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Form , 990

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

2010

Department of the Treasury

Open to Public

Interna	il Revenu	le Service	► The organizatio	n may have to use	a copy of this return	to satisfy state repo	rting requiremen	its.	inabecriou		
A F	or the	2010 calend	lar year, or tax year begin	nning		, 2010, and en	ding		, 20		
В	heck if a	pplicable:	C Name of organization SOC	IETY OF AMER	ICAN MILITARY	ENG.		D Emp	ioyer identification no.		
	ddress c	* *	Doing Business As					43-6	6073682		
□ ۥ	lame cha	ange	Number and street (or P O bo	x if mail is not delivered	to street address)		Room/suite	E Tele	phone number		
ٰٰ ∐	nitial retur	m	PO BOX 405					(913	3) 492~7777		
☴ .	erminate		City or town, state or country,	and ZIP + 4					189,484		
=	mended		PLATTE CITY, MO					G Gros	ss receipts \$		
=		n pending	F Name and address of princip	nal officer CHRIST	TOPHER PRINSLO	W	T				
<u></u>	фричин	ii poitoing	SAME AS C ABOVE				H(a) is this a gro affiliates?	up return for	Yes X No		
	ax-exem	not estature: 🔯	501(c)(3) 501(c) () ◀ (insert no)	4947(a)(1) or	527	¬1	ates included?			
	Vebsite:		SAMEKC, ORG	/ (mserrio) [521	If "No," atta	ch a list (see i nption number	Instructions)		
				ociation X Other	► CHAPTER	1 V	140		1/0		
		rganization		ociation X Other	CHAPTER	L Year of formation 19	M State	of legal domici	lie 110		
Pa		Summar	y ibe the organization's miss		nant actualties. MO	DDOMONE AND E	ACTI TIDAMID I	NOTHER	TNC CHIDDODE		
	1	-				· · · · · · · · · · · · · · · · · · ·					
Α			ONAL SECURITY BY I			·····			MONG		
e G t o		UNIFORME	D SERVICES, PRIVA	TE AND PUBLIC	SECTOR ENGIN	EERS AND RELA	red Profess	IONALS.			
i y											
Vе	2	Check this b	ox 🕨 🔛 if the organization	discontinued its o	perations or dispose	d of more than 25%	of its net assets	1			
ţ 'n	3	Number of v	oting members of the gove	erning body (Part V	/I, line 1a)		· · · · · · · ·	3	14		
e n	4	Number of it	ndependent voting membe	rs of the governing	body (Part VI, line 1	b) • • • • • • • •	· · · · · · ·	4	14		
8 C	5	Total number	er of individuals employed i	n calendar year 20	010 (Part V, line 2a)			5	0		
٤ "	6	Total number	or of volunteers (estimate d	necessary) · · ·				6	_		
	7a	Total unrela	ted business revenue from	Part VIII, column	(C), line 12 · · · ·			7a	(3,512)		
	ь	Net unrelate	d business taxable income	from Form 990-T	line 34 · · · · · · · · · · · · · · · · · ·			7b	0		
					RECEIVED		Prior Year		Current Year		
R	8	Contribution	s and grants (Part VIII, line	1h) · · • · · ·	RECEIVE	ol · · · · t		,173	13,978		
v	9		vice revenue (Part VIII, lin	' 1		<u> </u>		,033	170,462		
9	10		income (Part VIII, column (1		,434	4,774		
ü	11		ue (Part VIII, column (A), ii					, 391	(3,242)		
е	12		ie - add lines 8 through 11	1 1		—		,031	185,972		
	+			 		321		,737			
	13		similar amounts paid (Part					, /3/	7,077		
E	14	-	d to or for members (Part I		•	-					
X	15		ner compensation, employe			-10) _			<u> </u>		
ė			I fundraising fees (Part IX,		•		2 55.3 (52)	. 10 5 5.	<u> </u>		
n s	ь		ising expenses (Part IX, co			17,225					
e	17	•	ises (Part IX, column (A), I	•	•	· · · · · · ·		,370	86,445		
3	18	Total expens	ses Add lines 13-17 (mus	t equal Part IX, co	lumn (A), line 25) 🔹	· · · · · · <u>· · · · </u>	33	,107	93,522		
	19	Revenue les	s expenses. Subtract line	18 from line 12 ·			33	, 924	92,450		
Net						E	Segmaning of Current 1	rear	End of Year		
Asset	^S 20	Total assets	(Part X, line 16) · · · ·			[285	, 595	409,014		
Fund	21	Total liabiliti	es (Part X, line 26) · · ·	• • • • • • • •					0		
Bal- ances	22	Net assets	or fund balances. Subtract	line 21 from line 2	20		285	, 595	409,014		
Pä	rt II	Signatu	re Block	 							
Under	penaltie	s of perjury, I dec	dare that I have examined this retu								
and b	ellef, il is	true, correct, and	complete Declaration of prepare	r (other than officer) is b	ased on all information of w	hich preparer has any kno	wledge.				
	İ	\ // ₄	file Col	-				04	-01-2011		
Sig	n I	Signatu	re of officer					Date			
Her	- 1	KE	No A Avors	To	Asurer						
2 -+161	٠		print name and title	//4	JASUTE IC						
<u> </u>				B	0 1 11	Date	T _C	W D701			
4			eparer's name D HALES	Preparer a signature	D011	04-01-2011	Check _	I PTIN	アヤミノココ		
Pai				AGGOCTAMBO	Tares	04-01-2011	self-employ	-	0451677		
	parer		DOC 97707770 077 7 70 707 405								
¥US€	Only	Firm's addre			PO BOX 405		Phone no.	10-038-3	7505		
-				ity MO 64079							
			s return with the preparer s	<u>_</u>		· · · · · · · · · · · ·		• • • • • •	X Yes No		
	D		ion Act Notice can the c						E 000 (0040)		

	990 (2010) SOCIETI OF AMERICAN MILITARI ENG. 43-00/3002 Fage 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	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? · · · · · · · · · 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
	services? · · · · · · · · · · · · · · · · · · ·
4	If "Yes," describe these changes on Schedule O.
•	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 \$ 72,043 including grants of \$ 3,077) (Revenue \$)
	PROMOTE MILITARY ENGINEERING PROFESSION THROUGH ANNUAL AWARDING OF SCHOLARSHIPS AND GRANTS.
4b	(Code:) (Expenses \$ 1,677 including grants of \$ 4,000) (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 \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 73,720

