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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)

2009

OMB No 1545-0047

Open to Public

			the Treasury ue Service	▶	The organ	ization may have t	o use a copy o	f this return	to satisfy state rep	orting requ	irements	Inspection
Ā			2009 calenda						, 2009, and			, 20
В	Ch	eck nfa	pplicable	Please	C Name of o	rganization SOCIET	Y OF AMERI	CAN MIL	ITARY ENG.			Employer identification no.
	1	dress c	: :	use IRS label or	Doing Busi							43-6073682
\vdash	1	me cha	-	print or		nd street (or P O box if	mail is not delivered	d to street add	ress)	Room/s	uite E	Telephone number
F	ī .	ual retu		type. See	PO BOX	·			•			(913) 484-4821
F	กั	rminate		Specific	City or tow	m, state or country, and	ZIP + 4					Gross receipts
Ē	ī	nended		Instruc- tions.	1 '	CITY, MO 64						\$ 86,620
	Āρ	plicatio	n pending	F Name	and address o	f pnncipal officer CC	L ROGER WI	ILSON JR				·
			, -			PLATTE CITY,				H(a) 1:	s this a group retu iffiliates?	rm for Yes X No
ī	Ta	x-exem	pt status	X 501(c)(3) ◀ (in:	sert no) 4947	(a)(1) or	527		Н(ъ) А	ve all affiliates inc	cluded? Yes No
J	W	ebsite:	► WWW	.SAMEK	ORG					H(c)	Proup exemption	it (see instructions) number
<u>K</u>	Fo	rm of o	rganization	Corporation	Trust	Association X Of	her > CHAPT	TER	L Year of formation	1948	M State of lega	I domicile MO
I	art		Summar	у								
		1	•		-	mission or most s	-					GINEERING SUPPORT
									LATIONSHIPS			
ĉ	G		UNIFORME	D SERVI	CES, PRI	IVATE AND PUE	SLIC SECTOR	R ENGINE	ERS AND RELA	TED PROI	ESSIONAL:	<u>S.</u>
ì	٧	_		-,								
i	e r				-				d of more than 25°		1	1 15
t i	n a	3		_		governing body (F						15
e	n	4							b)			15
2010	e	5							• • • • • • • • •		5	
		7-				venue from Part V					7a	0
20												0
			IVEL UIII EIALE	u Dusilles	3 Idaable IIII	Come from Form 5	30-1, line 34				or Year	Current Year
APR	R	8	Contribution	s and orar	nts (Part VII	I, line 1h)				FIR	4,360	
æ,	e v	9		_							21,412	
	e n	10	-			mn (A), lines 3, 4,					4,585	
SCANNED	u	11				(A), lines 5, 6d, 8c,					8,003	
5	e	12		•		h 11 (must equal F					38,360	67,031
		13				(Part IX, column (A					6,893	5,737
Q	_	14				Part IX, column (A)						0
(N)	X	15	Salaries, oth	er compe	nsation, em	ployee benefits (P	art IX, column ((A), lines 5-	10) • • • • •			0
	р e	16a	Professiona	l fundraisii	ng fees (Par	rt IX, column (A), li	ne 11e)					0
	n	b	Total fundra	ısıng expe	nses (Part I	X, column (D), line	25) 🕨		1,250			
	e	17	Other expen	ises (Part	IX, column ((A), 1994 (A) [1994]			• • • • • • • •		22,757	
	S	18	Total expens	ses Add I	lines 13-17	(m ust equal Part I)	(, column (A)	ne 25) •			29,650	
		19	Revenue les	s expense	es Subtra€	Vine 18 from line	12 · 18	• • • • •	• • • • • • • • • • • • • • • • • • • •		8,710	36,240
N					li	APR 0 2	RS.			Beginning of	Current Year	End of Year
or		20	Total assets		, i	· L		1	• • • • • • • •	<u></u>	216,371	285,595
Fu Bá	nd ¥	21	Total liabilitie	•		: OGDEN	1. <u>U I</u>	1	• • • • • • • • •		016 271	205 505
_	ces	22	Net assets of			trac⊞inë 21 from I	me 20 · · ·		• • • • • • • • •	<u> </u>	216,371	285,595
Ų	Par	<u>t II]</u>	Signatu Under penalti			I have examined this ret	him including acco	mnanwng schi	edules and statements,	and to the hes	of my knowledge	<u> </u>
									all information of which			•
9	ign		/	11.0	Ol_	_					1	3/50/2010
	_		Signatu	re of officer	<u> </u>						Dat	
н	ere	•	K	ENT	ΛΛν	onak i	Treasun					
			Type or	print name a		Crark 1	, 623 074	د اد				
_			December 2				· · · · · · · · · · · · · · · · · · ·	Date	Che	ck if	Preparer's ide	ntifying number
			Preparer's signature	0)/	00/1			self-		(see instructio	,
	aid			' /	~~~	W' Kele		03-2	9-2010	,	1 1004	151677
	•	rer's	Facility 1	/	UNGER	R ASSOCIATES	PC			EIN	>	
U	se O	illy	Firm's name if setf-employ	red),	2303	Higgins, Ste	E PO Box	405			20-29	28762
			address, and	I ZIP + 4	Platt	e City, MO 6	4079			Phone no	D 016 050	
M	ay ti	ne IRS	discuss this	return wit	h the prepa	rer shown above?	(see instruction	ns) · · ·				· · · X Yes No

Form 990 (2009)

