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## **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)

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		<del></del>	<del></del>										
	For the	2008 calendar year, or tax year	beginning 7/01	, 2	008, and endin	ig6/30		2009					
В	Check if			•		D Employ	er Identifica	tion Number					
	Add	Address change   Please use   Wisconsin Society of Professional 39-0768362											
	$\vdash$	e change or print Engine					one number						
	$\vdash$	, See IPO Box	(41	4) 531	-5875								
	$\vdash$	specific Pewaul	131	1) 331	3073								
	<b>—</b>	nination tions.			74 120								
	Ame	nded return	eceipts \$	74,139.									
	App!	cation pending F Name and address of	•			H(a) Is this a group retuing H(b) Are all affiliates incl		<b>#"</b>					
		Same As C At	oove			If 'No,' attach a list		tions) Yes No					
<u></u>	Tax-e	xempt status X 501(c) ( 6	) ◀ (insert no.)	4947(a)(1) or	527			•					
1_	Webs	ite: ► N/A				H(c) Group exemption no	umber 🟲						
K	Туре о	forganization Corporation T	rust Association (	Other►	L Year of Forma	tion M S	State of legal	domicile					
	ert I	Summary						_					
<b>3</b>	1 B	riefly describe the organization'	's mission or most signi	ficant activities.	Support	the ethical	practi	.ce of					
	1	rofessional Enginee											
ĕ				<b>-</b>									
ΔĒ	_												
≨દ	2 0	heck this box ► If the orga	anization discontinued if	s operations or d	sposed of moi	re than 25% of its a	ssets.						
=0		umber of voting members of the					3	9					
<u> </u>		umber of independent voting m		ig body (Part VI, I	ıne 1b)		4	0					
鬓	5 T	otal number of employees (Part	t V, line 2a)				5	0					
慧		otal number of volunteers (estir					6	0					
₹		otal gross unrelated business re			;)		7a	466.					
CACINITIES GOVERNANCE	ÞΛ	et unrelated business taxable ir					7ь	0.					
00			NEUE	IVSU		Prior Year	_	Current Year					
•	<b>8</b> C	ontributions and grants (Part VI	10,4	100.	5,100.								
Revenue	9 P	Contributions and grants (Part VIII, line 11)  Program service revenue (Part VIII, line 22) FEB 1 2 2010						_66,291.					
eVe	<b>10</b> Ir	ivestment income (Part VIII, col	luma KAN lunga 2 4 an	ارت ا			.97.	13.					
Œ	11 C	ther revenue (Part VIII, column	(A), lines 5, 6d, 8c, 9c	, roc, ang 1 e			74.	2,735.					
	12 T	otal revenue – add lines 8 throi	ugh 11 (must/equal Hat	(A)	, line 12)	108,7	16.	74,139.					
	1 <b>3</b> G	rants and similar amounts paid	(Part IX, column (A), I	nes T-3)									
	14 B	enefits paid to or for members											
ø	<b>15</b> S	alaries, other compensation, er	L										
Se	16a P	rofessional fundraising fees (Pa	art IX, column (A), line	11e)									
Expenses	i	otal fundraising expenses (Part											
ũ	1	ther expenses (Part IX, column		101,4	155	88,040.							
		otal expenses. Add lines 13-17				101,4		88,040.					
				mullin (A), line 25,	,		261.	-13,901.					
	19 R	evenue less expenses Subtrac	time to from line 12										
Net Assets or Fund Balances						Beginning of Y		End of Year					
Ba		otal assets (Part X, line 16)				101,4		<u>87,321.</u>					
1	21 ⊤	otal liabilities (Part X, line 26)					546.	350.					
	22 N	et assets or fund balances. Sut	otract line 21 from line 2	20		100,8	372.	86,971.					
12	rt II	Signature Block	<del></del>				_						
		Under penalties of perjury, I declare that true, correct, and complete Declaration	t I have examined this return,	including accompanying	g schedules and stration of which pres	atements, and to the best	of my know	ledge and belief, it is					
		- 1 1	<b>1</b>	, , , , , , , , , , , , , , , , , , , ,			/						
Sig	gn	- 1 can like	17/			2/10	[[0						
Here		Signature of officer	<i>/</i>			Date							
			Buggs, Treasur	er									
		Type or print name and title	<i></i>										
_			,/		Date	Check if self	Prepar (see in	er's identifying number istructions)					
Pa		Preparer's	1. 1	$\wedge P$ .	1 - /-	employed ►							
Pre- parer's		signature Joseph A.	Schilz (	مور	W/9.	/ AB	P00	150773					
pa Us	rer S	Firm's name (or Joseph A.	Schilz, S.C.										
On		yours if self employed),   6151 S. 1	08th Street			EIN ► 3	9-1572	651_					
<b>-</b> 11		address and	ners, WI 53130			Phone no	(414)	529-2071					
May	the IR	S discuss this return with the pr		see instructions)				K Yes No					
DA.			ustion Ast Matica son t			TEE A01121		Form 990 (2008)					