43-6073682

# €	IT TV- Checklist of Required Schedules			
	In the cannot be described in a still \$204/-\/0\ - 4047/-\/4\ /-thth		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 2	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)			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		v
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	•		X
4	election in effect during the tax year? If "Yes," complete Schedule C, Part II • • • • • • • • • • • • • • • • • •	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	4		
3	or similar amounts as defined in Revenue Procedure 98-197 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	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		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			X
•	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,"	,		
Ü	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			
J	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV · · · · · · · · · · · · · · · · · ·	9		l v
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			X
	quasi-endowments? If "Yes," complete Schedule D, Part V · · · · · · · · · · · · · · · · · ·	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	- 16 1 3 4 1 15 1 1 4 1		
••	VII, VIII, IX, or X as applicable		1-1-1	
:	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	SAUD	د کیلئے ی	GEO 19
	Schedule D, Part VI · · · · · · · · · · · · · · · · · ·	11a		х
1	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	11b		Х
	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	11c		х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			<u> </u>
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX · · · · · · · · · · · · · · · · · ·	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X · · · · · ·	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12a		Х
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		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, Parts I and IV	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, Parts II and IV	16		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, Parts III and IV · · · · · · · · · · · · · · · · · ·	16		Х
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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II · · · · · · · · · · · · · · · · · ·	18	l	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	1	х
20a		20a		Х
k				
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20Ь	1	1

Pal	TIV 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>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			l
	United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III · · · · · · · · · · · · · · · · ·	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			l
	organization's current and former officers, directors, trustees, key employees, and highest compensated			l
	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			ĺ
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			ĺ
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ĺ
	to defease any tax-exempt bonds? · · · · · · · · · · · · · · · · · · ·	24c		<u></u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? • • • • • • • • • • • • • • • • • • •	24d		L
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			ĺ
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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			l
	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?			
	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,	1-15-11 1-15-11 1-15-11	ار ایکورین ا	強溫
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).		走	於 監 監 記 記 記 に に に に に に に に に に に に に
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b	İ	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		·	
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		<u> </u>	<u> </u>
	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	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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		-	
••	sections 301.7701-2 and 301.7701-37 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, fine 1 · · · · · · · · · · · · · · · · · ·	34		х
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	_	X
а	Did the organization receive any payment from or engage in any transaction with a			 ^
u	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		1	
	Part V, line 2 · · · · · · · · · · · · · · · · · ·	ĺ		ŀ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
50	organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-50	 	 ^-
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI · · · · · · · · · · · · · · · · · ·	37		\ v
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	"		X
38	19? Note. All Form 990 filers are required to complete Schedule O	38	\ v	1
			X	<u> </u> (2010)
	EEA	1 0111	・フラレ	(4UIU)

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			.ጠ
	Official in desicultie of contains a response to any question in this fact v		Yes	1 350
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable • • • • • • • • • 1a	577.7		海
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable · · · · · · · · · · 1b		9.316	整新
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners? · · · · · · · · · · · · · · · · · · ·	1c	X	2117457-57
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	43	1.5	SC24
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • 2a	71.6%		1145
ь	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 (see instructions)	4-1-125v	4147	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O · · · · · · · · · · · · · · · · · ·	3b		
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: >	्रा स् क्रीफ		至透
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	1/4-11/2		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? • • • • • • • • • • • • • • • • • • •	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible? • • • • • • • • • • • • • • • • • • •	6b		
7	Organizations that may receive deductible contributions under section 170(c).	ا مران مراز الرواد	,	震調
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Sec.	7.1472	X5.53
	and services provided to the payor?	7a	ļ	X
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 required to file Form 8282? • • • • • • • • • • • • • • • • • • •	- -		١.,
_		7c	2 () () () () ()	X
d	If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·	7e	-3	
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f	<u> </u>	X
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	X
g h	If the organization received a contribution of cars, boats, aliplanes, and other vehicles, did the organization file a Form 1098-C?	7h	-	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	10000	ব্যাল	
u	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1		
	organization, have excess business holdings at any time during the year?	8	77.55	38,21
9	Sponsoring organizations maintaining donor advised funds.	- 12 - 20.	"Piretal"	J(1) 4
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a	عادة والمعادة	ومنظم
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	77.15.5	ريماعد او د د د د د د د د د د د د د د د د د د د	5-16
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·	125	25	
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		75.13	1.25
11	Section 501(c)(12) organizations. Enter	7 Table		三里
а	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			逐門
	amounts due or received from them.) · · · · · · · · · · · · · · · · · · ·		11.00	5.4
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? • • • • • • • • • • • • • • • • • • •	12a		1
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year · · · · · · · 12b	4	1250ml	是到
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	148.7		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		學學	华温
b	Enter the amount of reserves the organization is required to maintain by the states in which	談		
	the organization is licensed to issue qualified health plans · · · · · · · · · · · · · · · · · · ·			惊問
C	Enter the amount of reserves on hand	13 A)	建門	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
-h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	146	i	1

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Governing Body and Management No 14 b Enter the number of voting members included in line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 X Does the organization have members, stockholders, or other persons who may elect one or more members 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • • • Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached 9 at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 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? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. α., 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 X 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? 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b 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 the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MO Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► KENT DVORAK (913) 492-7777

PO BOX 405 PLATTE CITY, MO 64079

_			
Form	990	(2010	"

SOCIETY OF AMERICAN MILITARY ENG.

43-6073682

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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.

- 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, if any. 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 neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A)	(B)			(0)			(O)	(E)	(F)
Name and Title	Average					at apply)	_	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	It dintring the control of the contr	l n r	l f	Key employee	Hce i om phples sny tse tse t	Forfer	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) AL OSBORNE										
DIRECTOR	2.00	Х			_			(0	0
(2) DAVID HOWE		1								
DIRECTOR	2.00	X						(0	0
(3) DOUG ONEIL			ŀ							
DIRECTOR	2.00	X		L		ļ		(0	0
(4) JASON MEYERS		1								
DIRECTOR	2.00	X	<u> </u>	L.	_				0	0
(5) JESSIE MILLER										
DIRECTOR	2.00	X	_	_	L	<u> </u>	L		0	0
(6) MARK LOES									_	_
PAST PRESIDENT	2.00	X	<u> </u>	<u> </u>	_		ldash		0	0
(7) REX OSTRANDER	1			1	Ì				_	_
DIRECTOR	2.00	X		┞	╙	-	<u> </u>		0	0
(8) RICHARD MCCOLLUM									_	
DIRECTOR	2.00	X	_	$oldsymbol{oldsymbol{oldsymbol{eta}}}$	<u> </u>		<u> </u>		0	0
(9) ROB RASTOFER	1			İ				1]	ĺ _
DIRECTOR	2.00	X	ļ	ـــ	<u> </u>	ļ	<u> </u>	· · · · · · · · · · · · · · · · · · ·	0	0
(10)ROBERT CRAIN										
DIRECTOR	2.00	X	┞-	 	├	├	<u> </u>		0	0
(11)CHRISTOPHER PRINSLOW			1]	1]	
PRESIDENT	2.00	<u> </u>	1	X	1	┼	.	 	0	0
(12)JACKIE HACKER SECRETARY	2.00			١,]					o
(13)KENT DVORAK	2.00	 	-	X	╄	╁	├	``	1	
TREASURER	2.00			١,	,		ĺ			
(14)MATT METCALF	2.00	-	├-	X	+	┼─	╁	<u> </u>	1	-
VICE PRESIDENT	2.00			١.,		1	ŀ	1		
**************************************	2.00	 	-	X	╁	┼	├	 		<u>_</u>
(15)					-	1				
(16)							T			