<u> Pa</u> 1	rt III. Statement of Program Service Accomplishments Briefly describe the organization's mission
	TO PROMOTE AND FACILITATE ENGINEERING SUPPORT FOR NATIONAL SECURITY BY DEVELOPING AND
	ENHANCING RELATIONSHIPS AND COMPETENCIES AMONG UNIFORMED SERVICES, PRIVATE AND PUBLIC SECTOR
	ENGINEERS AND RELATED PROFESSIONALS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ? · · · · · · · · · · · · · · · · · · ·
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 24,191 including grants of \$ 5,000) (Revenue \$)
	PROMOTE MILITARY ENGINEERING PROFESSION THROUGH ANNUAL AWARDING OF SCHOLARSHIPS AND GRANTS.
4b	(Code) (Expenses \$ 1,630 including grants of \$ 737) (Revenue \$) PROMOTE THE PROFESSIONAL DEVELOPMENT AND LICENSING OF THE YOUNG MEMBER MILITARY ENGINEER.
	PROVIDE REIMBURSEMENT OF THEIR PROFESSIONAL ENGINEERING REFRESHER TRAINING TUITION OR
	TRAINING MATERIALS.
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	, (, , , , , , , , , , , , , , , , ,
4	Other present and upon (Departure of Schooling O.)
4 0	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses > 25,821

Form 990 (2009) SOCIETY OF AMERICAN MILITARY ENG.

43-6073682

Page 2

Part IV.

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 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	_		
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
7	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)	 		X
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	<u> </u>	 	
	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,	Ť		
	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,"	<u> </u>		
	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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable • • • • • • • • • • • • • • • • • • •	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		i	
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tay year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional · · · · · · · · · · · · · · · · · · ·			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? 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
16	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		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		Ī	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

,Pa	rt IV. Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> X</u>	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			۱
04 -	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
_	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	245		
	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		├
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		٠,,
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
00	990-EZ? If "Yes," complete Schedule L, Part I	25b		_ X_
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
20	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			37
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	206		
_		28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	20.		v
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
29 30		25		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		v
24	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Part I · · · · · · · · · · · · · · · · · ·	24		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		Х
32	Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 32		Х
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	- 33		X
34	III, IV, and V, line 1 · · · · · · · · · · · · · · · · · ·	34		v
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			X
33	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	-33		
30	organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		v
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Х
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		v
30	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	31		_X_
38	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
	13. Head, 7 in 1 only 330 file and required to complete concedency		Δ	

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			1
	U.S. Information Returns Enter -0- if not applicable			1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •			l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		}	
	gaming (gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • • 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return? • • • • • • • • • • • • • • • • • • •	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O • • • • • • • • • • • • • • • • • •	3b		L
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country		. 1	1
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts	.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			1
	Prohibited Tax Shelter Transaction?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1
	organization solicit any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			1
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- <u>-</u>		
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ı _	, ,	
_	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	ı İ	.	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e		
	benefit contract?	76 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •			X
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7g		
"	required? • • • • • • • • • • • • • • • • • • •	7h		v
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		\rightarrow	X
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			l
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	\dashv	
10	Section 501(c)(7) organizations. Enter		\dashv	
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·	. 1]	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. 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		1	
J	amounts due or received from them) · · · · · · · · · · · · · · · · · ·		1	į
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ŧ	İ
	If "Yes." enter the amount of tax-exempt interest received or accrued during the year			

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Part VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	ction A. Governing Body and Management			
<u> </u>	Alon A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			- ••-
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • •	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body? • • • • • • • • • • • • • • • • • • •	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	<u> </u>		
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O · · · · · · · · · · · · · · · · · ·	9		Х
Soc	etion B. Policies (This Section B requests information about policies not required by the Internal			21
	enue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	163	X
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
• •	form?	11	x	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	<u> </u>	- 21	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	- -		Λ_
J	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this is done · · · · · · · · · · · · · · · · · · ·	12c		
13	Does the organization have a written whistleblower policy?	13		Х
	Does the organization have a written document retention and destruction policy?	14		X
14	Did the process for determining compensation of the following persons include a review and approval by	'-		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		450		
a L	The organization's CEO, Executive Director, or top management official	15a 15b		X
ь	Carlot officers of Key ChipleyCook of the Chiganization	130		Α.
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement.			
16a	with a taxable entity during the year? • • • • • • • • • • • • • • • • • • •	160		V
		16a		X
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	466		
	the organization's exempt status with respect to such arrangements?	16b		Х
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization KENT DVORAK (913) 484-4821			
	PO BOX 405 PLATTE CITY, MO 64079			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	Position Pos	t s u t s t e	Oif-ce		H c e I o m g mp h p l e e o y t s e t e d	Fore	Reportable compensation trom the organization (W-2/1099-MISC)	Reportable compensation rrom related organizations (W-2/1099-MISC)	Estimated amount of ouner compensation from the organization and related organizations
COL ROGER WILSON JR										
PRESIDENT	2.00			Х			<u> </u>	(0	0
MARK LOES		1								
VICE PRESIDENT	2.00			X					0	0
ANN EWY										
SECRETARY	2.00			Х			<u> </u>	(0_	0
KENT DVORAK						1				
TREASURER	2.00			Х		ļ		(0	0
TOM POER										
PAST PRESIDENT	2.00	X				ļ		(0	0
JERRY ADAMS								İ		1
DIRECTOR	2.00	X.						(0	0
CHRIS PRINSLOW										
DIRECTOR	2.00	X				<u> </u>		(0	0
DAVID HOWE										
DIRECTOR	2.00	X				<u> </u>		_(0	0
MATT METCALF									<u> </u>	
DIRECTOR	2.00	X						(0	0
JEFF CAMPBELL										
DIRECTOR	2.00	X						(0	0
TED HARSIG						ŀ				
DIRECTOR	2.00	X						(0	0
AL OSBORNE	+							:		
DIRECTOR	2.00	Х				<u> </u>		(0	0
JASON MEYERS										
DIRECTOR	2.00	Х				<u> </u>		(0	0
ROSANA PRIVITERA BIONDO										
DIRECTOR	2.00	Х							00	0
JACKIE HACKER										
DIRECTOR	2.00	Х	1	ıl		I	I	(d o	l o

