 (ASC 958), check here ▶ Image: Colspan="2">Image: Colspan="2" (Colspan="2") Complete lines 27 through 29, and lines 33 and 34. Image: Colspan="2">Image: Colspan="2"	72,992	26	49,776
ũ or	-	04.470	07	(3.6)
27 28 28	Unrestricted net assets	34,470	27 28	67,064
20 20 29	Permanently restricted net assets	0	20 29	0
Fun	Organizations that do not follow SFAS 117 (ASC 958), check here ►	0	23	0
Net Assets or 30 33 33 33	Capital stock or trust principal, or current funds		30	
10 ST	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥ 32	Retained earnings, endowment, accumulated income, or other funds .		32	
33 Vet	Total net assets or fund balances	34,470	33	67,064
34	Total liabilities and net assets/fund balances	107,462	34	116,840

Form **990** (2018)

	90 (2018)			P	age 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		22	24,736
2	Total expenses (must equal Part IX, column (A), line 25)	2		19	92,140
3	Revenue less expenses. Subtract line 2 from line 1	3		3	82,596
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	34,470
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			-2
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		6	57,064
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	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.	plain	in		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 28	1	~
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2t)	~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	ed on	a		
	separate basis, consolidated basis, or both:				
	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				
	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 Schedule O.	plain	in		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?.				~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		ne 3k		

Form **990** (2018)

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.

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2018

Open to Public

Departi Interna	ment of I Reven		
		-	

Inspection

Name	στ	τne	organization	

Employer identification number

Student Research and Development	26-4742589
Part I Reason for Public Charity Status (All organizations must complete the	s part.) See instructions.
The organization is not a private foundation because it is: (For lines 1 through 12, check onl	, , , , , , , , , , , , , , , , , , ,
1 A church, convention of churches, or association of churches described in sectior	
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 99	
3 A hospital or a cooperative hospital service organization described in section 170	
4 A medical research organization operated in conjunction with a hospital described hospital's name, city, and state:	
5 An organization operated for the benefit of a college or university owned or ope section 170(b)(1)(A)(iv). (Complete Part II.)	rated by a governmental unit described in
6 A federal, state, or local government or governmental unit described in section 17	
7 An organization that normally receives a substantial part of its support from a go described in section 170(b)(1)(A)(vi). (Complete Part II.)	overnmental unit or from the general public
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)	
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated or university or a non-land-grant college of agriculture (see instructions). Enter the university:	
10 ✓ An organization that normally receives: (1) more than 331/3% of its support from co receipts from activities related to its exempt functions—subject to certain exception support from gross investment income and unrelated business taxable income (les acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete	ns, and (2) no more than 331/3% of its section 511 tax) from businesses
11 An organization organized and operated exclusively to test for public safety. See s	
12 An organization organized and operated exclusively for the benefit of, to perform the of one or more publicly supported organizations described in section 509(a)(1) of Check the box in lines 12a through 12d that describes the type of supporting organities of the type of supporting organities of the type of support organizations describes the type of support organizations of the type of support of the type of support of the type of support of the type of the type of the type of the type of type	r section 509(a)(2). See section 509(a)(3).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s) the power to regularly appoint or elect a majority supporting organization. You must complete Part IV, Sections A and B.	
b Type II. A supporting organization supervised or controlled in connection with control or management of the supporting organization vested in the same pers organization(s). You must complete Part IV, Sections A and C.	
c	

- d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization.
- Enter the number of supported organizations f