Page 8

Par	Section A. Officers, Directors, Trustees,	Key Emplo	yees,	and	Hig	hes	t Com	pen	sated Employees	(continued)	·
	(A)	(B)			(0	7)		İ	(D)	(E)	(F)
	Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	ltd nri dur ise vtc let	l t n r s u t s	01100	K	H c e l omplengene ghpo e n e t s e t e d	F o r m e r	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(17)				-							
(18)											
(19)	AVID										
(20)							**********				
(21)											
(22)											
(23)											
(24)											
(25)											
(26)											
(27)											
(28)											
1b	Sub-total · · · · · · · · · · · · · · · · · · ·		• • •	• •	• •			>			
C	Total from continuation sheets to Part VII, Section	n A • •	• • •	• •	• •	• •	• • •			}	
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but not limited reportable compensation from the organization	to those liste	ed abo	ve)	who	rece	eived r	nore	than \$100,000 in	J	0 0
		-44 1				- -					Yes No
3	Did the organization list any former officer, director of employee on line 1a? If "Yes," complete Schedule J										· S X
4	For any individual listed on line 1a, is the sum of reporting organization and related organizations greater the	ortable comp	ensati	on a	and (othe	r com	ens	ation from		
5	Individual										4 X
Ð	for services rendered to the organization? If "Yes," or										5 X
Sec 1	tion B. Independent Contractors Complete this table for your five highest compensate							/ed i	more than \$100,00	00 of	
	compensation from the organization.										
	(A) Name and business address	s							(B) Description of	services	(C) Compensation
2	Total number of independent contractors (including t		d to th	ose	liste	ed at	oove) v	who	received		
	more than \$100,000 in compensation from the organ	ization 🕨		_							是把自己的政治的问题

Part \	VIII	Statement of Revenue						
起軸部		的位置。在一种对外的代码的	발판판	MTERNIED E	(A)	(B)	(C)	(D)
的表示					Total revenue	Related or exempt	Unrelated business	Revenue excluded from tax
ELLINE S			Harry Target in The Land Target in the	阿拉斯里 注题	1	function revenue	revenue	under sections 512, 513, or 514
	1a	Federated campaigns · · · · ·	· · fa	275	"继续"落实"会"	1. 是一点	的是清洁是	医斯克斯特氏
	b	Membership dues · · · · · · ·	· · 1b	5,553	[國際主義學者	等。 新年 25 新原子以下。	The second second	
Contri- butions,	С	Fundralsing events · · · · · ·	· · 1c	8,150	品源在海里的			
gifts,	d	Related organizations · · · · ·	· • 1d				是法国联邦的	
grants	e	Government grants (contributions)	· · 1e			医囊性肠结节		
and other		All other contributions, gifts, grants,		***************************************			的是否是法法	国地語主義的
similar	•	and similar amounts not included a	· I					自然至明重新
amounts	g	Noncash contributions included in I	·		The state of the s		是一個一個	
	h	Total. Add lines 1a-1f			13,978			
			·· ·· ·· · · · · · · · · · · · · · · ·	Business Code	HATE WELL		La de la companya de	2430年10年10日
	2a	MEETINGS		611600	13,509	13,509		Latitation of Charling Control
		ADVERTISING		611600	5,516			
Program	-	SMALL BUSINESS		611600	65,366			
Service Revenue	4	VICE PRESIDENT DINNER		611600	6,570	<u> </u>		
11010100	ءَ ا	INDUSTRY DAY		611600	67,751			
•	,	All other program service revenue •		611600	11,750			·····
		Total. Add lines 2a-2f · · · · ·			170,462			24 24 EV 31 1 16
	9			<u>P</u>	170,402	The first that the state of the	Part of the state	1 22 - 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	3	Investment income (including divide		, and	4 774	4 774		
		other similar amounts) · · · · ·			4,774	4,774		
	4	Income from investment of tax-exem	•					
	5	Royalties			79506.2.211 3 1 C +47551-7	9-545	في جريو الا الوجائدية عرايي	s a se de dec le ma
		One of Breat	(i) Real	(ii) Personal				
	i	Gross Rents · · · · · ·						
	1	Less: rental expenses · · · ·					经验证	
	1	Rental income or (loss) · · ·		L	A deministration of military	医性性性变形的		Transfer at a second at a second
	d	Net rental income or (loss) · · · ·	• • • • • •	• • • • • • •	5 - 15 - 17 - 152 - 17			
	7a		Secunties	(ii) Other		14.15.15.15.15.15.15.15.15.15.15.15.15.15.	新疆山东西	
		assets other than inventory						
	ь	Less: cost or other basis				国语建筑器	"是是我们的 "	
0		and sales expenses · · · ·						
t	i	Gain or (loss)						
h	d	Net gain or (loss) · · · · · · · ·	• • • • •	• • • • • • • •				
ŗ	8a	Gross income from fundraising					高雪 高速	
ь		events (not including \$	8,150		The first of the second			经证金额股
R		of contributions reported on line 1c)						
v	ļ	See Part IV, line 18 · · · · · · ·	\cdots a					[56] "斯特斯斯
e n	b	Less: direct expenses · · · · ·	· · · · b	3,512				
ü	C	Net income or (loss) from fundraising	g events •		(3,512		/2 514)
е	9a	Gross income from gaming activities	S.				· 在原本地位	
		See Part IV, line 19 · · · · · ·	· · · · a					
	Ь	Less: direct expenses \cdots	· · · · b					
	C	Net income or (loss) from gaming ac	ctivities · ·	• • • • • • •		1	}	
	10a	Gross sales of inventory, less					الرحة (أول و أو من المعارض الراج و المعارض المعارض المعارض المعارض المعارض المعارض المعارض المعارض المعارض ال	1-17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		returns and allowances · · · · ·	a		STORY TO			
	b	Less. cost of goods sold	• • • • ь		· · · · · · · · · · · · · · · · · · ·			
	С	Net income or (loss) from sales of in	ventory · ·	• • • • • • •		The second second second second		The season of th
		Miscellaneous Revenue		Business Code	DETERMINE	· 不是不是不是		1966年1970日
	11a	YOUNG MEMBERS		611600	270			The state of the s
	ь							
	C				· · · · · · · · · · · · · · · · · · ·			
	1	All other revenue					· · · · · · · · · · · · · · · · · · ·	
	1	Total, Add lines 11a-11d · · · ·			270		the contract the second	into the property
	1	Total revenue. See instructions •			185,972			
	<u>, . ~ _ </u>			.	1,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	₁ , 0