	(A)	(B)	Posit	uon (C)	at apply)		(D) Reportable	(E) Reportable	(F) Estimated			
	Name and Title	Average hours per week	I t d n r r d u r s e v t c i e t d e o u r a o l r	I t nr su t s i t	O f f c e	K	H c e n g m p l e s n y t s e t e d	F	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC		amou	int of ner nsatior n the ization elated	
					ļ 									
						<u>. </u>	<u> </u>							
							ļ			 	_			
	· · · · · · · · · · · · · · · · · · ·													
						_								
					-									
					ļ									_
1b 2	Total							•	0 han \$100,000 in		0			0
_			 .								-	Y	es	No
4	Did the organization list any former officer, director or employee on line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the sum of report the organization and related organizations greater that individual	or such indivintable compe an \$150,000?	dual nsatio	n ar s," c	nd ot	her lete	compe Sched	• • nsat	on from		_	3		X
5	Did any person listed on line 1a receive or accrue cor services rendered to the organization? If "Yes," comp	npensation fr	om an	y un	rela	ted (organiz					5		X
<u>Se</u>	ction B. Independent Contractors Complete this table for your five highest compensated compensation from the organization	•												
	(A) Name and business address	s							(B) Description of s	ervices	c	(C) ompensa		
_						_								
2	Total number of independent contractors (including b more than \$100,000 in compensation from the organi		to thos	se in	sted	abo	ve) wh	io re	ceived				·	

Part Vill

Page 9 (D)

Revenue
excluded from tax
under sections
512, 513, or 514

Part \	W	Statement of Revenue			·				
	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tau under sections 512, 513, or 514
	1a	Federated campaigns · · · · ·		1a	593				
	Ь	Membership dues	-	1b	4,580				
ntri-	c	Fundraising events • • • • •	- F	1c					-
ions, s,	d	Related organizations • • • • •	- F	1d					
nts	e	Government grants (contributions	F	1e					
l er	f	All other contributions, gifts, gran	·				1		[
iar	'	and similar amounts not included		1f					
ounts	g	Noncash contributions included in							
	h					5,173			
	 	7.027.0200			Business Code	-,-,-			-
	2a	MEETINGS			611600	10,781	10,781		
	l	ADVERTISING			611600	3,120	3,120	· · · · · · · · · · · · · · · · · · ·	
gram	1	SMALL BUSINESS		_	611600	3,600	3,600		
vice venue	1	ENGINEER WEEK			611600	532	532		
ra ne		100TH ANNIVERSARY			611600	1,000	1,000		
	_				611600	1,000	1,000		
		All other program service revenue				10.033			
		Total. Add lines 2a-2f · · · · ·				19,033	-		<u> </u>
	3	Investment income (including divid				4 434			
	١.	other similar amounts) • • • • •			<u> </u>	4,434	4,434		
		Income from investment of tax-exe	-	-	L				
	5	Royalties · · · · · · · · · · · · · · · · · · ·	 -	• • •	• • • • • • •		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
	١.		(ı) Real		(ii) Personal				
	1	Gross Rents · · · · · ·		-	<u> </u>				
	1	Less rental expenses · · ·							
	l	Rental income or (loss) • • •							
	ď	Net rental income or (loss)	• • • •	• • •	• • • • • •				
	7a	Gross amount from sales of assets other than inventory	(i) Secuntie	es	(ii) Other				
	ь	Less cost or other basis and sales expenses							
)		Gain or (loss)							
: 1	ı	Net gain or (loss)							
•	i i	Gross income from fundraising							
•	Oa	•							
₹		events (not including \$		_					İ
•		of contributions reported on line 1	•		E7 000				
<i>'</i>		See Part IV, line 18 · · · · ·			57,880				
, 1		Less direct expenses · · · · ·			19,589	20 203	20.001		
1	1	Net income or (loss) from fundrais		s ·	• • • • • • •	38,291	38,291		<u> </u>
•	9a	Gross income from gaming activiti							
		See Part IV, line 19 · · · · · ·							
		Less direct expenses · · · · ·							
	C	Net income or (loss) from gaming	activities	• •					
	10a	Gross sales of inventory, less returns and allowances • • • •		· а					
	ь	Less cost of goods sold · · · ·		- b					
		Net income or (loss) from sales of			• • • • • •]
		Miscellaneous Revenue			Business Code		-		1
	11a	YOUNG MEMBERS			611600	100	100		1
	Ь								1
	, c							 	-
		All other revenue · · · · · ·							
						100			
		Total revenue. See instructions				67,031	61,858		
	12	Town Teveniue, See Instructions		• •	• • • • •	0,,031	01,636	,	1