Form 990 (2008) Wisconsin Society of Professional	39-0768362	Page 2
Part III Statement of Program Service Accomplishments (see instructions)		
1 Briefly describe the organization's mission:		
Support the ethical practice of Professional Engineering.		
2 Did the organization undertake any significant program services during the year which were not listed on the	e prior	
Form 990 or 990-EZ?	Yes X	No
If 'Yes,' describe these new services on Schedule O.		
3 Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? Yes X	No
If 'Yes,' describe these changes on Schedule O.		
4 Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and al expenses, and revenue, if any, for each program service reported.	expenses. Section 501(c)(3) llocations to others, the total	
4a (Code:	Revenue \$	_ )
Wisconsin Professional Engineer Magazine, published five times a	nnually. All mem	bers
of the society receive a copy.	<del></del>	
	<b></b>	- <b></b> -
	_ <b></b>	
		<b>-</b>
4b (Code:) (Expenses \$ including grants of \$) (         Wisconsin professional engineer directory, published annually.         society receive a copy.	Revenue \$All members of th	e) e
4c (Code:) (Expenses \$		) ew 
	<del></del>	
4d Other program services. (Describe in Schedule O.)		
(Expenses \$ including grants of \$ ) (Revenue \$		
4e Total program service expenses ► \$ (Must equal Part IX, Line 25, column (B)	).)	

Pai	rt IV Checklist of Required Schedules		<u>.</u>	uge .
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		Х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule $E$	13		Х
14a	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III  Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
<b>24</b> a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? .	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х

Form.990 (2008) Wisconsin Society of Professional
Part IV Checklist of Required Schedules (continued)

г фи	tty oneckist of required serieddies (continued)			
	,		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
•	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		_X
ı	<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If</i> 'Yes,' <i>complete Schedule L, Part IV</i>	28b		Х
•	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36	. <del>-</del>	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
	<del></del>	C	000	(2000)