43-6073682

Form 990 (2010)

Statement of Functional Expenses

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) (A) Total expenses **(B)** Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and 4,269 organizations in the U.S. See Part IV, line 21 . . . 4,269 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · 2,808 2,808 Grants and other assistance to governments, 3 organizations, and individuals outside the U.S See Part IV, lines 15 and 16 · · · · · Benefits paid to or for members · · · · · · · 5 Compensation of current officers, directors, trustees, and key employees · · · · · · · Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) · · · · · · 7 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 10 Fees for services (non-employees) Legal 3,270 1,635 1,635 Lobbying 建筑设备 "" Professional fundraising services. See Part IV, line 17 · Investment management fees · · · · · · · · · · · · g 12 Office expenses · · · · · · · · · 13 Information technology · · · · · · · · 1,056 845 106 105 14 15 16 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 30,883 14,224 16,659 19 Conferences, conventions, and meetings 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization Insurance 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) SMALL BUSINESS EXPENSE 43,158 43,158 3,985 CAREER ED AND MENTOR 3,985 YOUNG MEMBERS EXPENSE 1,677 1,342 168 167 NATIONAL DIRECTOR EXPENSE 1,723 1,379 172 172 COMMITTEE EXPENSE 75 123 122 320 373 373 93,522 73,720 2,577 17,225 Total functional expenses. Add lines 1 through 24f · · Joint Costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part X	Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	•	1	
2	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·		2	64,393
3	Pledges and grants receivable, net	•	3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		Egi.	
	employees, and highest compensated employees. Complete Part II of			
	Schedule L · · · · · · · · · · · · · · · · · ·	•	5	
6	Receivables from other disqualified persons (as defined under section			· 1875年1878年1878年1878年1
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
A s	employers and sponsoring organizations of section 501(c)(9) voluntary			
s	employees' beneficiary organizations (see instructions)	•	6	
e 7	Notes and loans receivable, net		7	
s 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	•	9	
10a	Land, buildings, and equipment: cost or	Autor of Carman Street Control of Carman	7 (17)	TOTAL SECTION AND SECTION
1	other basis. Complete Part VI of Schedule D · · · · · 10a	一直在他们的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个		
ь	Less: accumulated depreciation • • • • • • • 10b		10c	311 - 112 a 22,1126 - 11 . 1
11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	. 267,986	11	344,621
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) · · · · · · · · ·		16	409,014
17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·		17	
18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
. 19	Deferred revenue · · · · · · · · · · · · · · · · · · ·		19	
20	Tax-exempt bond liabilities		20	
a 21	Escrow or custodial account liability. Complete Part IV of Schedule D · · · · ·		21	1
b 22	Payables to current and former officers, directors, trustees, key	1. 文章: "是一个。"	3453	THE THE PROPERTY OF
i	employees, highest compensated employees, and disqualified		25.00 24.11	
<u> </u>	persons. Complete Part II of Schedule L	# Themselve 1975/75 277 327 773	22	ही है कि कि कार्यों के कि कि कि कि कि कि के कि के कि कि कि कि कि कि कि कि कि कि कि कि कि
23	Secured mortgages and notes payable to unrelated third parties · · · · · · ·		23	
e 24	Unsecured notes and loans payable to unrelated third parties · · · · · · · · ·		24	
S 25	Other liabilities. Complete Part X of Schedule D · · · · · · · · · · · · · · · · · ·		25	
26	Total liabilities. Add lines 17 through 25		26	0
	Organizations that follow SFAS 117, check here▶ 🗓 and	The state of the state of the	5,354	and the state of the second
F	complete lines 27 through 29, and lines 33 and 34.		12.74	
u 27	Unrestricted net assets · · · · · · · · · · · · · · · · · · ·	. 111,054	27	175,284
n 21 d 28	Temporarily restricted net assets		28	233,730
29	Permanently restricted net assets • • • • • • • • • • • • • • • • • • •		29	
8	Organizations that do not follow SFAS 117, check here ▶		1000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a	and complete lines 30 through 34.			
a 20	Capital stock or trust principal, or current funds	ार के प्राप्तिती के विद्यार्थित की	30	Profession and Pauli Trade Conta
·"	Pald-in or capital surplus, or land, building, or equipment fund		31	
ا م	Retained earnings, endowment, accumulated income, or other funds		32	
s 32	Total net assets or fund balances · · · · · · · · · · · · · · · · · · ·		33	409,014
33			-	409,014
34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	- 200,095	34	409,014

Form	990 (2010) SOCIETY OF AMERICAN MILITARY ENG.	43-60736	82	Page 12
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			· · [X]
1	Total revenue (must equal Part VIII, column (A), line 12) · · · · · · · · · · · · · · · · · · ·	- 1	185,	972
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	93,	522
3	Revenue less expenses. Subtract line 2 from line 1	. 3	92,	450
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	285,	595
5	Other changes in net assets or fund balances (explain in Schedule O)	. 5	30,	969
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B)) • • • • • • • • • • • • • • • • • •	. 6	409,	014
Pai	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			$\cdot \cdot \Box$
1	Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		Ye	S No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? • • • • • • • • • • • • • • • • • • •	• • • • • •	• 2a }	<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		· 2b	X
C	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? • • • • •	• • • • • •	· 2c }	ζ
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		11.	超過
	issued on a separate basis, consolidated basis, or both.		で発展し	到認識
	Separate basis X Consolidated basis Both consolidated and separate basis			會同意
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	Х
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		· 3b	
	EEA		Form 99	0 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Employer identification number