Part IX. Statement of Functional Expenses

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

	' All other organizations must complete column	n (A) but are not requir	ed to complete colum	ns (B), (C), and (D).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and	-	expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21 · · · ·	5,737	5,737		
2	Grants and other assistance to individuals in	3,737	3,737	-	
_	the U.S. See Part IV, line 22 · · · · · · · · ·				
3	· • • • • • • • • • • • • • • • • • • •		-		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	U.S. See Part IV, lines 15 and 16 · · · · · · · · · Benefits paid to or for members · · · · · · · · · · · · · · · · · · ·				
4					
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions) · · · · ·				
9	Other employee benefits				
10	Payroll taxes • • • • • • • • • • • • • • • • • • •				
11	Fees for services (non-employees)				
а	Management				
b	Legal · · · · · · · · · [
С	Accounting [4,504	2,252	2,252	
d	Lobbying · · · · · · · [
е	Professional fundraising services See Part IV, line 17 • [
f	Investment management fees · · · · · · · · · · ·				
g	Other				
12	Advertising and promotion				
13	Office expenses · · · · · · · · · · · · · · · · · ·				
14	Information technology	3,546	2,128	709	709
15	Royalties				
16	Occupancy · · · · · · · · · · · · · · · · · · ·				
17	Travel · · · · · · · · · · · · · · · · · · ·			· · ·	· · - · ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings · · · · · ·	11,722	11,488		234
20	Interest · · · · · · · · · · · · · · · · · · ·	,			
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				
22	Depreciation, depletion, and amortization			- +	
23	Insurance				· · · · · · · · · · · · · · · · · · ·
23 24	Other expenses Itemize expenses not				
24	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
_	SMALL BUSINESS EXPENSE	2,562	2,562		
a	ENGINEER WEEK	760	760		
D		894	894		
С	CAREER ED AND MENTOR		894	CEO	207
d	COMMITTEES	957		650	307
e	BANK SERVICE CHARGES	109		109	
f	All other expenses		05.00		4 000
25	Total functional expenses. Add lines 1 through 24f · ·	30,791	25,821	3,720	1,250
26	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 · · · · · · · · · · · · · · · · · ·				E 000 (0000)

Form 990 (2009)

.Par	<u>Y</u>	Balance Sheet		,	- <u> </u>
	,		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·		1	
	2	Savings and temporary cash investments	17,944	2	17,609
	3	Pledges and grants receivable, net	· · · · · · · · · · · · · · · · · · ·	3	
	4	Accounts receivable, net		4	·····
	5	Receivables from current and former officers, directors, trustees, key	······································		
		employees, and highest compensated employees. Complete Part II of			
		Schedule L · · · · · · · · · · · · · · · · · ·	reference in an annual desirable of the state of the second	5	
	6	Receivables from other disqualified persons (as defined under section			···
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
A S		Part II of Schedule L	to the transfer and the same at the second of the same	6	
s	7	Notes and loans receivable, net		7	····
e t	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			······································
		other basis Complete Part VI of Schedule D · · · · · 10a			!
	b	Less accumulated depreciation • • • • • • • • • • • • • • • • • • •		10c	
	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	198,427	11	267,986
	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)	216,371	16	285,595
	17	Accounts payable and accrued expenses		17	
	18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
L	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities		20	
a b	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
į	22	Payables to current and former officers, directors, trustees, key	· · · · · · · · · · · · · · · · · · ·		
i i		employees, highest compensated employees, and disqualified			
t		persons Complete Part II of Schedule L	The state of the s	22	
i e	23	Secured mortgages and notes payable to unrelated third parties		23	
s	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117, check here X and			
NF		complete lines 27 through 29, and lines 33 and 34.		1 1	
e u	27	Unrestricted net assets	94,334	27	111,054
t n d	28	Temporarily restricted net assets	122,037	28	174,541
A	29	Permanently restricted net assets		29	···
s B		Organizations that do not follow SFAS 117, check here			
s a e I		and complete lines 30 through 34.			
t a	30	Capital stock or trust principal, or current funds		30	
s n c	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
о е	32	Retained earnings, endowment, accumulated income, or other funds		32	
rs	33	Total net assets or fund balances	216,371	33	285,595
	34	Total liabilities and net assets/fund balances	216,371	34	285,595

Form	990 (2009) SOCIETY OF AMERICAN MILITARY ENG. 43-60	073682	. F	age 1
Pa	rt XIs Financial Statements and Reporting			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	· · · · 2a	X	
b	Were the organization's financial statements audited by an independent accountant?	· · · 2i	,	X
С	If "Yes" to line 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?	20	: x	
	If the organization changed either its oversight process or selection process during the tax year, explain in	···		
	Schedule O	į	-	1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1
	issued on a consolidated basis, separate basis, or both	ł	-	
	Separate basis X Consolidated basis Both consolidated and separate basis			1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	ı	X

3b

Form 990 (2009)

EĘA

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

See separate instructions.

2009

Open to Public Inspection

OMB No 1545-0047

▶ Attach to Form 990 or Form 990-EZ. Internal Revenue Service Name of the organization Employer identification number 43-6073682 SOCIETY OF AMERICAN MILITARY ENG. 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 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 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 5 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) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X 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) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated d Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 1100 (iii) A 35% controlled entity of a person described in (i) or (ii) above? 1100 Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported ■ EIN (E) Type of organization (v) Did you notify (vi) is the (vii) Amount of organization in col (i) listed in your (described on lines 1-9 the organization in organization in col support above or IRC section governing document? (i) organized in the col (i) of your US? support? (see instructions)) Yes Yes Nο No Yes No

Total

Schedule A (Form 990 or 990-EZ) 2009 SOCIETY OF AMERICAN MILITARY ENG. 43-6073682 Page 2 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) Section A. Public Support

Caler	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each						
	person (other than a governmental unit or						1
	publicly supported organization) included						<u> </u>
	on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from In 4	·					
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4 · · · · · · · ·						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) · · · · · · · · · ·						
11	Total support. Add lines 7 through 10 •						
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here						▶□
<u>Sec</u>	tion C. Computation of Public Su	<u>ipport Percen</u>	tage				
14	Public support percentage for 2009 (line 6,						%
15	Public support percentage from 2008 Schei					15	%
16a							. —
	and stop here. The organization qualifies a		-				• • • • • • • • • • • • • • • • • • •
b	33 1/3% support test - 2008. If the organiza					•	. —
	box and stop here. The organization qualification						• • • • • • • • • • • • • • • • • • •
17a	10%-facts-and-circumstances test - 2009.	-					
	more, and if the organization meets the "fac			•	•		_
	organization meets the "facts-and-circumsta		•				• • • • • □
b	10%-facts-and-circumstances test - 2008.	•			•		
	more, and if the organization meets the "fac			•	•		
	organization meets the "facts-and-circumsta				-		• • • • • □
18	Private foundation. If the organization did n	ot check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see i	nstructions • •	• • • • • □