Part V	Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1 a Enter Inforr	the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. nation Returns. Enter -0- if not applicable	1a 0			
<b>b</b> Enter	the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
<b>c</b> Did th (gam	ne organization comply with backup withholding rules for reportable payments to vendors bling) winnings to prize winners?	s and reportable gaming	1c		
<b>2a</b> Enter t calend	he number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the ar year ending with or within the year covered by this return	2a 0			
	east one is reported on line 2a, did the organization file all required federal employment	tax returns?	2Ь		
Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retu	rn. (see instructions)			-
	ne organization have unrelated business gross income of \$1,000 or more during the year eturn?	r covered by	3a		Х
<b>b</b> If 'Ye	s' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
4a At an	y time during the calendar year, did the organization have an interest in, or a signature cial account in a foreign country (such as a bank account, securities account, or other fir	or other authority over, a nancial account)?	4a		X
<b>b</b> If 'Ye	s,' enter the name of the foreign country.			`	
See t Finar	he instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Ficial Accounts.	oreign Bank and			
5a Was	the organization a party to a prohibited tax shelter transaction at any time during the tax	year?	5a		X
<b>b</b> Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5b		X
<b>c</b> If 'Ye Prohi	s,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp bited Tax Shelter Transaction?	ot Entity Regarding	5с		
6a Did th	ne organization solicit any contributions that were not tax deductible?		6a		Х
	s,' did the organization include with every solicitation an express statement that such coctible?	ntributions or gifts were not	6b		
7 Orga	nizations that may receive deductible contributions under section 170(c).				
a Did th	ne organization provide goods or services in exchange for any quid pro quo contribution	of more than \$75?	7a		
<b>b</b> If 'Ye	s,' did the organization notify the donor of the value of the goods or services provided?		7b		
<b>c</b> Did th Form	ne organization sell, exchange, or otherwise dispose of tangible personal property for wh 8282?	nich it was required to file	7c		
<b>d</b> If 'Ye	s,' indicate the number of Forms 8282 filed during the year	7d			
<b>e</b> Did th bene	ne organization, during the year, receive any funds, directly or indirectly, to pay premium it contract?	ns on a personal	7e		
f Did th	ne organization, during the year, pay premiums, directly or indirectly, on a personal bene	efit contract?	7 f		
<b>g</b> For a	ll contributions of qualified intellectual property, did the organization file Form 8899 as re	equired?	7g		
<b>h</b> For a	ll contributions of cars, boats, airplanes, and other vehicles, did the organization file a F	orm 1098-C as required?	7h		
8 Section Supplements	on 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sorting organizations. Did the supporting organization, or a fund maintained by a sponsors business holdings at any time during the year?	section 509(a)(3) ring organization, have	8		
9 Secti	on 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			<u>'</u>	
a Did th	ne organization make any taxable distributions under section 4966?		9a		
<b>b</b> Did th	ne organization make any distribution to a donor, donor advisor, or related person?		9b		<u> </u>
10 Secti	on 501(c)(7) organizations. Enter.				
a Initial	ion fees and capital contributions included on Part VIII, line 12	_10a			
<b>b</b> Gross	Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
11 Section	on 501(c)(12) organizations. Enter.				
a Gross	s income from other members or shareholders.	11a			
amou	s income from other sources (Do not net amounts due or paid to other sources against ints due or received from them.)	11 ь			
	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12a	<u> </u>	<u> </u>
	s,' enter the amount of tax-exempt interest received or accrued during the year	12b			<u></u>
BAA			Form	1 <b>990</b> 1	(2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A.	Governing Body and Management						
	For each processe	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, on some some some some some some some some	describe the circumstances,		Yes	No		
1	a Enter the	number of voting members of the governing body	1a 9					
	<b>b</b> Enter the number of voting members that are independent							
2	Did any o	old any officer, director, trustee, or key employee have a family relationship or a business relationship with any other fficer, director, trustee or key employee?						
3	Did the o	rganization delegate control over management duties customarily performed by or u s, directors or trustees, or key employees to a management company or other perso	nder the direct supervision on?	3		<u>x</u>		
4	Did the o	rganization make any significant changes to its organizational documents		4		X		
		prior Form 990 was filed?						
5	Did the o	rganization become aware during the year of a material diversion of the organization	n's assets? .	5		<u>X</u>		
6	Does the	organization have members or stockholders?		6		_X_		
	governing			7a		Х		
	<b>b</b> Are any o	decisions of the governing body subject to approval by members, stockholders, or ot	her persons?	7ь		Χ		
8	Did the o	rganization contemporaneously document the meetings held or written actions under ring.	rtaken during the year by					
i	a The gove	rning body?		8a		<u>X</u>		
	<b>b</b> Each con	nmittee with authority to act on behalf of the governing body?		8ь		X		
9	a Does the	organization have local chapters, branches, or affiliates?		9a		X		
l	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?							
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990					X		
11 —	organızat	iny officer, director or trustee, or key employee listed in Part VII, Section A, who car ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		Х		
Sec	ction B.	Policies						
				-	Yes	No		
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a		X		
ı	<b>b</b> Are office to conflict	rs, directors or trustees, and key employees required to disclose annually interests is?	that could give rise	12b		X		
	Schedule	organization regularly and consistently monitor and enforce compliance with the pol ${\it O}$ how this is done	ıcy? If 'Yes,' describe in	12c		X		
		organization have a written whistleblower policy?		13		X		
14		organization have a written document retention and destruction policy?	•	14		<u>X</u>		
15		rocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent ision.					
		nization's CEO, Executive Director, or top management official?		15a		<u>X</u>		
l		cers of key employees of the organization? .		15b		<u>X</u>		
	Describe	the process in Schedule O. (see instructions)						
16		rganization invest in, contribute assets to, or participate in a joint venture or similar a ing the year?	arrangement with a taxable	16a		X		
l	in joint ve	as the organization adopted a written policy or procedure requiring the organization inture arrangements under applicable federal tax law, and taken steps to safeguard high respect to such arrangements?	to evaluate its participation the organization's exempt	16b				
Sec		Disclosures			,			
17	List the st	tates with which a copy of this Form 990 is required to be filed None	· · · · · · · · · · · · · · · · · · ·					
18	Section 6	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an in Indicate how you make these available. Check all that apply.	d 990-T (501(c)(3)s only) avai	able f	or put	olic		
	`.	website Another's website Upon request						
19		in Schedule O whether (and if so, how) the organization makes its governing docum ts available to the public.	ents, conflict of interest policy	, and	financ	cial		
20		name, physical address, and telephone number of the person who possesses the buggs PO Box 430 Pewaukee WI 53072-0430 (414) 531-58	_	ıızatıo	n.			
			<u></u>		000	2000		
BAA	١			rorm	990 (	<b>∠</b> UU8)		

