Department of the Treasury Internal Revenue Service

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

|  |  |  |  |  | , 20 |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Check if applicable: <br> Address change | Please use IRS label or print or type. See Specific Instructions. | C Name of organization Mathematical Progr |  | D Employer identification number $23: 2161580$ |
|  | Name change Initial return |  | Number and street (or P.O. box if 3600 University Science Ce | Room/suit | E Telephone number ( 718 ) 263-9874 |
|  | Final return Amended return |  | City or town, state or country, and Philadelphia, PA 19104 |  |  |
|  | Application pending Website: $>$ http | ://www | sts must attach a completed Sched .mathprog.org/ | H and I are not applicable to section 527 organizations. <br> $\mathrm{H}(\mathrm{a})$ Is this a group return for affiliates? $\square$ Yes No <br> H(b) If "Yes," enter number of affiliates |  |
| $J$ | Organization ty | chec | ly one) $\boldsymbol{\triangle}$ 501(c) ( 3 ) < (ins | $\mathrm{H}(\mathrm{c})$ Are all affiliates included? Yes $\square$ No (If "No," attach a list. See instructions.) <br> $\mathbf{H}(\mathrm{d})$ Is this a separate return filed by an organization covered by a group ruling? $\square$ Yes $\square$ No |  |
| $\mathbf{K}$ Check here $\square$ if the organization's gross receipts are normally not more than $\$ 25,000$. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return. |  |  |  |  |  |
|  |  |  |  | I Group | emption Number |
|  | Gross receipts: | Add lin | 6b, 8b, 9b, and 10b to line 12 | M Check $\square$ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF). |  |

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received:
Direct public support
b Indirect public support
c Government contributions (grants)
d Total (add lines 1a through 1c) (cash \$ $\qquad$ noncash \$ $\qquad$ )
$\square$

2 Program service revenue including government fees and contracts (from Part VII, line 93)
3 Membership dues and assessments $\square$
Interest on savings and temporary cash investments
5 Dividends and interest from securities
6a Gross rents
b Less: rental expenses
c Net rental income or (loss) (subtract line 6b from line 6a)
7 Other investment income (describe
8a Gross amount from sales of assets other

|  | (A) Securities |
| :--- | :--- |
|  |  |
|  |  |

c Gain or (loss) (attach schedule)
s (A) and (B))

| 1d | 0 |
| :---: | :---: |
| 2 | 23,517 |
| 3 | 34,205 |
| 4 | 8,467 |
| 5 |  |
| 6c |  |
| 7 |  |
| 8d |  |
| 9c |  |
| 10c |  |
| 11 | 125 |
| 12 | 66,314 |
| 13 | 17,000 |
| 14 | 43,362 |
| 15 |  |
| 16 |  |
| 17 | 60,362 |
| 18 | 5,952 |
| 19 | 284,357 |
| 20 | 0 |
| 21 | 290,309 |

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282 Y

## Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) Functional Expenses organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