Page 3

Part III . Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,131	4,291	17,772	4,360	5,173	44,727
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	11,828	90,284	30,540	21,412	19,033	173,097
3	Gross receipts from activities that are not an unrelated trade or bus under sec 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	Total. Add lines 1 through 5 · · · · · ·	24,959	94,575	48,312	25,772	24,206	217,824
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons ••••						
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						
C	Add lines 7a and 7b · · · · · · · · ·			_			
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·						217,824
	ction B. Total Support				r"		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total 217,824
9 10a	Amounts from line 6	24,959	94,575	48,312	25,772	24,206	217,824
	rents, royalties and income from similar sources	3,118	6,033	19,603	7,223	4,334	40,311
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b • • • • • • • •	3,118	6,033	19,603	7,223	4,334	40,311
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						258,135
14	First five years. If the Form 990 is for the organization, check this box and stop here	ganization's first, se	econd, third, fourth	, or fifth tax year a	s a section 501(c)(3)	▶ □
Se	ction C. Computation of Public Su	pport Percent	tage				
15	Public support percentage for 2009 (line 8, c				• • • • • • • •	15	84.38 %
16	Public support percentage from 2008 Sched		·			16	%
	ction D. Computation of Investme	nt Income Per	centage	olumn (f))		17	15.62 %
17	Investment income percentage for 2009 (line investment income percentage from 2008 Sc					18	15.62 %
18 19a	33 1/3% support tests - 2009. If the organiza	ition did not check	the box on line 14,	and line 15 is mor		nd line	
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests - 2008. If the organization 19 is not more than 33 1/3%, check this	ition did not check	a box on line 14 or	line 19a, and line	16 is more than 33	3 1/3%, and	▶ □
20	line 18 is not more than 33 1/3%, check this Private Foundation: If the organization did n		_				

SCHEDULE C

(Form 990 or 990-6Z)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Section 527 organizations Complete Part I-A only

▶ Complete if the organization is described below.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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2009

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•	e organization answered "Yes," to Form 99 Section 501(c)(3) organizations that have	filed Form 5768 (election under section	501(h)) Complet	e Part II-A Do not complet	
•	Section 501(c)(3) organizations that have	NOT filed Form 5768 (election under se	ection 501(h)) Co	mplete Part II-B Do not co	mplete Part II-A
If the	e organization answered "Yes," to Form 9	90, Part IV, line 5 (Proxy Tax), then			
•	Section 501(c)(4), (5), or (6) organizations	Complete Part III			
Na	me of organization			Employer id	entification number
sc	CIETY OF AMERICAN MILITARY E	NG.		43-607	3682
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or i	s a section 527 orga	anization.
1	Provide a description of the organization				
2	Political expenditures · · · · · · ·				
3	Volunteer hours · · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •			
Pa	rt I-B Complete if the organ	ization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excise tax incurr	ed by the organization under section 49	955 • • • • •	· · · · · · • \$	
2	Enter the amount of any excise tax incurr				
3	If the organization incurred a section 495				· Yes No
4a	Was a correction made?				· Yes No
b	If "Yes," describe in Part IV			_	
Pa	rt I-C Complete if the organ	ization is exempt under secti	on 501(c), ex	cept section 501(c)(3).
1	Enter the amount directly expended by the				
	activities · · · · · · · · · · · · · · · · · · ·		• • • • • • • • •	• • • • • • • • • • • • • • • • • • •	
2	Enter the amount of the filing organizatio				
	527 exempt function activities • • • • •			• • • • • • • • • • • • • • • • • • •	
3	Total exempt function expenditures Add				" '
	line 17b • • • • • • • • • • • • • • • • • • •				
4	Did the filing organization file Form 1120-	-POL for this year?		· · · · · · · · · · · · · · · · · · ·	· Yes No
5	State the names, addresses and employe				nents
	were made. For each organization listed,	enter the amount paid from the organia	zation's funds. Alse	o enter the amount of politi	cal
	contributions received that were promptly	and directly delivered to a separate po	litical organization	i, such as a separate segre	egated
	fund or a political action committee (PAC) If additional space is needed, provide	information in Pa	irt IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-

che	duie C (Form 990 or 990-EZ) 2009 SOCIETY OF A	MERICAN MILIT	ARY ENG.		43-6073	682 Page 2
Pa	Complete if the organization	on is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (ele	ction
	under section 501(h)).				· · · · · · · · · · · · · · · · · · ·	
١ ١	Check ▶ ☐ if the filing organization belongs	o an affiliated group)			
3 (Check if the filing organization checked	box A and "limited o	ontrol" provisions ap	ply	,	
	Limits on Lob	bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" n				organization's totals	group totals
1a	Total lobbying expenditures to influence public		,	• • • • • • • • •		
ь	Total lobbying expenditures to influence a legis	• •		• • • • • • • • •		
C	Total lobbying expenditures (add lines 1a and 1					
đ	Other exempt purpose expenditures · · · ·		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •		··· · · · · · · · · · · · · · · · · ·
e	Total exempt purpose expenditures (add lines			• • • • • • • • •		
T	Lobbying nontaxable amount Enter the amoun	t from the following	table in both			
	columns					
	If the amount on line 1e, column (a) or (b) is:		nontaxable amount	is:		
	Not over \$500,000		nount on line 1e			
	Over \$500,000 but not over \$1,000,000		15% of the excess of			
	Over \$1,000,000 but not over \$1,500,000		10% of the excess of			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess ov	ver \$1,500,000		
لــــــــــــــــــــــــــــــــــــــ	Over \$17,000,000 Grassroots nontaxable amount (enter 25% of li	\$1,000,000				
g	·					
h :	Subtract line 1g from line 1a If zero or less, ent Subtract line 1f from line 1c If zero or less, ent					
i	If there is an amount other than zero on either I		the organization file	Form 4720 reporting		
,	section 4911 tax for this year?		-			☐Yes ☐No
	Section 4911 tax for this year.					
	•	l-Year Averaging Pe	eriod Under Section	501(h)		
	(Some organizations that			•	f the five	
	columns belo	w. See the instructi	ons for lines 2a thro	ugh 2f on page 4.)		
	Lobb	ying Expenditures	During 4-Year Averag	ging Period		
			1	T		
	Calendar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
	beginning in)					
_						
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column (e))			ļ		
_	Total labburgs avengeditures					
С	Total lobbying expenditures					
٦.	Grassroots nontaxable amount	•				
d	Grassioots Horitaxable afficult					
е						
	(150% of line 2d, column (e))					· · · · ·
f	Grassroots lobbying expenditures					

