## 990-EZ

# Short Form Return of Organization Exempt From Income Tax

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Α	For the	2022 calenda	r year, or tax year	beginning (	8/01/20	22	, and	ending 07	<u>/</u> 31/2	023	
		applicable:	C Name of organiz						D Emp	loyer ident	ification number
	Address	change	Consortiu	m for Co	mputing	Sciences	in	Colleg	e 35-	16517	794
	Name ch	e change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Tele							E Tele	phone num	ber
	Initial retu	urn	2109 SE Talbot Pl (7						(77	2)260	0-1910
	Final retu	urn/terminated	City or town, state or	province, country	, and ZIP or forei	gn postal code		•	F Grou	ıp Exempt	tion
	Amended	d return	1						Nun	nber	
	Application	on pending	Stuart, F	L 34997							
G	Account	ing Method:		ccrual Other	(specify)				H Check	X if th	ne organization is <b>not</b>
1	Website	http:	s://ccsc.	org/	_				requir	ed to attac	ch Schedule B
J ·	Tax-exe		neck only one) - X		1(c) (	(insert no.) 4947	'(a)(1) or	527	(Form	990).	
K	Form of	organization:	X Corporation	Trust	As	sociation	Other				
L	Add line	s 5b, 6c, and	b to line 9 to deterr	nine gross recei	pts. If gross rec	eipts are \$200,000	or more	, or if total as	sets		
				-	-	0-EZ				\$	79,241.
	art I					or Fund Balanc					•
			-	_			-			-	
	1									1	2,166.
	2	Program ser	vice revenue includi	ng government f	ees and contrac	cts				2	76,797.
	3	Membership	dues and assessm	ents						3	•
	4	Investment in	ncome							4	278.
	5 a	Gross amou	nt from sale of asse	ts other than inv	entory		5a				
	b	Less: cost or	other basis and sa	les expenses .			5b				
	С									5c	
	6	Gaming and fundraising events:									
	a										
ne		\$15,000) .					6a				
Revenue	b	•	e from fundraising					of contribution	s		
Re			sing events reported	•		f the					
			-				6b				
	C		-								
	d		· -	-	-	nes 6a and 6b and s		t			
			, ,	-	•					6d	
	7 a	•					1				
	b	Less: cost of	goods sold								
	C	Gross profit	or (loss) from sales	of inventory (sul	otract line 7b fro	om line 7a)				7c	
	8	Other revenu	e (describe in Sche	edule O)						8	
	9	Total reven	ue. Add lines 1, 2,	3, 4, 5c, 6d, 7c,	and 8					9	79,241.
_	10									10	· ·
	11									11	
S	12	Salaries, oth	er compensation, ar	nd employee ber	efits					12	
use	13	Professional	fees and other payr	nents to indeper	ndent contractor	·s				13	
Expenses	14									14	
Ш	15									15	275.
	16	• .								16	85,565.
	17									17	85,840.
<u></u>	18	Excess or (d	eficit) for the year (s	subtract line 17 f	rom line 9)					18	-6,599.
set	19					column (A)) (must					•
Net Assets							-			19	248,041.
	20					ıle O)				20	•
	21	Net assets o	r fund balances at ε	end of year. Com	bine lines 18 th	rough 20				21	241,442.

01.00

Michael Flinn

Eastern Representative

rait	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part	٧		
			Yes	No
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	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			l
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	25-		
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
30	during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	30		X
b	Did the organization file Form 1120-POL for this year?	37b		х
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; <b>or</b> were	0.2		
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		х
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	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:			
	section 4911: ; section 4912: ; section 4955:			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	40b		Х
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
•	40c reimbursed by the organization			
е		40e		- V
41	transaction? If "Yes," complete Form 8886-T	406		X
42a	The organization's books are in care of: <b>Edward C. Lindoo</b> Telephone no. <b>(772</b>	126	0_1	910
7 <b>2</b> u	Located at: 2109 SE Talbot Place Stuart, FL ZIP+4 3499	•	0-1	<u> </u>
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х
	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041 -</b> Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	44-		
	completed instead of Form 990-EZ.	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	116		٦,
_	completed instead of Form 990-EZ	44b 44c		X
Q C	Did the organization receive any payments for indoor tanning services during the year?	440		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44u 45a		х
43a b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	Ja		A
	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	45b		

