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Short Form
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 1545-1150

2010Open to Public
Inspection

► Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2010 calendar year, or tax year beginning JUL 1, 2010 and ending JUN 30, 2011**B Check if applicable**

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization**AMERICAN COUNCIL OF ENGINEERING COMPANIES OF NEW HAMPSHIRE, INC.****D Employer identification number****02-0391558**

Number and street (or P O. box, if mail is not delivered to street address)

HILLS COURT, 6B HILLS AVENUE

Room/suite

E Telephone number
603-225-7397

City or town, state or country, and ZIP + 4

CONCORD, NH 03301**F Group Exemption Number ►****G Accounting Method** Cash Accrual Other (specify) ►**I Website:** ► **WWW.ACEC-NH.ORG****J Tax-exempt status (check only one) — 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or 527****H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).****K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return****L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ** ► **\$ 103,955.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)**Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	49,522.
	3 Membership dues and assessments	3	38,546.
	4 Investment income	4	53.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)		
Expenses	c Less direct expenses from gaming and fundraising events	6b	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6c	
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		
	8 Other revenue (describe in Schedule O)		
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		7c
			8
			9 103,955.
Net Assets	10 Grants and similar amounts paid (list in Schedule O)	10	17,579.
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	54,000.
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	46.
	16 Other expenses (describe in Schedule O)	16	38,249.
	17 Total expenses. Add lines 10 through 16	17	109,874.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<5,919. >
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	38,589.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	0.
	21 Net assets or fund balances at end of year Combine lines 18 through 20	21	32,670.

LHA For Paperwork Reduction Act Notice, see the separate Instructions.

Form 990-EZ (2010)

AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.

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Part II Balance Sheets. (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	38,589.	22	32,670.
23 Land and buildings		23	
24 Other assets (describe in Schedule O)		24	
25 Total assets	38,589.	25	32,670.
26 Total liabilities (describe in Schedule O)	0.	26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	38,589.	27	32,670.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? **SEE SCHEDULE O**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others)

28 PROVIDE SEMINARS, CONTINUING EDUCATION AND NETWORKING OPPORTUNITIES TO 41 MEMBER FIRMS COMPOSED OF APPROXIMATELY 800 EMPLOYEES.

(Grants \$) If this amount includes foreign grants, check here **28a**

29 SEE SCHEDULE O

(Grants \$) If this amount includes foreign grants, check here **29a**

30 SEE SCHEDULE O

(Grants \$) If this amount includes foreign grants, check here **30a**

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here **31a**

32 Total program service expenses (add lines 28a through 31a) **32**

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
FRANCIS O'CALLAGHAN, P.E., 6 BEDFORD FARMS, KILTON ROAD, BEDFORD, NH	DIRECTOR 1.00	0.	0.	0.
R. SCOTT SHILLABER, P.E. 20 FOUNDRY STREET, CONCORD, NH 03301	TREASURER 1.00	0.	0.	0.
JIM ERRICO, P.E. 380 HARVEY ROAD, MANCHESTER, NH 03101	DIRECTOR 1.00	0.	0.	0.
JOSEPH DUCHARME, 55 SOUTH COMMERCIAL STREET #409, MANCHESTER, NH 03101	DIRECTOR 1.00	0.	0.	0.
NANNU NOBIS, P.E. 18 CHENELL DRIVE, CONCORD, NH 03301	SECRETARY 1.00	0.	0.	0.
GARY M. GARFIELD, P.E. 5 INDUSTRIAL WAY, SALEM, NH 03079	DIRECTOR 1.00	0.	0.	0.
MARK ZYDEL, P.E. 150 DOW STREET, MANCHESTER, NH 03101	PAST PRESIDENT 1.00	0.	0.	0.
ERIN DARROW 10 CASEY WAY, MEREDITH, NH 03253	DIRECTOR 1.00	0.	0.	0.
ALISTAIR MCDONALD, P.E., 540 N COMMERCIAL STREET, SUITE 250,	NATIONAL DIRECTOR 1.00	0.	0.	0.
MIKE PENNEY, P.E., 186 GRANITE STREET, 3RD FLOOR, STE A,	PRESIDENT 2.00	0.	0.	0.
ALEX KOUTROUBAS, 6 HILLS AVENUE, SUITE B, CONCORD, NH 03301	EXECUTIVE DIRECTOR 20.00	0.	0.	0.
WILLIAM MOORE, 288 SOUTH RIVER ROAD, BEDFORD, NH 03110	DIRECTOR 1.00	0.	0.	0.

**AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.**

Form 990-EZ (2010)

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Part V Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

Yes	No
-----	----

33	X
----	---

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

34	X
----	---

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T

a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?

35a	X
-----	---

b If "Yes," has it filed a tax return on Form 990-T for this year?

35b	X
-----	---

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N

36	X
----	---

37a Enter amount of political expenditures, direct or indirect, as described in the instructions **► 37a** 0.

b Did the organization file Form 1120-POL for this year?

37b	X
-----	---

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

38a	X
-----	---

b If "Yes," complete Schedule L, Part II and enter the total amount involved

38b	N/A
-----	-----

39 Section 501(c)(7) organizations Enter

39a	N/A
-----	-----

a Initiation fees and capital contributions included on line 9

39b	N/A
-----	-----

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 **► N/A**, section 4912 **► N/A**, section 4955 **► N/A**

40b	N/A
-----	-----

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 **► N/A**

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization **► N/A**

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T

40e	X
-----	---

41 List the states with which a copy of this return is filed **► NONE**

42a The organization's books are in care of **► R. SCOTT SHILLABER** Telephone no **► 603-229-1900**
Located at **► 20 FOUNDRY STREET, CONCORD, NH** ZIP + 4 **► 03301**

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

42b	X
-----	---

If "Yes," enter the name of the foreign country. **►**

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

42c	X
-----	---

If "Yes," enter the name of the foreign country **►**

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year **► 43** N/A

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

44a	X
-----	---

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

44b	X
-----	---

c Did the organization receive any payments for indoor tanning services during the year?

44c	X
-----	---

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

44d	
-----	--

Form 990-EZ (2010)

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?

a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?
If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office?
If "Yes," complete Schedule C, Part I

Yes	No
45	X
45a	X
46	X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3)

organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

Yes	No
47	
48	
49a	
49b	

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" ► N/A

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ►

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

10/21/11

Sign Here	Signature of Officer	Date
	R. Scott Shillaber Treasurer	10/21/11

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	ALISON S. PERRELLA, CPA	Ami A. Perrell CPA	10/11/11		
	Firm's name ► ALISON S. PERRELLA, CPA, PLLC			Firm's EIN ►	
	Firm's address ► 82 PALOMINO LANE, SUITE 704 BEDFORD, NH 03110-6448			Phone no	603-666-5535

May the IRS discuss this return with the preparer shown above? See instructions

032174
03-04-11► Yes No

Form 990-EZ (2010)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB FB 1545-0047

2010

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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.

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-B 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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AMERICAN COUNCIL OF ENGINEERING COMPANIES OF NEW HAMPSHIRE, INC.

Employer identification number
02-0391558

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.**
- 2 Political expenditures**
- 3 Volunteer hours**

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
4a Was a correction made? Yes No

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____

4 Did the filing organization file Form 1120-POL for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

LHA

AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.

Schedule C (Form 990 or 990-EZ) 2010

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Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768
(election under section 501(h)).

A Check ► if the filing organization belongs to an affiliated group.

B Check ► if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount 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 over \$1,500,000.
Over \$17,000,000	\$1,000,000.

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. If zero or less, enter -0-

i Subtract line 1f from line 1c. If zero or less, enter -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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

**AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.**

Schedule C (Form 990 or 990-EZ) 2010

02-0391558 Page 3

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)).

	(a)		(b)
	Yes	No	Amount
1 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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	X

Part III-B 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."

1 Dues, assessments and similar amounts from members	1	38,546.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	11,774.
a Current year	2b	11,774.
b Carryover from last year	2c	11,774.
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	12,720.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	<946.>
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV 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 1i. Also, complete this part for any additional information.

SCHEDULE 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

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Name of the organization	AMERICAN COUNCIL OF ENGINEERING COMPANIES OF NEW HAMPSHIRE, INC.	Employer identification number 02-0391558
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FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:

DESCRIPTION OF PROPERTY:	AMOUNT:
INTEREST INCOME	53.