Pa	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
	(election under Section 50 I(II)).		(a)		(b)	· · · · · ·
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local	T				
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
а	Volunteers?		X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х			
С	Media advertisements? • • • • • • • • • • • • • • • • • • •		X			
d	Mailings to members, legislators, or the public?	L	X			
е	Publications, or published or broadcast statements?		X			
f	Grants to other organizations for lobbying purposes?		X			
g	Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • •		X			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? • • • • • • • • • • • • • • • • • • •		X			
i	Other activities? If "Yes," describe in Part IV		X			
j	Total Add lines 1c through 1: · · · · · · · · · · · · · · · · · ·	ļ				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? • • • • • • • • • • • • • • • • • • •		X		······································	
þ	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes" enter the amount of any tax incurred by organization managers under section 4912 • • • • • • • • • • • • • • • • • • •					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	<u>rt III-A</u> Complete if the organization is exempt under section 501(c)(4), section 501(:)(5),	or se	ection		
	501(c)(6).				,	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		L
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		ļ
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Pa	complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines."				ed	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		<u> </u>			
	expenses for which the section 527(f) tax was paid).					
а	Current year · · · · · · · · · · · · · · · · · · ·	• •	2a			
b	Carryover from last year		2b			
С	Total · · · · · · · · · · · · · · · · · · ·	• •	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues • • • • • • • • • • • • • • • • • • •	• •	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?	• •	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	• •	5			
Pa	rt IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line complete this part for any additional information	11				
Also,	complete this part for any additional information					
					-	
				<u></u>		
				<u>-</u> -		
						_,

SCHEDULE D (Form \$90)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

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ASTILLE (or the organization	Employer Identification number
<u>soc</u>	IETY OF AMERICAN MILITARY ENG.	43-6073682
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or the organization answered "Yes" to Form 990, Part IV, line 6	Accounts. Complete if
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year · · · · · · · · · · · · · · · · · · ·	<u> </u>
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year · · · · · · · · ·	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control? • • • • • • • • • • • • • • • • • • •	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	
<u>Par</u>		⁷ , line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically	•
	Protection of natural habitat Preservation of a certified hist	oric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a con	servation
	easement on the last day of the tax year	· · · · · · · · · · · · · · · · · · ·
		Held at the End of the Tax Year
а	Total number of conservation easements • • • • • • • • • • • • • • • • • • •	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06 · · · · · · · · · · · · L	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	zation during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	П., П.,
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	year
_	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the yea	r
_	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	□ v □ v .
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statem	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	describes
	the organization's accounting for conservation easements	
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered "Yes" to Form 990, Part IV, line 8	er Similar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance s	heet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance shee	t works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p	ublic service,
	provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	· · · · > \$
	(ii) Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	
	following amounts required to be reported under SFAS 116 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	···· > \$
	Assets included in Form 990. Part X · · · · · · · · · · · · · · · · · ·	

Sched	ule D (Form 990) 2009 SOCIETY OF AMER	ICAN MILITARY	ENG.		43-6073	3682 Page 2
Par	t 🐃 Organizations Maintaining	Collections of	Art, Historical	Treasures, or	Other Similar A	ssets (continued)
3	Using the organization's acquisition, accession,					
	collection items (check all that apply)					
а	Public exhibition	d 🗌 Loai	n or exchange progr	rams		
ь	Scholarly research	e Othe	er			
С	Preservation for future generations	_				
4	Provide a description of the organization's colle	ctions and explain he	ow they further the o	organization's exem	pt purpose in	
	Part XIV					
5	During the year, did the organization solicit or re	eceive donations of a	irt, historical treasur	es, or other similar		
	assets to be sold to raise funds rather than to b	e maintained as part	of the organization'	s collection?		· · Yes No
Par	t IV Escrow and Custodial Arra					
	Part IV, line 9, or reported an amoun					
1a	Is the organization an agent, trustee, custodian	or other intermedian	for contributions of	r other assets not		
	included on Form 990, Part X?					· · Yes No
ь	If "Yes," explain the arrangement in Part XIV an	d complete the follow	ving table			
				Γ	Am	ount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year · · · · · ·				1e	
f	Ending balance · · · · · · · · · · · · · · · · · · ·				1f	
2a	Did the organization include an amount on Forr	n 990, Part X, line 21	?			· Yes No
ь	If "Yes," explain the arrangement in Part XIV					
Par	t V Endowment Funds. Complete	if the organization ai	nswered "Yes" to Fo	orm 990, Part IV, line	e 10	
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	198,427				
b	Contributions · · · · · · · · · · · · · · · · · · ·	34,274				
С	Net investment earnings, gains, and losses •	41,072				
d	Grants or scholarships	5,737				1
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses	50				
g	End of year balance	267,986			T	
2	Provide the estimated percentage of the year e	nd balance held as			•	
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ %					
С	Term endowment ▶ %					
3a	Are there endowment funds not in the possessi	on of the organizatio	n that are held and	administered for the	!	
	organization by					Yes No
	(i) unrelated organizations · · · · · · ·					- 3a(i) X
	(ii) related organizations · · · · · · · ·					- 3a(ii) X
b	If "Yes" to 3a(ii), are the related organizations li	sted as required on S	Schedule R? • • •			- 3b X
4	Describe in Part XIV the intended uses of the o	rganization's endown	nent funds			
Par	t VI Investments - Land, Buildi	ngs, and Equip	ment. See Form	990, Part X, line 10		
	Description of investment	(a) Cost or other		st or other (c) Accumulated	(d) Book value
		(investme		s (other)	depreciation	
1a	Land · · · · · · · · · · · · · · · · · · ·	• • •				
b	Buildings	• • •				
c	Leasehold improvements • • • • • • • • • • • • • • • • • • •					
d	Equipment					
е	Other • • • • • • • • • • • • • • • • • • •					
Total	. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X,	column (B), line 10)(c)) · · · · ·	· · · · · • •	