-01111 991	J-EZ (Z	022) Consortium for Co	mputing scie	nces in Cor	reges	33-	TOD	<b>エ/</b> 9	4 「	age ¬
40	D: La	Parada and Parada	to a little of a constant of	totte a san hadaalf of an ta					Yes	No
46		e organization engage, directly or indirectly didates for public office? If "Yes," complete			• •			46		х
Part \	/[	<b>Section 501(c)(3) Organization</b> All section 501(c)(3) organizations n	s Only							
		50 and 51. Check if the organization used Sche	dule O to respond to	any question in this	Part VI					П
		Check ii the Organization asea Cone	duic o to respond to	arry question in this	Tall VI .				Yes	No
47		e organization engage in lobbying activities If "Yes," complete Schedule C, Part II.		=				47		х
48	•	organization a school as described in section						48		X
49a		e organization make any transfers to an exe		•				49a		Х
b	If "Yes	s," was the related organization a section 52	27 organization?					49b		
50		lete this table for the organization's five high					€y			
	emplo	yees) who each received more than \$100,0	000 of compensation from	· · · · · · · · · · · · · · · · · · ·						
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC 1099-NEC)	contributio	Ith benefits, ns to employee ns, and deferred pensation		timated er com		
				,						
f	Total r	number of other employees paid over \$100,	000	0	_					
51	Comp	lete this table for the organization's five high	hest compensated indepe	endent contractors who	each receive	d more than				
	\$100,	000 of compensation from the organization	n. If there is none, enter "N	None."						
	(a)	Name and business address of each independ	ent contractor	(b) Type of se	rvice	(c	<b>)</b> Comp	ensatio	n	
						_				
52	Did th	number of other independent contractors executive organization complete Schedule A? <b>No</b> eted Schedule A	te: All section 501(c)(3)	organizations must atta	ach a			Yes		No
	nalties	of perjury, I declare that I have examined this red complete. Declaration of preparer (other than	eturn, including accompanyi	ng schedules and stateme	ents, and to the	e best of my know				
,		, and that				3				
Sign	5	Signature of officer			, <u>, , , , , , , , , , , , , , , , , , </u>	Pate				
Here		Ed Lindoo, Treasur Type or print name and title	er							
Paid		Print/Type preparer's name	Preparer's signature	[ [	Date	Check	] if F	PTIN		
Paiu Prepa	rer					self-emplo	yed			
Use O		Firm's name			F	irm's EIN				
<del>-</del>	- ,	Firm's address			F	hone no.				
Mav the	IRS di	scuss this return with the preparer shown	above? See instructions					Yes		No

#### **SCHEDULE A**

(Form 990)

#### **Public Charity Status and Public Support**

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number Name of the organization Consortium for Computing Sciences in Colleges 35-1651794 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 🕱 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **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 II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 other support (see listed in vour governing support (see document? above (see instructions)) instructions) instructions) Yes (A) (B) (C) (D) (E) Total

Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
	Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

<b>1</b> (	ar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received. (Do not	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
r	-						
	membership fees received. (Do not						
i							
	nclude any "unusual grants.")						
2	Tax revenues levied for the						
C	organization's benefit and either paid						
	o or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4 7	Fotal. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental						
ι	unit or publicly supported organization)						
	ncluded on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	n B. Total Support		<u> </u>	Г	Г		
	ar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
	Amounts from line 4						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
	Net income from unrelated business						
	activities, whether or not the business						
	s regularly carried on						
	Other income. Do not include gain or						
	oss from the sale of capital assets						
	(Explain in Part VI.)						
	Total support. Add lines 7 through 10	/a.a. imatuusti				40	
	Gross receipts from related activities, etc.	•	•				1(a)(2)
	First 5 years. If the Form 990 is for the o organization, check this box and stop her				-		```
	n C. Computation of Public Suppor						· · · · · · <u> </u>
	Public support percentage for 2022 (line 6			11 column (f)	`	14	0/.
	Public support percentage for 2022 (line c		-		•		<u>%</u> %
	33 1/3 % support test-2022. If the organi						
	pox and <b>stop here.</b> The organization qual						
	33 1/3 % support test-2021. If the organi	•		•			
	check this box and <b>stop here.</b> The organi						·
	10%-facts-and-circumstances test–202	-					
	10% or more, and if the organization me						
	Part VI how the organization meets the fac						
	organization.			•	•		·
	10%-facts-and-circumstances test–202						
	10%-racts-and-circumstances test-202 15 is 10% or more, and if the organization	•					
	Explain in Part VI how the organization m						
	supported organization				-	-	
	Private foundation. If the organization di						
	nstructions						

#### 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						
Caler	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	16,210.	10,000.	6,000.	6,000.	18,320.	56,530.
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	91,549.	44,685.	38,832.	47,985.		223,051.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5	107,759.	54,685.	44,832.	53,985.	18,320.	279,581.
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	2,120.	2,070.	1,725.	2,160.		8,075.
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						
	Add lines 7a and 7b	2,120.	2,070.	1,725.	2,160.		8,075.
8	Public support. (Subtract line 7c from						
	line 6.)						271,506.
	on B. Total Support	· · · · · · · · · · · · · · · · · · ·				<b>T</b>	
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
9		107,759.	54,685.	44,832.	53,985.	18,320.	279,581.
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			- 4			
	royalties, and income from similar sources	67.	72.	74.	10.		223.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975	6.77	70	7.4	1.0		222
	Add lines 10a and 10b	67.	72.	74.	10.		223.
11							
	activities not included on line 10b, whether or not the business is regularly carried on						
10	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11,						
	and 12.)	107 826	54 757	44 906	53 995	18 320	279 804
14	First 5 years. If the Form 990 is for the o						
• •	organization, check this box and <b>stop her</b>	•			•		. , . ,
Secti	on C. Computation of Public Suppo	rt Percentag	<u>e</u>				· · · · · · <u> </u>
15	Public support percentage for 2022 (li	ne 8. column	(f), divided b	v line 13. col	umn (f))	. 15	97.03%
16	Public support percentage from 2021						97.23%
	on D. Computation of Investment In					- 1	<u> </u>
17	Investment income percentage for 2022			by line 13, col	umn (f))	. 17	00.08%
18	Investment income percentage from 202	•		-		<del></del>	00.08%
	331/3 % support tests-2022. If the organ						
	line 17 is not more than 331/3%, check this						
b	331/3 % support tests-2021. If the organi	zation did not o	check a box on	line 14 or line	19a, and line	16 is more tha	n 33¹/3 %, and
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di						