2010

Open to Public Inspection

SOC	IET?	OF AMERICAN N	AILITARY ENG.	•					43-6	073682		<u></u>	
Pai	rt l	Reason for	Public Charity	Status (All organiza	tions must	complete	this part.)	See instr	uctions.				_
The	orgar			use it is: (For lines 1 thro									
1		A church, convention	of churches, or as	ssociation of churches of	escribed in	section	170(b)(1)(A)(i).					
2		A school described in	n section 170(b)(1)(A)(II). (Attach Schedu	le E)								
3		A hospital or a coope	erative hospital ser	vice organization descri	bed in sec	tion 170(t	o)(1)(A)(ili)						
4		A medical research of	organization operat	ted in conjunction with a	hospital d	escribed i	n section '	170(b)(1)(A)(iii). Ent	er the hosp	oital's na	ame,	
		city, and state					_						_
5		An organization oper	ated for the benefi	t of a college or univers	ity owned o	or operate	d by a gov	emmental	unit descri	ibed in			
		section 170(b)(1)(A)	(iv). (Complete Pa	art II.)									
6		A federal, state, or lo	cal government or	governmental unit desc	ribed ın se	ction 170)(b)(1)(A)(\	/).					
7		An organization that	normally receives	a substantial part of its	support fro	m a gover	nmental u	nit or from	the gener	al public			
		described in section	170(b)(1)(A)(vi). ((Complete Part II)									
8		A community trust de	escribed in section	י <mark> 170(b)(1)(A)(vi). (C</mark> om	plete Part	I I.)							
9	X	An organization that	normally receives:	(1) more than 33 1/3%	of its supp	ort from o	ontribution	s, membe	rship fees,	and gross			
		receipts from activitie	es related to its exe	empt functions - subject	to certain	exceptions	s, and (2) ı	no more th	an 33 1/39	% of its			
		support from gross II	nvestment income	and unrelated business	taxable in	come (less	s section 5	11 tax) fro	m busines	ses			
		acquired by the orga	nization after June	30, 1975. See section	509(a)(2).	(Complete	e Part III.)						
10		An organization orga	nized and operate	d exclusively to test for	public safe	ty. See se	ection 509	(a)(4).					
11		An organization orga	nized and operate	d exclusively for the ber	efit of, to p	erform th	e functions	of, or to	carry out th	е			
_		purposes of one or n	nore publicly suppo	orted organizations desc	cribed in se	ction 509	(a)(1) or se	ection 509	(a)(2) See	section			
-•		509(a)(3). Check the	box that describes	s the type of supporting	organizatio	on and cor	mplete line	s 11e thro	ugh 11h				
		a 🔲 Typel	в 🔲 Туре				ılly integrat		ď	~··	I-Other		
е		,	•	organization is not contro		•			-				
		persons other than for	oundation manage	rs and other than one o	r more pub	licly suppo	orted organ	nizations d	lescribed in	n section			
		509(a)(1) or section											
f		If the organization re	ceived a written de	etermination from the IR	S that it is	a Type i, `	Type II, or	Type III s	upporting				
		organization, check t						••				_	_
		•			• • • • •							• • • • • [_
g		Since August 17, 20		zation accepted any gift	or contribu	tion from			••••	• • • • •		••••[_
g		Since August 17, 20 following persons?	06, has the organia				any of the		••••	• • • • •		[_
g		Since August 17, 20 following persons? (i) A person who do	06, has the organia	controls, either alone o	r together	with perso	any of the		••••	• • • • •		Yes No	_
g		Since August 17, 20 following persons? (i) A person who deand (iii) below,	06, has the organia lirectly or Indirectly the governing body	controls, either alone o	r together	with perso	any of the				11g()	Yes No	
g		Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A famuly memb	06, has the organial lirectly or Indirectly the governing body er of a person desc	controls, either alone o y of the supported organ cribed in (i) above? • •	r together vization?	with perso	any of the				11g(i)	Yes No	
		Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlle	06, has the organialized of the governing body or faperson desired entity of a person	controls, either alone or y of the supported organ cribed in (i) above? • • un described in (i) or (ii)	r together sization?	with perso	any of the					Yes No	
		Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family membol (III) A 35% controlled Provide the following	lirectly or indirectly the governing body er of a person design entity of a person information about	controls, either alone or y of the supported organ cribed in (i) above? • • on described in (i) or (ii) the supported organization.	r together sization? above?	with perso	any of the	ed in (ii)			11g(E) 11g(E)		
	0 0	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlle	06, has the organialized of the governing body or faperson desired entity of a person	controls, either alone or y of the supported organ cribed in (i) above? • • un described in (i) or (ii)	r together sization?	with perso	any of the	ed in (ii)	(vi) li		11g(E) 11g(E) (V5)	Yes No	
	0 0	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? above: tion(s).	with perso	any of the ons describ	ed in (ii)	(vi) li organizati	on in col. ed in the	11g(E) 11g(E) (V5)	Amount of	
	0 10	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • • on described in (i) or (ii) the supported organization (described on lines 1-9	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
_h	0 1	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ation(s). (w) Is the o	with perso	any of the ons describ	ed in (ii)	(vi) li organizati	on in col. ed in the	11g(E) 11g(E) (V5)	Amount of	
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h	() h	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
_h	0 1	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
(A)	0 ^	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
h	0 ^	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
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(A)	0 1	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together vization? above? ition(s). (in) Is the o	rganization ted in your ocument?	any of the	ed in (ii) ou notify zation in of your port?	(vi) li organizati (i) organiz	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	
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(A) (B) (C)	0 1	Since August 17, 20 following persons? (i) A person who do and (iii) below, (ii) A family memb. (iii) A 35% controlled Provide the following lame of supported.	lirectly or indirectly the governing body er of a person design entity of a person information about	or controls, either alone or y of the supported organ cribed in (i) above? • • • on described in (i) or (ii) the supported organization (described on lines 1-9 above or IRC section	r together rization?above? - ntion(s). (M) Is the o in col. (i) Ils governing d Yes	rganization ted in your ocument?	(v) Did you the organical (i) Yes	ed in (ii) ou notify zation in of your out? No	(vi) li organizati (i) organiz U ! Yes	on in col. ed in the 3 ?	11g(E) 11g(E) (V5)	Amount of	