Part 😂 Investments - Other Securities.	See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives · · · · · · · · · · · · · · · · · · ·	•		_
Closely-held equity interests			_
Other			_
			_
			_
			_
			_
			_
			_
			-
			-
			-
Total. (Column (b) must equal Form 990 Part X. col. (B) line 12.)	.		-
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	1		-
	1		-
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
			_
			_
			_
			_
			_
			
			_
			_
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	e 15		
(a)	Description	(b) Book value	
			_
			_
			_
			_
			_
······			-
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		-
Part X Other Liabilities. See Form 990, Part X,			-
1 (a) Description of liability	(b) Amount		_
Federal income taxes	(5) / 1/100/11		
	-		
	 		
	 	1	
	 		
		{	
	 	-	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			_
2. FIN 48 Footnote In Part XIV, provide the text of the footno	te to the organization's financial sta	atements that reports the	
organization's liability for uncertain tax positions under EIN 48			

SOCIETY OF AMERICAN MILITARY ENG.

Schedule D (Form 990) 2009

43-6073682

Page 3

Sched	ule D (Form 990) 2009 SOCIETY OF AMERICAN MILITARY ENG.	43-6073682	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses · · · · · · · · · · · · · · · · · ·	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities • • • • • • • • • • • • • • • • • • •		
С	Recoveries of prior year grants	7	
đ	Other (Describe in Part XIV)		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	į į	
b	Other (Describe in Part XIV) • • • • • • • • • • • • • • • • • •		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	-
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
þ	Other (Describe in Part XIV)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Pa	rt XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b	•	
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
this p	part to provide any additional information		

SOCIETY OF AMERICAN MILITARY ENG.

43-6073682

SCHEDULE G <(For #>990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

OCIETY OF AMERICAN N	ILITARY 1	ENG.			43-6	5073682
Part I Fundraising Activitien Form 990-EZ filers are not	es.Complete if the	e organizatio ete this part	n answered	l "Yes" to Form 990, P	art IV, line 17	
Indicate whether the organization ra						
a Mail solicitations		е [_	of non-government g		
b Internet and email solicitations		f [of government grants		
c Phone solicitations		g 🗀		ndraising events		
d In-person solicitations		٠		3		
2a Did the organization have a written	or oral agreemen	t with any indi	vidual (incl	udıng officers, directoi	s, trustees	
or key employees listed in Form 99	-	-		-		es No
b If "Yes," list the ten highest paid ind					_	
to be compensated at least \$5,000				-		
(i) Name of individual	(iii) Activity	(E) Did fundi		(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
or entity (fundraiser)		custody or contribu		from activity	(or retained by) fundraiser listed in	(or retained by) organization
		Contained	idono.		col (i)	Organization
		Yes	No			
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Tatal			_			
Total · · · · · · · · · · · · · · · · · · ·				or has been potified if	is exempt from	1
registration or licensing	on is registered of	i ilcensed to s	Olicit fullus	or has been notined in	is exempt from	
registration of licensing						
						
						
	·					
	<u>. </u>					
				<u> </u>		

Schedule G (Form 990 or 990-EZ) 2009

Рa	ræ	Fundraising Events. Cor more than \$15,000 on Form 99	nplete if the organization a 0-EZ, line 6a List events w	inswered "Yes" to Form 99 with gross receipts greater t	0, Part IV, line 18, or report than \$5,000	ed		<u></u>
R	•		(a) Event #1 VP DINNER (event type)	(b) Event #2 INDUSTRY DAY (event type)	(c) Other Events 1 (total number)	(d) Tota Add col (a		h
e v e n u e	2	Gross receipts Less Charitable contributions	15,400	35,900	6,580		57,88	10
		Gross revenue (line 1 minus line 2)	15,400	35,900	6,580		57,88	0
D	4	Cash prizes • • • • • • • • • • • • • • • • • • •						
r e	5	Non-cash prizes · · · · · ·	 					
c t	6	Rent/facility costs • • • • • •						
E	7	Food and beverages · · · · ·						
p e n	8	Entertainment • • • • • • • • • • • • • • • • • • •				 		 -
s e s	9	Other direct expenses · · · ·	4,430	12,120	3,039		19,58	9
		Direct expense summary Add lines Net income summary Combine line					19,58 38,29	<u> </u>
Pa	rt III	Gaming. Complete if the or than \$15,000 on Form 990-EZ		to Form 990, Part IV, line	19, or reported more	,		
Ke>ecae			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gar col (a) thro		
	1	Gross revenue						
D-rect	2	Cash prizes						
E	3	Non-cash prizes						
penses	4	Rent/facility costs • • • • • •						
S	5	Other direct expenses · · · · ·	Yes %	Yes %	Yes %			
	6	Volunteer labor • • • • • • • • • •	No No	No No	No No	· · ·		
	7	Direct expense summary Add lines	2 through 5 in column (d)			()
	8	Net gaming income summary Com	bine line 1, column (d), an	d line 7 · · · · · · ·			1	
9		er the state(s) in which the organization licensed to operate g				9a	Yes	No
b		o," Explain	gaming activities in each of	Titlese states		34		
		e any of the organization's gaming	licenses revoked, suspend	led or terminated during the	e tax year?	· · · · 10a		
b	If "Y	es," Explain						
11	Doe	s the organization operate gaming a	activites with nonmembers	7		11	-	