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

|X| Check this box if the organization did not compensate any officer, director, trustee, or key employee.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)	(c)		(D)	(E)	(F)				
Name and Title	Average hours				k all that apply)			Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099 MISC)	related organizations (W-2/1099 MISC)	compensation from the organization
		tual tr	tonal	_	nploy	st con yee	1			and related organizations
		ustee	trust		ee e	npens				
			ee			ated				
Tracy Pinkowski, P.E.								_		_
Vice President	0				_		<u> </u>	0.	0.	0.
Matthew Richards, P.E.								0.	0.	0.
Vice President James Buggs, P.E.	0		_					0.	0.	
Past President	0							0.	0.	0.
Michael Lefebvre, P.E										
President	0							0.	0.	
John Parisi, P.E.			·							
Treasurer	0							0.	0.	
Chad O'Donnell, P.E.									0	0
Vice President Christopher Stamborski, P.	0							0.	0.	0.
President Elect	0							0.	0.	0.
Angela Hanz, P.E.	-								<u> </u>	
Secretary	0							0.	0.	0.
Glen Schwalbach, P.E.										
Nat'l Delegate	0							0.	0.	0
			_				_			
					_					
			_							
			_		<u> </u>					
						<u> </u>				
	İ									

compensation from the organization >

[1.91	T 418; Statement of Nevende	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a Federaled campaions 1a		revenue		512, 513, 01 514
SIS	1a Federated campaigns 1a 1b				
\$ <u>0</u>	c Fundraising events 1c				
R A	d Related organizations 1d				
5₹	e Government grants (contributions)				
Sign					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 5, 100.				
S S	g Noncash contribus included in lns 1a-1f. \$	5,100.			
	h Total. Add lines 1a-1f  Business Code	3,100.			
PROGRAM SERVICE REVENUE	2a Membership Dues & Assessments	41,669.			41,669.
ĘĘ	b Mathcounts	3,767.	3,767.		
5	c Conferences	5,065.	5,065.		
<u> </u>	d Practice Division, Inc	55.	55.		
E S	e GNPA Income	2,525.	2,525.		
Ş	f All other program service revenue	13,210.	13,210.		
8	g Total. Add lines 2a-2f	66,291.			
	3 Investment income (including dividends, interest and other similar amounts)	13.			13.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	(i) Real (ii) Personal		, , , , , , , , , , , , , , , , , , , ,		
	6a Gross Rents				
	b Less. rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)			······································	
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	<b>b</b> Less' cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
INUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c).				
2	See Part IV, line 18 a				
6	b Less: direct expenses.  c Net income or (loss) from fundraising events		:		İ
	, ,				
	9a Gross income from gaming activities. See Part IV, line 19				
	<b>b</b> Less <sup>,</sup> direct expenses <b>b</b>				
	c Net income or (loss) from gaming activities				
:	10a Gross sales of inventory, less returns and allowances a				
	<b>b</b> Less. cost of goods sold <b>b</b>				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code	166		466.	1
	11a Miscellaneous Income	<u>466.</u> 2,269.		400.	2,269.
	b Prior Period Adjustment	4,203.			2,203.
	d All other revenue				
	e Total. Add lines 11a-11d	2,735.			
		2,133.			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c,	74.139.	24,622.	466.	43,951.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