|  | Do not include amounts reported on line $6 b, 8 b, 9 b, 10 b$, or 16 of Part I. |  | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $22$ | Grants and allocations (attach schedule) . <br> (cash \$ $\qquad$ 10,000 noncash \$ $\qquad$ If this amount includes foreign grants, check here $\square$ | 22 | 10,000 | 10,000 |  |  |
| 23 | Specific assistance to individuals (attach schedule) | 23 |  |  |  |  |
| 24 | Benefits paid to or for members (attach schedule) | 24 |  |  |  |  |
| 25 | Compensation of officers, directors, etc. . | 25 |  |  |  |  |
| 26 | Other salaries and wages | 26 |  |  |  |  |
| 27 | Pension plan contributions | 27 |  |  |  |  |
| 28 | Other employee benefits | 28 |  |  |  |  |
| 29 | Payroll taxes | 29 |  |  |  |  |
| 30 | Professional fundraising fees | 30 |  |  |  |  |
| 31 | Accounting fees . . . | 31 |  |  |  |  |
| 32 | Legal fees . . | 32 | 13,350 |  | 13,350 |  |
| 33 | Supplies | 33 | 124 |  | 124 |  |
| 34 | Telephone | 34 |  |  |  |  |
| 35 | Postage and shipping | 35 | 681 |  | 681 |  |
| 36 | Occupancy . . . | 36 |  |  |  |  |
| 37 | Equipment rental and maintenance . | 37 |  |  |  |  |
| 38 | Printing and publications . . | 38 | 7,000 | 7,000 |  |  |
| 39 | Travel . . . . . . | 39 |  |  |  |  |
| 40 | Conferences, conventions, and meetings | 40 |  |  |  |  |
| 41 | Interest | 41 |  |  |  |  |
| 42 | Depreciation, depletion, etc. (attach schedule) | 42 |  |  |  |  |
| 43 | Other expenses not covered above (itemize): <br> Bank and Credit Card Fees | 43a | 1,086 |  | 1,086 |  |
| b | WEB and Registration Fees | 43b | 608 |  | 608 |  |
| c | Secretarial | 43c | 27,308 |  | 27,308 |  |
| d | Misc Taxes | 43d | 25 |  | 25 |  |
| e |  | 43 e |  |  |  |  |
| $f$ |  | 43f |  |  |  |  |
| g |  | 43 g |  |  |  |  |
| 44 | Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) | 44 | 60,362 | 17,000 | 43,362 |  |

Joint Costs. Check $>\square$ if you are following SOP 98-2.
Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? .YesNo If "Yes," enter (i) the aggregate amount of these joint costs \$ $\qquad$ ; (ii) the amount allocated to Program services \$ $\qquad$ _;
(iii) the amount allocated to Management and general \$
; and (iv) the amount allocated to Fundraising \$

## Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



## Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements

e Total revenue (Part I, line 12). Add lines $\dot{\mathbf{c}}$ and $\mathbf{d}$
Part IV-B $\quad$ Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
a Total expenses and losses per audited financial statements
b Amounts included on line a but not on Part I, line 17:
1 Donated services and use of facilities
2 Prior year adjustments reported on Part I, line 20
3 Losses reported on Part I, line 20
4 Other (specify):

| b1 |  |
| :--- | :--- |
| b2 |  |
| b3 |  |
| b4 |  |

Add lines b1 through b4
c Subtract line b from line a
d Amounts included on Part I, line 17, but not on line a:
1 Investment expenses not included on Part I, line 6b
2 Other (specify):
Add lines d1 and d2
e Total expenses (Part I, line 17). Add lines $\mathbf{c}$ and $\mathbf{d}$

| d1 |  |  |
| :---: | :---: | :---: |
| d2 |  |  |
|  |  | d |
|  | - | e |

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

| (A) Name and address | (B) <br> Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-.) | (D) Contributions to employee benefit plans \& deferred compensation plans | (E) Expense account and other allowances |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
| SEE ATTACHMENT |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

## Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations.
If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.
d Does the organization have a written conflict of interest policy?


Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)


## Part VI Other Information (continued)

82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.
(See instructions in Part III.)
82b
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
b Did the organization make only in-house lobbying expenditures of $\$ 2,000$ or less?
If "Yes" was answered to either 85 a or 85 b, do not complete 85 c through 85 h below unless the organization received a waiver for proxy tax owed for the prior year.
c Dues, assessments, and similar amounts from members
d Section 162(e) lobbying and political expenditures
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
f Taxable amount of lobbying and political expenditures (line 85d less 85e)
.$|85 c|$
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line $85 f$ to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12
b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)

| $86 a$ |  |
| :--- | :--- |
| $86 b$ |  |
| $87 a$ |  |
| $87 b$ |  |

88 At any time during the year, did the organization own a $50 \%$ or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 O. ; section 4912
O. ; section 4955 0
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
d Enter: Amount of tax on line 89c, above, reimbursed by the organization
90a List the states with which a copy of this return is filed
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)
|90b
0
91a The books are in care of Dr. David M. Gay . . . . . . . . . . . 718 . $263-9874$ Located at 900 Sierra Place SE, Albuquerque, New Mexico