formed to administer charitable gaming?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity

SCHEDULE I		Gra	Grants and Other Assistance to Organizations,	Assistance to	Organization	S,		OMB No 1545-0047
(Form 990)		Gove	Governments, and Individuals in the United States	ndividuals in	the United Sta	ites		2009
Department of the Treasury		Complete	Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.	nswered "Yes," to Form	990, Part IV, line 21 or	22.	<u></u>	Open to Public
Internal Revenue Service							Emolover identification number	Inspection
SOCIETY OF AMERICAN MILITARY ENG.	ZAN MILITARY ENG	r.					43-6073682	•
1 -1	General Information on Grants and Assistance	rants and Assista	ınce					
1 Does the organizat	tion maintain records to	substantiate the amor	o.	tance, the grantees' e	eligibility for the grants			
the selection criterical Describe in Part IV	the selection criteria used to award the grants or assistance. Describe in Part IV the organization's procedures for monitorir	ants or assistance / cedures for monitoring	the selection criteria used to award the grants of assistance?	the United States	grant funds in the United States		•	X Tes
Part II Grants an	Grants and Other Assistance to Governments an Form 990, Part IV, line 21, for any recipient that received more tha	nce to Governme	nts and Organizat	tions in the Unit	id Organizations in the United States. Complete if the organization \$5,000 Check this box if no one recipient received more than \$5,000 Use	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000	wered "Yes" to	
Part IV and S	Part IV and Schedule I-1 (Form 990) if additional space is needed) if additional space is	· · · · · · papaau			:		★ · · · · · · · · · · · · · · · · · · ·
1 (a) Name and address of organization or government	s of organization ment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						(a)		
2 Enter total number 3 Enter total number	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government organizations	ations				A A	
<u> </u>	perwork Reduction Act	t Notice, see the Instru	ctions for Form 990.				3	Schedule I (Form 990) 2009

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of SCHOLARSHIPS - EACH OF THE FOUR RECIPIENTS RECEIVED \$1,000 FOR A TOTAL OF \$4,000 PGE REFRESHER COURSE - VARIOUS RECIPIENTS RECEIVED A TOTAL OF \$1,296 (c) Amount of cash grant ENGINEER CAMP - VARIOUS RECIPIENTS RECEIVED A TOTAL OF \$903 Use Part IV and Schedule I-1 (Form 990) if additional space is needed (b) Number of recipients SCIENCE FAIR WINNERS RECEIVED A TOTAL OF \$300 01. Monitoring procedures (Part I, line 2) OTHER GRANTS AND ALLOCATIONS (a) Type of grant or assistance **DECEMBER 31, 2008** Part IV

Schedule I (Form 990) 2009

EEA

. Page**⁻2**

43-6073682

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

SOCIETY OF AMERICAN MILITARY ENG.

Schedule I (Form 990) 2009

Part III

Schedule I (Form 990) 2009 (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Use Part IV and Schedule I-1 (Form 990) if additional enace is analysed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of EEA (c) Amount of cash grant Use Part IV and Schedule I-1 (Form 990) if additional space is needed (b) Number of recipients SAME LEADERSHIP WORKSHOP PROVIDED A TOTAL OF \$394 (a) Type of grant or assistance Part IV Part III

Page -2

Schedule ! (Form 990) 2009

SCHEDULE O (Fora: 990)

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
SOCIETY OF AMERICAN MILITARY ENG.	43-6073682
01. Form 990 governing body review (Part VI, line 11)	
IT IS THE POLICY OF THE POST TO ADHERE TO THE HIGHEST STANDARDS OF ETHICAL CO	NDUCT IN ALL
ITS ACTIVITIES. THE POST FULLY SUPPORTS AND EXPECTS STRICT COMPLIANCE BY EVE	RY MEMBER
WITH ALL APPLICABLE LAWS AND REGULATIONS IN THE CONDUCT OF BUSINESS AND PROFE	SSIONS. THE
POST RECOGNIZES THAT MEMBERS WHO REPORESENT THE GOVERNMENT IN MATTTERS AFFECTING THE	
ECONOMIC INTERESTS OF OTHERS HOLD SPECIAL POSITIONS OF PUBLIC TRUST REQUIRING	THEM TO
OBSERVE THE HIGHEST ETHICAL STANDARDS. ACCORDINGLY, THE POST SUPPORTS THE PR	INCIPLE THAT
STRICT IMPARTIALITY MUST PREVAIL IN ALL BUSINESS RELATIONSHIPS INVOLVING THE GOVERNMENT.	
02. Governing documents, etc, available to public (Part VI, line 19)	
THE ORGANIZATION MAKES GOVERNING DOCUMENTS AVAILABLE UPON REQUEST AND ON THEI	R WEBSITE.
	