FORM 990-EZ, PART I, LINE 8, OTHER REVENUE:

DESCRIPTION OF OTHER REVENUE:	AMOUNT:
COMMISSIONS - INSURANCE SOLD TO MEMBERS	941.
NATIONAL DUES COLLECTED FROM NH-BASED FIRMS, PAID OVER TO	
ACEC NATIONAL	14,393.
ADVERTISING REVENUE	500.
TOTAL TO FORM 990-EZ, LINE 8	15,834.

FORM 990-EZ, PART I, LINE 10, PAYMENTS TO AFFILIATES:

AFFILIATE NAME: AMERICAN COUNCIL OF ENGINEERING COMPANIES	
AFFILIATE ADDRESS: 1015 15TH STREET, 8TH FLOOR NW WASHINGTON, DC	
PURPOSE OF PAYMENT: REMIT DUES ASSESSED BY NATIONAL ASSOC COLLECTED BY THIS ENTITY	
AMOUNT OF PAYMENT:	13,579.

FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCATIONS:

ACTIVITY CLASSIFICATION: EDUCATIONAL SCHOLARSHIPS
GRANTEE NAME: SCHOLARSHIP AMERICA/SCHOLARSHIP MANAGEMENT
SERVICES
GRANTEE ADDRESS: ONE SCHOLARSHIP WAY SAINT PETER, MN 56082
GRANTEE RELATIONSHIP: NONE

SCHEDULE 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
Inspection

Name of the organization

AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.

Employer identification number
02-0391558

PROPERTY DESCRIPTION: CASH

METHOD USED TO DETERMINE BOOK VALUE: COST

METHOD USED TO DETERMINE FMV: COST

BOOK VALUE OF PROPERTY: 4,200.

DATE OF GIFT: 06/10/11

AMOUNT GIVEN: 4,000.

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

<u>DESCRIPTION OF OTHER EXPENSES:</u>	<u>AMOUNT:</u>
ACEC CONFERENCES	2,946.
SEMINARS EXPENSE	18,495.
BREAKFAST MEETINGS EXPENSE	6,912.
ENGINEERS WEEK ADVERTISING/PUBLIC RELATIONS	2,265.
QBS AND ENGINEER'S WEEK BANQUET SPONSORSHIP	402.
WEB SITE EXPENSE	942.
ENGINEER AWARDS	742.
NEWSLETTER EXPENSES	1,000.
COMMITTEE MEETINGS EXPENSES	1,308.
LEGAL AND TAX PREPARATION SERVICES	535.
SPONSORSHIPS	190.
NAECE DUES	100.
UNRELATED BUSINESS INCOME TAX	62.
SHOLARSHIP ADMINISTRATION FEES	700.
PAC RAFFLE INCENTIVE	300.
DIRECTORS & OFFICERS INSURANCE	1,350.
TOTAL TO FORM 990-EZ, LINE 16	38,249.

SCHEDULE 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 1545-0247

2010

Open to Public
Inspection

Name of the organization

AMERICAN COUNCIL OF ENGINEERING
COMPANIES OF NEW HAMPSHIRE, INC.

Employer identification number
02-0391558

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO SUPPORT THE BUSINESS
AND PROFESSIONAL INTERESTS OF MEMBER FIRMS AND ENHANCE THE PRACTICE OF
CONSULTING ENGINEERING IN NEW HAMPSHIRE.

FORM 990-EZ, PART III, LINE 29, PROGRAM SERVICE ACCOMPLISHMENTS:
MONITORED STATE AND LOCAL LEGISLATION AFFECTING THE
PROFESSION AND COMMUNICATING RELEVANT MATTERS TO THE
MEMBERSHIP THROUGH THE 10 E-NEWSETTERS PER YEAR, AND
WEEKLY LEGISLATIVE UPDATES.

FORM 990-EZ, PART III, LINE 30, PROGRAM SERVICE ACCOMPLISHMENTS:
HELD REGULAR MEETINGS ATTENDED BY REPRESENTATIVES OF
MEMBER FIRMS AND KEY REPRESENTATIVES OF NH DEPT OF
TRANSPOR AND ENVIRON SVCS TO DISCUSS MATTERS OF MUTUAL
INTEREST.

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.