ZIP + 4
87108-3379
b 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
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
c At any time during the calendar year, did the organization maintain an office outside of the United States?
 If "Yes," enter the name of the foreign country
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . 92

## Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.
93

## a

b
c
d
e
f Medicare/Medicaid payments
g Fees and contracts from government agencies
94
95
96
97 Net rental income or (loss) from real estate:
a debt-financed property
b not debt-financed property
98 Net rental income or (loss) from personal property
99 Other investment income
100 Gain or (loss) from sales of assets other than inventory
101 Net income or (loss) from special events
102 Gross profit or (loss) from sales of inventory
103 Other revenue: a Label Sales
b
c
d
104 Subtotal (add columns (B), (D), and (E))

| Unrelated business income |  | Excluded by section 512, 513, or 514 |  | (E) <br> Related or exempt function income |
| :---: | :---: | :---: | :---: | :---: |
| (A) <br> Business code | (B) Amount | (C) <br> Exclusion code | (D) Amount |  |
|  |  |  |  | 23,517 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  | 34,205 |
|  |  | 14 | 8,467 |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |
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|  |  |  |  |  |
| 541900 | 125 |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | 125 |  | 8,467 | 57,722 |
| . . . | . . . |  | $\checkmark$ | 66,314 |

105 Total (add line 104, columns (B), (D), and (E)) . . . . ine 12, Part I.
Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

| Line No. | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment <br> of the organization's exempt purposes (other than by providing funds for such purposes). |
| :---: | :--- |
| $\nabla$ |  |

The royalties are derived from the society's publications. These publications are one of the principal ways by which the organization advances mathematical programming and the knowledge of such programming.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

| Name, address, and EIN of corporation, partnership, or disregarded entity | (B) <br> Percentage of ownership interest | (C) Nature of activities | (D) <br> Total income | $\begin{gathered} \text { (E) } \\ \text { End-of-year } \\ \text { assets } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: |
|  | \% |  |  |  |
|  | \% |  |  |  |
|  | \% |  |  |  |
|  | \% |  |  |  |

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)
(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . $\square$ Yes No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? $\square$ Yes $\square$ No Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

| Please <br> Sign <br> Here | 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. |  |  |
| :---: | :---: | :---: | :---: |
|  |   <br> Signature of officer  <br> David M. Gay $\quad$ Treasurer of the Mathematical Programming Society, Inc.  <br> Type or print name and title.  |  |  |
|  |  |  |  |
|  |  |  |  |
| Paid <br> Preparer's Use Only | Preparer's signature | Check if self- employed | Preparer's SSN or PTIN (See Gen. P00552215 |
|  | Firm's name (or yours <br> if self-employed)), <br> address, and ZIP + LAW OFFICES OF ALBERT FEUER | EIN | - 11:2767214 |
|  |  |  | 718 ) 263-9874 |

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), $501(\mathrm{f}), 501(\mathrm{k}), 501(\mathrm{n})$, or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information-(See separate instructions.)
MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Mathematical Programming Society, Inc.
Employer identification number

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.")


## Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
| :---: | :---: | :---: |
| NONE |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Total number of others receiving over \$50,000 for professional services . |  |  |

## Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
| :---: | :---: | :---: |
| NONE |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Total number of other contractors receiving over $\$ 50,000$ for other services |  |  |
| For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. | 285F Sche | 990 or 990-EZ) 2005 |

## Part III Statements About Activities (See page 2 of the instructions.)

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $>\$$ $\qquad$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)
Organizations that made an election under section 501 (h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)
a Sale, exchange, or leasing of property?
b Lending of money or other extension of credit?
c Furnishing of goods, services, or facilities?
d Payment of compensation (or payment or reimbursement of expenses if more than $\$ 1,000$ )?
e Transfer of any part of its income or assets?
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.).
b Do you have a section 403(b) annuity plan for your employees?
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?

## Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)
$5 \square$ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
$6 \quad \square$ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
$7 \quad \square$ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
$8 \square$ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
$9 \quad \square$ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
10
An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11a $\square$ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
11b $\square$ A community trust. Section $170(b)(1)(A)(v i)$. (Also complete the Support Schedule in Part IV-A.)
$12 \sqrt{\boldsymbol{V}}$ An organization that normally receives: (1) more than $331 / 3 \%$ of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than $331 / 3 \%$ 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). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: $\square \square$ Type $1 \quad \square$ Type $2 \quad \square$ Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

| (a) Name(s) of supported organization(s) | (b) Line number <br> from above |
| :--- | :---: |
|  |  |

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.


27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:
(2004)
640
(2003)
23,140
(2002)
575
(2001)
600
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:
(2004)
(2003)
(2002)
(2001)
c Add: Amounts from column (e) for lines:

$\qquad$
$17 \quad 169,309$

20 | $\mathbf{2 2 , 5 0 0}$ | 16 | $\mathbf{1 8 4 , 9 5 2}$ |
| ---: | ---: | ---: | ---: |
|  | 21 | $\mathbf{0}$ |
| and line 27b total | . | $\mathbf{0}$ |


f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)
g Public support percentage (line 27e (numerator) divided by line 27 f (denominator)) .
h Investment income percentage (line 18, column (e) (numerator) divided by line 27 f (denominator))
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

## Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)

32 Does the organization maintain the following:
a Records indicating the racial composition of the student body, faculty, and administrative staff?
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?.
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
d Copies of all material used by the organization or on its behalf to solicit contributions?
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)

33 Does the organization discriminate by race in any way with respect to:
a Students' rights or privileges?
b Admissions policies?
c Employment of faculty or administrative staff?
d Scholarships or other financial assistance?
e Educational policies?
f Use of facilities?
g Athletic programs?.
h Other extracurricular activities?.

If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)
$\qquad$
$\qquad$

34a Does the organization receive any financial aid or assistance from a governmental agency?
b Has the organization's right to such aid ever been revoked or suspended? .
If you answered "Yes" to either 34a or b, please explain using an attached statement.
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. $75-50,1975-2$ C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

|  | Yes | No |
| :---: | :---: | :---: |
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| 30 |  |  |
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| 31 |  |  |
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| 32a |  |  |
| 32b |  |  |
| 32c |  |  |
| 32d |  |  |
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| 33a |  |  |
| 33b |  |  |
| 33c |  |  |
| 33d |  |  |
| 33e |  |  |
| 33f |  |  |
| 33g |  |  |
| 33h |  |  |
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| 34a |  |  |
| 34b |  |  |
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| 35 |  |  |



## 4-Year Averaging Period Under Section 501 (h)

(Some organizations that made a section $501(\mathrm{~h})$ election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 11 of the instructions.)


## Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting organization to a noncharitable exempt organization of:
(i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:
$\left.\begin{array}{c|c|c|c}\hline \begin{array}{c}\text { (a) } \\ \text { Line no. }\end{array} & \begin{array}{c}\text { (b) } \\ \text { Amount involved }\end{array} & \text { (c) } \\ \hline & & & \begin{array}{c}\text { (d) } \\ \text { Name of noncharitable exempt organization }\end{array} \\ \hline & & & \text { Description of transfers, transactions, and sharing arrangements }\end{array}\right]$

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?
b If "Yes," complete the following schedule:

| (a) <br> Name of organization | (b) <br> Type of organization | (c) <br> Description of relationship |
| :--- | :--- | :--- |
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## Part II <br> Line 22 <br> Grants and Allocations in 2005

Grants consisted of honoraria for prizes and editorial services for the Society's. None of the recipients is related to any person or corporation with an interest in the Society other than Dr. Gerards, who was an at-large member of the Society's council and co-Editor of the Society publication, Mathematical Programming A. Dr. Gerards received the same $\$ 1,000$ honoria as the three unrelated co-editors of the Society publication, Mathematical Programming A. A list of the recipients, their addresses and amounts received follows:

## Editorial Services

Professor William Cook (\$4,000, MPA)
School of Industrial and Systems Engineering
Georgia Institute of Technology
Groseclose 0205
Atlanta, GA 30332