Provide the following information about the supported organization(s). α

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		listed in your governing		listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No						
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Schedu Par	ule A (Form 990 or 990-EZ) 2018 Support Schedule for Organiza	ations Desc	ribod in Soct	ions 170/b\/1	$(\Lambda)(iy)$ and $($	170/6/(1)/////	Page 2
r ai	(Complete only if you checked th						-
	Part III. If the organization fails to						,
	ion A. Public Support	1	1			1	
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
Sect	ion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						
9	similar sources						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he	ne organizatio	n's first, secon	id, third, fourth	n, or fifth tax y	12 ear as a sectio	
Sect	ion C. Computation of Public Support	rt Percentag	je				
14 15 16a	Public support percentage for 2018 (line Public support percentage from 2017 Scl 33 ¹ / ₃ % support test—2018. If the organ box and stop here. The organization qua	nedule A, Part ization did not	II, line 14 check the bo	x on line 13, ar	 nd line 14 is 3		
b	331 /3% support test—2017. If the organi this box and stop here. The organization						
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization more Part VI how the organization meets the " organization	eets the "facts	s-and-circumst cumstances" te	ances" test, cl	heck this box	and stop here	. Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization r Explain in Part VI how the organization r supported organization	ation meets the	ne "facts-and-o ts-and-circum	circumstances stances" test.	" test, check The organizat	this box and i ion qualifies as	stop here. a publicly

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			<i>, picace ce</i>	inploto i alt i	,	
	Idar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees	(,	() _ 0 . 0	(0) _0.0	(0) _0	(0) = 0 : 0	(1) 1010
	received. (Do not include any "unusual grants.")	229,851	111,859	141,331	122,219	205,475	810,735
2	Gross receipts from admissions, merchandise	227,031	111,037	141,001	122,217	203,473	010,733
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	56,892	47,379	26,000	40,733	18,739	189,743
3	Gross receipts from activities that are not an	50,692	41,319	20,000	40,733	10,139	109,143
U	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the	0	0	U	0	0	0
4	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	0	V	0	0	0	<u> </u>
5	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	286,743	159,238	167,331	162,952	224,214	1,000,478
7a	Amounts included on lines 1, 2, and 3	200,743	137,230	107,331	102,732	224,214	1,000,470
	received from disqualified persons .	o	0	0	6,000	0	6,000
b	Amounts included on lines 2 and 3	0	0	0	3,000	0	0,000
U	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	87,000	72,083	78,000	114,650	153,000	504,733
с	Add lines 7a and 7b	87,000	72,083	78,000	120,650	153,000	510,733
8	Public support. (Subtract line 7c from	07,000	72,000	10,000	120,000	100,000	510,755
-	line 6.)						489,745
Secti	on B. Total Support						1077110
Calen	dar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	286,743	159,238	167,331	162,952	224,214	1,000,478
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	0	3	6	7	23	39
b							
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	3	6	7	23	39
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	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)						
4.4	and 12.)	286,743	159,241	167,337	162,959	224,237	1,000,517
14	organization, check this box and stop he	0					()()
Santi	on C. Computation of Public Suppor			<u>· · · · · ·</u>			•••
<u>Secu</u> 15	Public support percentage for 2018 (line 8	-		3 column (fl)		15	48.95 %
16	Public support percentage from 2017 Sch					16	57.87 %
	on D. Computation of Investment In			<u></u>	<u></u>		51.01 /0
17	Investment income percentage for 2018 (<u> </u>	v line 13. colur	mn (f))	17	0 %
18	Investment income percentage from 2017		()	•	())	18	0 %
19a	33 ¹ / ₃ % support tests – 2018. If the organi						
.54	17 is not more than $33^{1/3}$ %, check this box						
b	33 ¹ /3% support tests – 2017. If the organiz	-	-	-		-	
	line 18 is not more than 33 ¹ / ₃ %, check this b	box and stop h e	ere. The organi	zation qualifies	as a publicly su	upported organi	zation 🕨 📄
20	line 18 is not more than 33 ¹ /3%, check this b Private foundation. If the organization div	-	-	-			

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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.

Section 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 instructions).
- **a** The organization satisfied the Activities Test. Complete **line 2** below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. *Answer (a) and (b) below.*
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.
- 3 Parent of Supported Organizations. *Answer (a) and (b) below.*
- **a** 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? *Provide details in Part VI.*
- **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.

Schedule A (Form 990 or 990-EZ) 2018

Yes No

1

3

2a

2b

3a

3b

Yes No

....