Partill Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	ion A. Public Support		·				
Calen	dar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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	建学等等的	计通数性主义			是是是	
	person (other than a governmental unit or					是實際發展的	
	publicly supported organization) included					非常推荐建立	
	on line 1 that exceeds 2% of the amount	加强的建筑工			"是我们是这种的		
	shown on line 11, column (f)	解隐语的图像	数。其其自身各种		J. A. C. C. C. C. C. C. C. C. C. C. C. C. C.	The state of the s	
6	Public support. Subtract line 5 from In 4	四年生生大学	电影流图数分别	建长成立 国内产品	的数数数数	的影響學語	
Sec	tion B. Total Support						
Caler	ıdar year (or fiscal year beginning in) ▶	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) 2010	(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						4,4,,
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 -		温暖温红	是是其实其中	主要的数据的	いる。	
12	Gross receipts from related activities, etc	(see instructions)	• • • • • • • • •		• • • • • • • •	12	
13	First five years. If the Form 990 is for the organization, check this box and stop her	organization's first	t, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	· · · · ▶□
Sec	tion C. Computation of Public Su	ipport Percen	tage			, ,	
14	Public support percentage for 2010 (line 6						<u> %</u>
15	Public support percentage from 2009 Sch					15	%
16a	33 1/3% support test - 2010. If the organ	ization did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, c	heck this box	. —
	and stop here. The organization qualifies		_	• • • • • • • •	• • • • • • • • •		• • • • • • • • • • • • • • • • • • •
b	33 1/3% support test - 2009. If the organ	ization did not che	ck a box on line 13	or 16a, and line 1	5 is 33 1/3% or me	ore, check this	
	box and stop here. The organization qual						• • • • • • □
17a	10%-facts-and-circumstances test - 201	0. If the organizati	on did not check a	box on line 13, 16	ia, or 16b, and line	14 is 10% or	
	more, and if the organization meets the "fa	acts-and-circumsta	inces" test, check	this box and stop	here. Explain in Pa	art IV how the	_
	organization meets the "facts-and-circums		•				▶ 🔲
ь	10%-facts-and-circumstances test - 200						
	more, and if the organization meets the "fa	acts-and-circumsta	inces" test, check	this box and stop	here. Explain ın Pa	art IV how the	
18	organization meets the "facts-and-circums Private foundation. If the organization di						
	-						

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 or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	4,291	17,772	4,360	5,173	5,828	37,424
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	90,284	30,540	21,412	19,033	84,391	245,660
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 · · · · · ·	94,575	48,312	25,772	24,206	90,219	283,084
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.)						283,084
	ction B. Total Support	M					
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9		94,575	48,312	25,772	24,206	90,219	283,084
1V8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,033	19,603	7,223	4,334	4,774	41,967
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b · · · · · · · ·	6,033	19,603	7,223	4,334	4,774	41,967
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.)	100,608	67,915	32,995	28,540	94,993	325,051
14	First five years. If the Form 990 is for the organization, check this box and stop here		second, third, four	th, or fifth tax year	as a section 501(c)(3)	▶ □
	ction C. Computation of Public Su						
15	Public support percentage for 2010 (line 8,	• • •	•	177		15	87.09 %
16	Public support percentage from 2009 Sched				• • • • • • • • •	16	84.38 %
	ction D. Computation of Investme			antima (6)		47)	12 01 .:
17 40	Investment income percentage for 2010 (lin		•	column (t))		17	12.91 %
18	Investment income percentage from 2009 S	,				18	15.62 %
	33 1/3% support tests - 2010. If the organi 17 is not more than 33 1/3%, check this box	and stop here. T	he organization qu	ialifies as a publici	y supported organ	ization · · · · ·	· · · · ▶ 🕱
a	33 1/3% support tests - 2009. If the organi line 18 is not more than 33 1/3%, check this						· · · · ▶ 🔲
20	Private Foundation: If the organization did	not check a box of	n line 14, 19a or 1	19b. check this box	and see instruction	ons · · · · ·	▶ 🗂 -

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

ection 527

2010

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations. Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

	sorganization answered "Yes," to Form Section 501(c)(4), (5), or (6) organizations		onn 990-E2, Part	v, line ssa (Proxy Tax), u	1611
	of organization			Employer ide	ntification number
so	CIETY OF AMERICAN MILITARY E	ing.		43-6073	3682
Pa	t I-A Complete if the organi	zation is exempt under secti	on 501(c) or is	a section 527 organ	ization.
1	Provide a description of the organization	s direct and indirect political campaigr	activities in Part I	V • • • • • • • • • • • • • • • • • • •	
2	Political expenditures · · · · · · ·			▶ \$	
3	Volunteer hours · · · · · · · ·				
Pa	Complete if the organi	zation is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excise tax incur				
2	Enter the amount of any excise tax incur				
3	If the organization incurred a section 495	i5 tax, did it file Form 4720 for this yea	r? • • • • • • •		· Yes No
4a	Was a correction made?		• • • • • • • •	• • • • • • • • • • • •	· Yes No
_ b	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the organi	ization is exempt under secti	<u>on 501(c), exc</u>	ept section 501(c)(3),
1	Enter the amount directly expended by the				
	activities · · · · · · · · · · · · · · · · · · ·		• • • • • • • •	· · · · · · · • * *	
2	Enter the amount of the filing organization				
	527 exempt function activities · · · ·			· · · · · · ▶ \$	
3	Total exempt function expenditures Add				
	line 17b • • • • • • • • • • • • • • • • • • •				
4	Did the filing organization file Form 1120				
5	Enter the names, addresses and employ				
	organization made payments. For each				
	the amount of political contributions rece	, , , ,	•	•	
	as a separate segregated fund or a politi	ical action committee (PAC). If addition	nal space is neede	d, provide information in P	art IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount pard 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

EEA

Sche	dule C (Form 990 or 990-EZ) 2010 SOCIETY OF A	MERICAN MILITA	ARY ENG.		43-6073	1682 Page 2
Pa	Complete if the organization	n is exempt un	der section 501	(c)(3) and filed	Form 5768 (elec	tion under
	section 501(h)).				·	
Α	Check if the filing organization belongs t	o an affiliated group				
В	Check if the filing organization checked	box A and "limited c	ontrol" provisions ap	ply.		
	Limits on Lob	bying Expenditure	s		(a) Filing	(b) Affiliated
	(The term "expenditures"	means amounts pa	id or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public	opinion (grass roots	lobbying) - · · ·	• • • • • • • •		
ь	Total lobbying expenditures to influence a legis	• •				
C	Total lobbying expenditures (add lines 1a and 1					·- · · · · · · · · · · · · · · · · · ·
d	Other exempt purpose expenditures · · · ·					
8	Total exempt purpose expenditures (add lines	ic and 1d) · · · ·	• • • • • • • • •			
f	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	: The lobbying	nontaxable amoun	t is :		建设建设的规模
	Not over \$500,000	20% of the am	ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	/er \$1,500,000		
	Over \$17,000,000	\$1,000,000.			1450年,新加州	於此的。當時經濟語
9	Grassroots nontaxable amount (enter 25% of li	ne 1f) • • • • • •	• • • • • • • • • •			
h	Subtract line 1g from line 1a If zero or less, en	ter -0- · · · · ·				
i	Subtract line 1f from line 1c If zero or less, ent	er <i>-</i> 0- · · · · · ·				
j	If there is an amount other than zero on either	line 1h or line 1i, did	the organization file	Form 4720		
	reporting section 4911 tax for this year?				• • • • • • • • • •	Yes No
		L Voor Avoroning D	eriod Under Sectio	- E01(h)		
	(Some organizations that				all of the five	
			tions for lines 2a th			
			5 1 47	- In Body		
	LODE	ying Expenditures	During 4-Year Ave	raging Period		
	Calendar year (or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
	beginning in)					
	<u> </u>					
2a	Lobbying nontaxable amount					
	Labbaira asilina amanak	Frankling block of the section of th	an contract of the		· 特别的 2014年5月201	
D	Lobbying ceiling amount (150% of line 2a, column (e))				14400000000000000000000000000000000000	
		- 地方地面一樓上面上戶。	Lifeting Constitution 1 (47) as and	a grade de legistra de propies e la	E BEETST TO CONTRACTOR SET 1	
С	Total lobbying expenditures					
	Grassroots nontaxable amount					
- u	Grassious nomazable dinount					
е	Grassroots ceiling amount	理論思導理語	不能达到 2016年100	心理感到的	為對於國際主義	
	(150% of line 2d, column (e))	State of the second of the	是到一个		据的是法律证	
f	Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) (a) No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. Volunteers? X Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X X Х Publications, or published or broadcast statements? X X X Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? • • • • • X الكاثر Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? X b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III A 501(c)(6). Yes No 1 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes.' 为"<u>有</u>" 12.15 12.15 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2b 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues · · · · · 3 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 4 Taxable amount of lobbying and political expenditures (see Instructions) Supplemental Information Complete 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 11 Also. complete this part for any additional information.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2010