Robert Kurt Anstreicher (\$1,000, MPA)
Department of Management Science
University of Iowa
Iowa City, IO 52242
Professor Michael C. Ferris ( $\$ 1,000$, MPA)
University of Wisconsin
Department of Computer Sciences
1210 West Dayton Street
Madison, WI 53706
Albertus M. H. Gerards (\$1,000, MPA)
CWI
Postbus 94079
1090 GB Amsterdam
The NETHERLANDS
Prof. Dr. Michael Jünger (\$1,000, MPA)
Institut für Informatik
Universität zu Köln
Pohligstraße 1
D-50969 Köln, GERMANY
Prof. Stephen J. Wright (\$2,000, MPB)
Computer Sciences Department
University of Wisconsin
1210 W. Dayton Street
Madison WI 53706

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## Part V-A <br> LIST OF THE SOCIETY'S 2005 OFFICERS

The Society paid none of the Society's Officers any compensation or employee benefits (including deferred compensation). The Society did not reimburse any of the Officers for any expenses other than a $\$ 97.20$ reimbursement to the Treasurer for postal expenses he incurred on behalf of the Society.

Name, address, title Hours/Week<br>Prof. Rolf H. Möhring (Chair) 2.0<br>Institut für Mathematik<br>Berlin University of Technology<br>Straße des 17. Juni 136<br>D-10623 Berlin, GERMANY<br>Prof. Robert E. Bixby (Past Chair) 2.0<br>Rice University<br>Dept. of Mathematical Sciences<br>P.O. Box 1892<br>Houston TX, 77251<br>USA<br>Dr. Karen Aardal (Exec Comm Chair) 2.0<br>Centrum voor Wiskunde en Informatica<br>P.O. Box 94079<br>1090 GB Amsterdam<br>The Netherlands<br>Dr. David Gay (Treasurer) 2.0<br>900 Sierra Place SE<br>Albuquerque, NM 87108-3379<br>USA

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## Part V-A <br> LIST OF THE SOCIETY'S 2005 COUNCIL MEMBERS

The Society paid none of the Society's Council Members any compensation or employee benefits (including deferred compensation). The Society did not reimburse any of the Council members for any expenses other than a $\$ 97.20$ reimbursement to the Treasurer for postal expenses he incurred on behalf of the Society. The first four are exofficio Council Members, and the rest are Council Members-at-large.

| Hours/Week |  |  |  |
| :---: | :---: | :---: | :---: |
| Prof. Rolf H. Möhring (Chair) | 2.0 | 1090 GB Amsterdam |  |
| Institut für Mathematik |  | The NETHERLANDS |  |
| Berlin University of Technology |  |  |  |
| Straße des 17. Juni 136 |  |  |  |
| D-10623 Berlin, GERMANY |  | Prof. Christoph Helmberg Chemnitz University of Technology | 2.0 |
| Prof. Robert E. Bixby (Past Chair) | 2.0 | Fakultät für Mathematik |  |
| Rice University |  | 09107 Chemnitz |  |
| Dept. of Mathematical Sciences |  | GERMANY |  |
| PO Box 1892 |  |  |  |
| Houston TX, 77251 |  | Prof. Dorit S. Hochbaum | 2.0 |
| USA |  | Haas School of Business and Dept. of IE\&OR |  |
| Dr. David M. Gay (Treasurer) | 2.0 | Etcheverry Hall |  |
| 900 Sierra Place SE |  | University of California |  |
| Albuquerque, NM 87108-3379 |  | Berkeley, CA 94720-1777 |  |
| USA |  | USA |  |
| Dr. Karen Aardal (Exec Comm Chair) | 2.0 |  |  |
| Centrum voor Wiskunde en Informatica |  |  |  |
| P.O. Box 94079 |  |  |  |
| 1090 GB Amsterdam |  |  |  |
| The NETHERLANDS |  |  |  |
| Dr. Lisa Fleischer | 2.0 |  |  |
| IBM T. J. Watson Research Center |  |  |  |
| P. O. Box 218 |  |  |  |
| Yorktown Heights, NY 10598 |  |  |  |
| USA |  |  |  |
| Dr. Albertus M. H. Gerards | 2.0 |  |  |
| CWI |  |  |  |
| Postbus 94079 |  |  |  |