2	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21			
	Grants and other assistance to individuals in			
	the U.S. See Part IV, line 22			
	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			
4	Benefits paid to or for members			
	Compensation of current officers, directors, trustees, and key employees	0.		
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.		
7 (	Other salaries and wages			
٠,	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)			
9 (	Other employee benefits.			
10 F	Payroll taxes			
11	Fees for services (non-employees) .			
a l	Management			
<b>b</b> i	Legal	315.		 
C /	Accounting			 
d l	Lobbying .		.,	
e l	Prof fundraising svcs. See Part IV, In 17			
f l	nvestment management fees			
_	Other			 
12 /	Advertising and promotion		<u></u>	 
13 (	Office expenses			 
14	nformation technology			 
15 F	Royalties .			 
16	Occupancy .		<del> </del>	
	Travel		<u>.</u>	 
	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,470.		 
19 (	Conferences, conventions, and meetings	6,504.		 
<b>20</b> I	nterest			
<b>21</b> F	Payments to affiliates .			 
22 [	Depreciation, depletion, and amortization			
	nsurance			<del>, ,</del>
á	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 pelow.)			
	Contract Expense	56,932.		 
	Printing and Publications	8,081.		 ·
c_	Postage and Shipping	4,359.		
_	Mathcounts	3,851.		 
e_	Awards	1,729.		 
	All other expenses	4,799.		 
	Fotal functional expenses Add lines 1 through 24f	88,040.	<u> </u>	 
0	Joint Costs. Check here   If following  SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			Form <b>990</b> (2008)

			(A) Beginning of year		(B) End of year	
	1	Cash – non-interest-bearing	65,393.	1	50,715	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	36,025.	4	36,606	
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	, ,,		<del></del>	
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
A	7	Notes and loans receivable, net.		7		
A S E T	8	Inventories for sale or use		8		
Š	9	Prepaid expenses and deferred charges	-	9		
	10 a	Land, buildings, and equipment, cost basis 10a				
		Less. accumulated depreciation. Complete Part VI of				
		Schedule D 10b		10 c		
	11	Investments – publicly-traded securities		11		
	12	Investments – other securities See Part IV, line 11		12	·	
	13	Investments – program-related. See Part IV, line 11		13		
	14	Intangible assets		14	*	
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	101,418.	16	87,321	
	17	Accounts payable and accrued expenses	546.	17	350	
	18	Grants payable .		18		
	19	Deferred revenue.		19		
Ļ	20	Tax-exempt bond liabilities		20		
À	21	Escrow account liability. Complete Part IV of Schedule D		21		
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II				
į		of Schedule L .		22		
E S	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable .		24		
	25	Other liabilities. Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25	546.	26	350	
Ē		Organizations that follow SFAS 117, check here ► X and complete lines				
		27 through 29 and lines 33 and 34.	F2 000	_	40 007	
ASSE	27	Unrestricted net assets	53,908.	27	40,007 46,964	
Ē S	28	Temporarily restricted net assets .	46,964.	28	40,304	
O R	29	Permanently restricted net assets		29		
		Organizations that do not follow SFAS 117, check here  and complete				
F. 720	30	lines 30 through 34.  Capital stock or trust principal, or current funds	•	30		
	31	Paid-in or capital surplus, or land, building, and equipment fund.		31		
BALAZCES	32	Retained earnings, endowment, accumulated income, or other funds		32		
Ň	33	Total net assets or fund balances.	100,872.	33	86,971	
Ĕ	34	Total liabilities and net assets/fund balances.	101,418.	34	87,321	
P <sub>2</sub>	rt X		101/ 1101	<u> </u>		
E.L	1. N. X. A	1 1 maneral statements and reporting			Yes No	
1	Ac	counting method used to prepare the Form 990.	Other			
		ere the organization's financial statements compiled or reviewed by an independent a			2a X	
		ere the organization's financial statements compiled or reviewed by an independent accountant?			2b X	
		· · · · · · · · · · · · · · · · · · ·	/ for oversight of the au	dıt.		
	c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
3	a As	a result of a federal award, was the organization required to undergo an audit or audit Act and OMB Circular A-133?	dits as set forth in the S	ıngle	3a X	
		Yes,' did the organization undergo the required audit or audits?	•		3b	
BA	_		<del> </del>	_	Form <b>990</b> (200	

# Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury

File a separate application for each return.

Internal Revenue	Service	The a separate application for each return.						
If you are	filing for an Automatic 3-Month	Extension, complete only Part I and check this box	<del>-</del>		► X			
	•	omatic) 3-Month Extension, complete only Part II (on	page 2 of this fo	orm).				
-	•	dy been granted an automatic 3-month extension on		•				
		sion of Time. Only submit original (no cop						
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension - check	this box and co	mplete Part I only	, . ▶ 🔲			
All other corp		), partnerships, REMICS, and trusts must use Form 70	004 to request a	nn extension of tin	ne to file			
returns noted the additiona Form 990-T.	l below (6 months for a corporati I (not automatic) 3-month extens	lectronically file Form 8868 if you want a 3-month auto on required to file Form 990-T). However, you cannot ion or (2) you file Forms 990-BL, 6069, or 8870, group y completed and signed page 2 (Part II) of Form 8868 e-file for Charities & Nonprofits.	file Form 8868 or returns, or a c	electronically if (1) omposite or cons	) you want olidated			
	Name of Exempt Organization			Employer identification	n number			
Type or print	Wisconsin Society of Engineers	f Professional		  39-0768362				
File by the	Number, street, and room or suite number	r If a P O box, see instructions		( <u>-, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	_ <del></del>			
due date for filing your	PO Box 430							
return See instructions		ode For a foreign address, see instructions						
	Pewaukee, WI 53072-0	1430						
Check type o	f return to be filed (file a separat							
Form 990		Form 990-T (corporation)	Form 472	0				
Form 990		Form 990-T (section 401(a) or 408(a) trust)	Form 522					
<u>-</u>			Form 606					
<b>⊢</b> ⊣		Form 990-T (trust other than above)	Form 887					
Form 990	<u></u>	Form 1041-A	FUIII 667	<u> </u>				
	s are in the care of ► <u>Jim</u> <u>Bug</u> No ► (414) 531-5875	Igs FAX No. ►						
-		or place of business in the United States, check this			▶□			
-		anization's four digit Group Exemption Number (GEN)		this is for the who	de group			
		the group, check this box						
		ine group, check this box	ui uie names ai	Id Ell45 Of all file!	incis			
	sion will cover.	no for a comparable required to file Form 000 T) outer	naion of timo	<del></del>				
•	•	hs for a corporation required to file Form 990-T) exter						
	ension is for the organization's re	the exempt organization return for the organization return for:	iaitieu abuve.					
	~	starri for.						
	calendar year 20 or	20 0.0 and and 5/20 20	0.0					
	tax year beginning7/01_	, 20 <u>08</u> _, and ending <u>6/30</u> , 20	<u>09</u>					
2 If this ta	ax year is for less than 12 months	s, check reason: Initial return Final re	turn C	hange in accounti	ng period			
3a If this a nonrefu	pplication is for Form 990-BL, 99 ndable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, le	ss any	3a \$	0.			
	pplication is for Form 990-PF or nclude any prior year overpayme	990-T, enter any refundable credits and estimated tax ent allowed as a credit	payments	3b \$	0.			
deposit	<b>Due.</b> Subtract line 3b from line with FTD coupon or, if required, tructions	3a. Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment Sy	d, stem)	3c \$	0.			
Caution. If yo payment instr		c fund withdrawal with this Form 8868, see Form 845	3-EO and Form	8879-EO for				
BAA For Priv	acy Act and Paperwork Reducti	on Act Notice, see instructions.		Form 8868	(Rev. 4-2009)			