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization Employer identification number SOCIETY OF AMERICAN MILITARY ENG. 43-6073682 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet 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 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ▶\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.

Sched	ule D (Form 990) 2010 SOCIETY OF AMERI	CAN MILITARY	ENG.		43-607	13682	J	Page 2
1 -7	Till Organizations Maintaining C	collections of A	rt Historical T	reasures. O	Other Similar A	ssets		
3	Using the organization's acquisition, accession, a	and other records of	heck any of the follo	owing that are a	significant use of its			<u> </u>
	collection items (check all that apply):		and any or and rom	, <u>.</u>				
а	Public exhibition	d 🗀 loan	or exchange progra	ıme				
_	Scholarly research	e Othe	•					
b		e 🗀 Oule						
c	Preservation for future generations	Name and auminia ha	tha fiethar tha a		vomat numeno in			
4	Provide a description of the organization's collect Part XIV.	dons and explain no	ow they further the o	irganization's e.	xempt purpose iii			
5	During the year, did the organization solicit or red	elve donations of a	rt, historical treasur	es, or other sim	nilar			
	assets to be sold to raise funds rather than to be					· · · [Yes	No
Pai	t IV Escrow and Custodial Arran	gements. Com	plete if organization	answered "Yes	s" to Form 990,			
	Part IV, line 9, or reported an amount							
1a	Is the organization an agent, trustee, custodian of					г	¬.,	
	included on Form 990, Part X? · · · · · ·					L	Yes	∐No
þ	If "Yes," explain the arrangement in Part XIV and	complete the follow	wing table [.]		r			
						mount		
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 Form	990, Part X, line 21	?	• • • • • • •		• • • [Yes	No
b	If "Yes," explain the arrangement in Part XIV.							
Pai	t.V Endowment Funds. Complete if	the organization ar	swered "Yes" to Fo	rm 990, Part IV	/, line 10.			
نصينيا		(a) Current year	(b) Pnor year	(c) Two years ba		ck (e)	Four years	back
1a	Beginning of year balance	267,986	198,427		三角	5133	F15572	
b	Contributions	44,000	34,274	-	介度科学院建筑	(12) Sale	क्षा हो है।	
c	Net investment earnings, gains, and losses •	35,635	41,072	· · · · · · · · · · · · · · · · · · ·	14. J. W. W. W. W. W. W. W. W. W. W. W. W. W.	1 12	1 1 1 1 1 1 1 1	7,444
ч.	Grants or scholarships · · · · · · · · ·	3,000	5,737		1 3 Mar 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	120	7. (-5) 7. 7. 7.	311
e	Other expenditures for facilities					10 P	= 1 - 7 - 7 + 1;	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
-	and programs						47.5	545
	Administrative expenses	300	50		A water water and a few transfer and	X 5 7 17 17	in Tare the	AL 18-41 (1
f	End of year balance	344,321	267,986		Land Francisco		14 14 14 14 14 14 14 14 14 14 14 14 14 1	(1 24 x 3 x 4
g			201,300		1. 20 - 2. 18. 26. 1 27. 24. 2	= " 1 1631-211	- 4-4 6-45 4	1 40(1-17) 4
2	Provide the estimated percentage of the year en							
a		.00.00 %						
b	Permanent endowment \(\rightarrow \)							
С	Term endowment ▶ %							
3a	Are there endowment funds not in the possession	on of the organization	in that are held and	administered to	or the		<u> </u>	
	organization by:					_	Yes	
	(i) unrelated organizations · · · · · · · · ·	• • • • • • • • •				₃	Ba(i)	<u> </u>
	(ii) related organizations · · · · · · · · · · ·					· · 3	a(ii)	X
b	if "Yes" to 3a(ii), are the related organizations lis	ted as required on	Schedule R? · · ·	• • • • • •		· · L	3b	<u> </u>
4	Describe in Part XIV the intended uses of the or	ganızation's endowi	ment funds.					
Pa	rt VI Land, Buildings, and Equip	nent. See Form	990, Part X, line 10.					
	Description of investment	(a) Cost or other	er basis (b) Cos	st or other	(c) Accumulated	(4)) Book valu	e
	·	(Investme	1 ''	(other)	depreciation			
1a	Land	••			于中国的国际发展的			
- ь	Buildings · · · · · · · · · · · · · · · · · · ·							
c	Leasehold improvements · · · · · · · · · · · · · · · · · · ·							
d	Equipment							
e	Other							
	ii. Add lines 1a through 1e. (Column (d) must equ	ial Form 990, Part)	C, column (B), line 1	O(c).)				