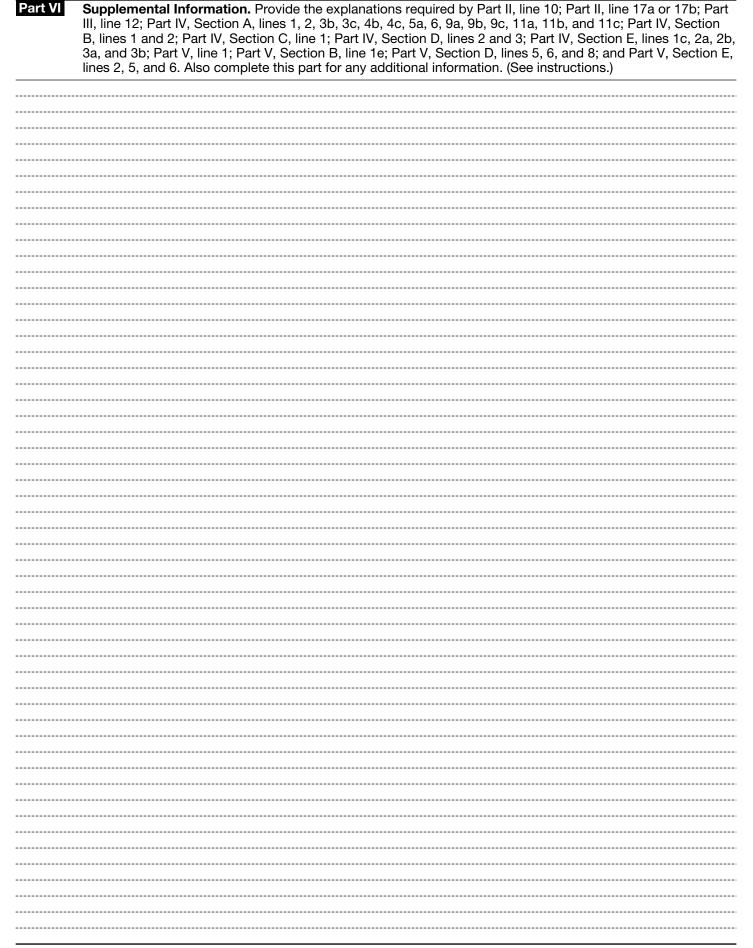
Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	10		
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-functionally integrated Type III supporting organization (see instructions).

Part	 A (Form 990 or 990-EZ) 2018 Type III Non-Functionally Integrated 509(a)(3) 	3) Supporting Organi	zations (continued)	Page I
	on D-Distributions	/		Current Year
4	Amounto paid to supported organizations to appemblish	avampt purpaga		
1	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe		wheed	
2	organizations, in excess of income from activity	sinpl purposes of suppo	inted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			



SCHEDULE O							
(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.

Attach to Form 990 or 990-F7



Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990 for the latest information.				
Name of the organization		Employer identification number			
Student Research and	Development	26-4742589			
	tion B, Line 11b - A draft copy of form 990 is made available to the board of dire				
		<u></u>			
Form 990, Part VI, Sec	tion B, Line 12c - Directors and employees are required to sign a written conflic	t of interest policy each year. The			
	provide provisions for reporting and investigating suspected conflicts of intere				
	tion B, Line 15 - Compensation for the Executive Director, key employees, and o				
	y of the board of directors (excluding any whose compensation is under review)				
	ar nonprofit organizations when making a decision. This process was last unde	rtaken in Fall 2016 establishing a			
salary of up to \$60,000) for the executive director.				
	tion C, Line 19 - Governing documents, conflict of interest policy, and financial	statements are available on our public			
	o/srnd, or by request by email, phone, or mail.				
Form 990, Part XI Line	e 9 - Represents an adjustment for accumulated rounding errors in the form 990				
		·			

Schedule O, Statement 1			Student Research and Development		
Form: For	orm: Form 990 (2018)		EIN: 26-4742589		
Page: 2			Part III, Line 4d		
	Other Program Services Accomplishments				
Activity Code	Description	Expense	Grants	Revenue	
	Our ONLINE COMMUNITY connects event participants across the US to provide ongoing mentorship and technical education.	519	0	0	
10	We partnered with schools to offer our CODECUP cyber security training, which is usually offered as a part of CodeDay, and reached 393 students.	91	0	0	
Total:		610	0	0	