## Short Form
### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).
- All other organizations with gross receipts less than $200,000 and total assets less than $500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

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### Part I
**Revenue, Expenses, and Changes in Net Assets or Fund Balances**

#### Check if the organization used Schedule O to respond to any question in this Part I

- 1 Contributions, gifts, grants, and similar amounts received
  - 1 $3,650.00
- 2 Program service revenue including government fees and contracts
  - 2 $0.00
- 3 Membership dues and assessments
  - 3 $3,705.00
- 4 Investment income
  - 4 $10,862.00
- 5a Gross amount from sale of assets other than inventory
  - 5a $0.00
- b Less: cost or other basis and sales expenses
  - 5b $0.00
- c Gain or (loss) from sale of assets other than inventory
  - 5c $0.00
- 6 Gaming and fundraising events
  - a Gross income from gaming (attach Schedule G if greater than $15,000)
  - 6a $0.00
  - b Gross income from fundraising events (not including $3,400.00 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)
  - 6b $0.00
  - c Less: direct expenses from gaming and fundraising events
  - 6c $0.00
  - d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)
  - 6d $0.00
- 7a Gross sales of inventory, less returns and allowances
  - 7a $0.00
- b Less: cost of goods sold
  - 7b $0.00
- c Gross profit or (loss) from sales of inventory
  - 7c $0.00
- 8 Other revenue (describe in Schedule O)
  - 8 $23,352.00
- 9 Total revenue
  - 9 $41,569.00

#### Check if the organization used Schedule O to respond to any question in this Part I

- 10 Grants and similar amounts paid (list in Schedule O)
- 11 Benefits paid to or for members
- 12 Salaries, other compensation, and employee benefits
- 13 Professional fees and other payments to independent contractors
- 14 Occupancy, rent, utilities, and maintenance
- 15 Printing, publications, postage, and shipping
- 16 Other expenses (describe in Schedule O)
- 17 Total expenses
- 18 Excess or (deficit) for the year
- 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
- 20 Other changes in net assets or fund balances (explain in Schedule O)
- 21 Net assets or fund balances at end of year

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### For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421 Form 990-EZ (2011)
### Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cash, savings, and investments</td>
<td>$58,023.00</td>
</tr>
<tr>
<td>23</td>
<td>Land and buildings</td>
<td>$0.00</td>
</tr>
<tr>
<td>24</td>
<td>Other assets (describe in Schedule O)</td>
<td>$0.00</td>
</tr>
<tr>
<td>25</td>
<td>Total assets</td>
<td>$58,023.00</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities (describe in Schedule O)</td>
<td>$0.00</td>
</tr>
<tr>
<td>27</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
<td>$58,023.00</td>
</tr>
</tbody>
</table>

### Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization’s primary exempt purpose? **professional development**

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**28 Annual professional development conference**

- **Grants $28a $31,347.00**

**29 Other program services (describe in Schedule O)**

- **Grants $29a**

**30**

- **Grants $30a**

**31 Other program services (describe in Schedule O)**

- **Grants $31a**

**32 Total program service expenses (add lines 28 through 31a)**

### Part IV List of Officers, Directors, Trustees, and Key Employees (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

<table>
<thead>
<tr>
<th>(a) Name and address</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Reportable compensation (Forms W-2/1099-MISC) if not paid, enter 0</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donna Pesta, SUNY Cobleskill Knapp Hall, 106 Suffolk Circle, Cobleskill, NY 12043</td>
<td>President</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Toby White, SUNY Potsdam Sisson Hall, Suite 112, Potsdam, NY 13678</td>
<td>President Elect</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Lynn Rogers, Buffalo State 1300 Elmwood Ave, CLEV 306, Buffalo, NY 14222</td>
<td>Secretary/ Treasurer</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Lisa Allan, SUNY Cortland PO Box 2000, Cortland, NY 13045</td>
<td>Member Relations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Holly Horn, Binghamton University PO Box 6000, Binghamton, NY 13902</td>
<td>Professional Development</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Suzanne Paddock, Herkimer County Community College 100 Reservoir Rd, Herkimer, NY 13350</td>
<td>2 yr Liaison</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Arlene Kaukas, University at Buffalo 259 Capen Hall, Buffalo, NY 14260</td>
<td>4 yr Liaison</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Amie Vedral, Stony Brook University W-0550 Melville Library, Stony Brook, NY 11794</td>
<td>New Member Relations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Tracy Collingwood, SUNY Fredonia 2nd floor Gregory Hall, Fredonia, NY 14063</td>
<td>Employer Relations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Form 990-EZ (2011)

Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a copy of the amended documents if they reflect a change to the organization’s name. Otherwise, explain the change on Schedule O (see instructions).

35a Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year?

35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.

37a Enter amount of political expenditures, direct or indirect, as described in the instructions.

37b Did the organization file Form 1120-POL for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

38b If "Yes," complete Schedule L, Part II and enter the total amount involved.

39 Section 501(c)(7) organizations. Enter:

39a Initiation fees and capital contributions included on line 9.

39b Gross receipts, included on line 9, for public use of club facilities.

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

40b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.

40c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.

40d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization.

40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41 List the states with which a copy of this return is filed.

42a The organization’s books are in care of Lynn Rogers. Telephone no. (716) 878-5811

42b Located at 1300 Elmwood Ave, Buffalo, NY ZIP + 4 14222

42c 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)? If "Yes," enter the name of the foreign country.

42d See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year.

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

44c Did the organization receive any payments for indoor tanning services during the year?

44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

Yes No

46

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI.

Yes No

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.

47

48 Is the organization a school as described in section 170(b)(1)(A)? If "Yes," complete Schedule E.

48

49a Did the organization make any transfers to an exempt non-charitable related organization?

49a

49b If "Yes," was the related organization a section 527 organization?

49b

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

<table>
<thead>
<tr>
<th>(a) Name and address of each employee paid more than $100,000</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Reportable compensation (Form W-2/1099-MISC)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>none</td>
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</tr>
<tr>
<td>f Total number of other employees paid over $100,000</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $100,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>none</td>
<td></td>
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<tr>
<td>d Total number of other independent contractors each receiving $100,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A.

Under penalties of perjury, I declare that I have examined the return, including accompanying schedules and statements, and, to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

Lynn M Rogers

Type or print name and title

Print/Type preparer’s name
Preparer’s signature

Paid Preparer Use Only

Firm’s name
Preparer’s address

May the IRS discuss this return with the preparer shown above? See Privacy Act and Penalties of Perjury.
**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or 990-EZ.

**State University of New York Career Development Organization, Inc.**

<table>
<thead>
<tr>
<th>Form 990-EZ, Part I, Line 8, Other Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Conference was held in Port Jefferson, NY in June 2012. Registration fee: $260.00</td>
</tr>
<tr>
<td>Registration fee included all meals, workshops, keynotes &amp; events/activities. Total Amount of revenue: $23,352.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Form 990-EZ, Part I, Line 10, Grants and similar amounts paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel expenses paid to Board of Directors Members for Mileage/Tolls to attend Board meetings:</td>
</tr>
<tr>
<td>Holly Horn, Binghamton University, $95.00</td>
</tr>
<tr>
<td>Cathy Parker, University at Albany, $103.00</td>
</tr>
<tr>
<td>Lynn Rogers, Buffalo State, $59.00</td>
</tr>
<tr>
<td>A professional development grant was established that members could apply for funding:</td>
</tr>
<tr>
<td>Ed Brodka, University at Buffalo, $300.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Form 990-EZ, Part I, Line 16, Other Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Conference was held in Port Jefferson, NY in June 2012. Expenses: $31,347.00</td>
</tr>
</tbody>
</table>