Part VII	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	·····
(1) Financial o		•		
	Id equity interests	•		
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)		·		
(G)				
(H)	,			
<u>(I)</u>				ard have the
	b) must equal Form 990, Part X, col (B) fine 12.)	See See S00 Bed V line 13	From the little of the state of	(明)。 (2) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				स्रीता हात १ , १ अस्य संस्थान व्यासी
	(b) must equal Form 990, Part X, col (B) line 13.) Other Assets. See Form 990, Part X, li		The first dear to the factor of the first of the factor of	trisación spirit in s
Part IX			a) Book value
(1)	3)) Description	- C) BOOK VAIUS
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line	e 15.) • • • • • • • • • • • • • • • • • • •		
Part X	Other Liabilities, See Form 990, Part X	, line 25		
1.	(a) Description of liability	(b) Amount	一下表示的证据中最终的证据 证据	的国际基础设施
(1) Federal	income taxes			
(2)				基础
(3)				理想被分类的
(4)			一	学院的 1965年 1975年 - 1975年
(5)				
(6)			一一位的"大大","是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	
(7)				1. 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm 10 mm
(8)				是是一种
(9)				
(10)				
(11)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	THE PROPERTY OF THE PARTY OF TH	。出種其型影

Sched	de D (Form 980) 2010 SOCIETY OF AMERICAN MILITARY ENG.		43-6073682	Page 4
	Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stat	ements	
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	
	Reconciliation of Revenue per Audited Financial Statemen			
<u> </u>		its with iveveline bei	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		Kape .	
a	Net unrealized gains on investments	2a	AZM	
b	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	2b		
c	Recoveries of prior year grants	2c		
ď	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·	2d	3.56(8.1	
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·			
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·		3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		14.52.5	
4	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · ·	4a		
a	Other (Describe in Part XIV.)	4b		
b	Add lines 4a and 4b		4c	
C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) • • • •		5	
5				
	Total expenses and losses per audited financial Statements	ents with Expenses		
1			<u>1</u> ਕ-ਫ਼ਬ	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	n- 1	5 M	
a	Prior year adjustments · · · · · · · · · · · · · · · · · · ·	2a 2b	- (*) (*) (*) (*) (*) (*) (*) (*	
b	Other losses			
C	Other (Describe in Part XIV)	2c	2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
d	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2d	- K. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
e	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·		2e 3	
3	1		1	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	. 1	25 - 21 - 25 - 25 - 25 - 25 - 25 - 25 - 25 - 25	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
_C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5]	
	t XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, line			
	b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, line	es 2d and 4b. Also complete	!	
this p	art to provide any additional information.			

SCHEDULE G (Fòrm 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2010

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. Open to Public Department of the Treasury Inspection and T Internal Revenue Service Employer identification number Name of the organization 43-6073682 SOCIETY OF AMERICAN MILITARY ENG. Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (E) Did fundralser have (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundralser) custody or control of from activity (or retained by) (or retained by) fundraiser listed in contributions? organization col. (i) Yes Νo 1 2 3 4 5 . 6 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

<u>.Pa</u>	rt.]]]	Fundraising Events. Co than \$15,000 of fundraising gross receipts greater than	event contributions and			
		gross rescipts greater than	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events Add col (a) through
R		~	(event type)	(event type)	(total number)	col. (c))
e v						
e n	1 2	Gross receipts · · · · · · · · · · · · · · · · · · ·				
u	4	contributions · · · · · · · ·				<u> </u>
е	3	Gross income (line 1		- · · · · · · · · · · · · · · · · · · ·		
		minus line 2)				
D	4	Cash prizes · · · · · · · · · · · · · · · · · · ·				
i r	5	Noncash prizes · · · · · ·				
e c t	6	Rent/facility costs · · · · · · ·				
E	7	Food and beverages · · · · ·				
p e n	8	Entertainment · · · · · · · · · · · · · · · · · · ·				
s e s	9	Other direct expenses · · · ·				
Pa	11 rt li	Net income summary. Combine lin Gaming. Complete if the than \$15,000 on Form 990	organization answered			d more
			J-L.Z., IIIIC Od.			
Rever			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue · · · · · · · ·			(c) Other gaming	
Revenue Direc	1 2				(c) Other gaming	
Kesense Direct H		Gross revenue · · · · · · · · ·			(c) Other gaming	
Kesecue Direct Excec	2	Gross revenue · · · · · · · · · · · · · · · · · · ·			(c) Other gaming	
S	2 3 4	Gross revenue			(c) Other gaming	
Revenue Direct Expenses	2	Gross revenue · · · · · · · · · · · · · · · · · · ·				col (a) through col (c))
S	2 3 4	Gross revenue	(a) Bingo	bingo/progressive bingo		col (a) through col (c))
S	2 3 4 5	Gross revenue · · · · · · · · · · · · · · · · · · ·	(a) Bingo Yes%	bingo/progressive bingo	Yes%	col (a) through col (c))
S	2 3 4 5	Gross revenue · · · · · · · · · · · · · · · · · · ·	(a) Bingo Yes % No s 2 through 5 in column (d	bingo/progressive bingo Yes% No	Yes %	col (a) through col (c))
S	2 3 4 5 6 7	Gross revenue	(a) Bingo Yes% No s 2 through 5 in column (d	bingo/progressive bingo Yes% No June 7	Yes %	col (a) through col (c))
S	2 3 4 5 6 7	Gross revenue	(a) Bingo Yes% No s 2 through 5 in column (d mbine line 1, column d, and ation operates gaming acti	bingo/progressive bingo Yes % No No J line 7 · · · · · ·	Yes%	col (a) through col (c))
9	2 3 4 5 6 7 8	Gross revenue	(a) Bingo Yes% No s 2 through 5 in column (d mbine line 1, column d, and ation operates gaming acti	bingo/progressive bingo Yes % No No J line 7 · · · · · ·	Yes%	col (a) through col (c))
9 3	2 3 4 5 6 7 8 En	Gross revenue	(a) Bingo Yes% No s 2 through 5 in column (d mbine line 1, column d, and ation operates gaming acti gaming activities in each of	bingo/progressive bingo Yes% No No id line 7 vities: of these states?	☐ Yes % ☐ No	col (a) through col (c))
9 2 1 102	2 3 4 5 6 7 8 En	Gross revenue	(a) Bingo Yes% No s 2 through 5 in column (d mbine line 1, column d, and ation operates gaming acti gaming activities in each of	bingo/progressive bingo Yes % No No time 7 · · · · · · · · · · · · · · · · · ·	☐ Yes % ☐ No	col (a) through col (c))

SCHEDÜLE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public 1
Inspection
Employer Identification number

Name of the organization
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 CONDUCT IN ALL
IȚS ACTIVITIES. THE POST FULLY SUPPORTS AND EXPECTS STRICT COMPLIANCE BY EVERY MEMBER
WITH ALL APPLICABLE LAWS AND REGULATIONS IN THE CONDUCT OF BUSINESS AND PROFESSIONS. 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 PRINCIPLE 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 THEIR WEBSITE.
03. Explanation of other changes in net assets or fund balances (Part XI, line 5)
UNEARNED REVENUE FROM CHANGE IN VALUE OF INVESTMENTS IN ENDOWMENT FUND: \$30,969
·