### Part IV Supporti

**Supporting Organizations** 

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

	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete	Par	i V.)	
Secti	on 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 <b>Part VI</b> 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			
	lines 3b and 3c 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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a		-		
<b>4</b> a	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
<b>L</b>		4а		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion	41-		
	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 <b>Part VI</b> 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 lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on 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			
Ju	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 <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ja		
D		OF		
_	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	0-		
46	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9с		
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	4.5		
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

10b

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?  A 25V controlled entity of a person described on line 11a or 11b obeys 215 "Vee" to line 11a, as 11a, provide detail in Part VI	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. on B. Type I Supporting Organizations	11c		
<u> </u>	J. Pypo i oupporting organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or memberships of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Section	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	Yes	No
Section	on D. All Type III Supporting Organizations			
	Dildian and a first and the control of the control		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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2		
3	By reason of the relationship described on line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.			:).
	instructions).	_		
2	Activities Test. Answer lines 2a and 2b 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 <b>Part VI identify those supported organizations and explain</b> 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.	2a		
b	Did the activities described on line 2a, above, 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 <b>Part VI</b> 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. Answer lines 3a and 3b below.			
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? If "Yes" or "No," provide details in <b>Part VI.</b>	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 <b>Part VI</b> the role played by the organization in this regard	3h		

instructions).

COLLECTION TO COMPACING SOL			
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trus	t on Nov. 20, 1970 (expl	ain in <b>Part VI</b> ).
See instructions. All other Type III non-functionally integrated supporting	orgar	nizations must complete s	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)  7 Other expenses (see instructions)	6		
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>b</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		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 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 0.035.	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 0.85 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		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

UYA Schedule A (Form 990) 2022

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedu	le A (Form 990) 2022 Consortium for Com				
<b>Part</b>	Type III Non-Functionally Integrated 509(a)(	<ol><li>Supporting Organ</li></ol>	<b>าizations</b> (continu	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required		t <b>VI</b> )	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whice (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	Ente d'airidant airidea sy mile d'airidant		(ii)		(iii)
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required- explain in Part VI). See instr.			_	
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
<u>a</u> b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
3	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	<b>Excess distributions carryover to 2023.</b> Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				

UYA Schedule A (Form 990) 2022

Excess from 2020 . . . . . d Excess from 2021 . . . . . Excess from 2022 . . . .

# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization				Employer identification number
Consortium	for Computing	Sciences i	n Colleges	35-1651794

Schedule O (Form 990) 2022 Page 2

Name of the organization	Employer identification number
Consortium for Computing Sciences in Colleges	35-1651794
Part I Line 16	33-1031794
Information technology \$788.00	
Part I Line 16	
Travel \$29079.00	
Part I Line 16	
Conferences, conventions, and meetings \$41676.00  Part I Line 16	
Insurance \$998.00 Part I Line 16	
Pay Pal fees \$892.00	
Part I Line 16	
Meeting expense \$2343.00	
Part I Line 16	
Books, subscriptions \$2843.00	
Part I Line 16	
Equipment, maintenance, rent \$2600.00	
Part I Line 16	
Outside contract services \$3300.00	
Part I Line 16	
Supplies \$513.00	
Part I Line 16	
Other misc \$533.00	
Part II Line 26	
Accounts payable and accrued expenses. Beginning:\$182.00	Ending: \$0.00

UYA Schedule O (Form 990) 2022

Name of organization

Consortium for Computing Sciences in Colleges

Employer identifying number
35-1651794

Part IV List of Officers, Directors, Trus		<b>ployees</b> (list each	one even if not	
compensated—see the instruct	,			
Check if the organization used S	Schedule O to resp		on in this Part IV	
(a) Name and Title	(b) Average hours		(d) Health benefits.	(e) Estimated
(a) Name and Title	per w eek devoted t	l '	contributions to	amount of other
	position	(Forms	employee benefit	compensation
			plans, and deferred	
		not paid, enter -0-	) compensation	
David Naugler				
Midsouth Representativ	1.0	0.	0.	0.
David Largent				
Midwest Representative	1.0	0.	0.	0.
Mark Bailey				
Northeastern Rep	0.0	0.	0.	0.
Mohamed Lotfy				
Rocky Mountain Rep	1.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
	0.0	0.	0.	0.
				•
	0.0	0.	0.	0.

#### Comments for Form 990-EZ, Part III

The improvement of computer instruction in undergraduate education; improvement in use of computer technology in undergraduate education; effective use of computer technology in small colleges.