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Form **990-EZ** Department of the Treasury

Internal Revenue Service

OMB No 1545-1150

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 frust or private foundation)
Sponsonng organizations of dohor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 1990. 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.

Open to Public Inspection

		_	alendar year, or tax year beginning ${ m JUL}_1$, 2012	2 and ending JU		, 2013
В	Check if applicab	ole [C Name of organization	-	D Emplo	yer identification number
	- 7	ess change	American Council of Engineering	g		
	Name	change	Companies of Maine			-0414899
	Initial	return	Number and street (or P O box, if mail is not delivered to street addres	s) Room/suite		hone number
	Termi	ınated	77 Sewall Street	3000	20	7-622-9820
	Amen	nded return	City or town, state or country, and ZIP + 4		F Grou	p Exemption
\Box	Applica	ation pending	Augusta, ME 04332-5249		Numt	ber ►
		iting Metho	od Cash X Accrual Other (specify) ►		H Chec	k ► X If the organization is not
1	Websit	te: 🕨 W	ww.acecmaine.org		requi	red to attach Schedule B
J	Tax-ex	empt statu	us (check only one) $-$ 501(c)(3) \times 501(c) (6) $<$ (insert	no) 4947(a)(1) or 527	(Forn	n 990, 990-EZ, or 990-PF)
K	Check I	▶ □ i	of the organization is not a section 509(a)(3) supporting organization or	a section 527 organization and its	gross rec	eipts are normally not more than
	\$50,00		990-EZ or Form 990 return is not required though Form 990-N (e-posto			
	a returr	n, be sure t	to file a complete return			
L.	Add line	es 5b, 6c,	and 7b, to line 9 to determine gross receipts. If gross receipts are \$200	,000 or more, or if total assets (Par	t II,	
	line 2 <u>5,</u>	, column (E	B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶	\$
P	art l	Reve	enue, Expenses, and Changes in Net Assets or F	Fund Balances (see the instr	uctions fo	or Part I)
		Check I	if the organization used Schedule O to respond to any question in this P	art I		X
	1	Contribut	ions, gifts, grants, and similar amounts received			1 8,750.
	2	Program	service revenue including government fees and contracts			2 10,227.
	3	Members	thip dues and assessments	and the same of th		3 79,125.
	4	Investme	nt income		L	4
	5a	Gross am	nount from sale of assets other than inventory	,5a		
	b	Less cos	st or other basis and sales expenses	\ 5b		
	C	Gain or (I	oss) from sale of assets other than inventory (Subtract line-5b from line	\5 <u>8</u>) \	L	5c
	6	Gaming a	and fundraising events	014		
<u>•</u>	a	Gross inc	come from gaming (attach Schedule G if greater than JAN "	Tri li		
enc		\$15,000)		6a		
Revenue	b	Gross inc	nount from sale of assets other than inventory of or other basis and sales expenses coss) from sale of assets other than inventory (Subtract line-5b from line and fundraising events come from gaming (attach Schedule G if greater than JAN 3002) come from fundraising events (not including \$	of contributions	[
_		from fund	draising events reported on line 1) (attach Schedule G if the sum of such	1		
		gross inc	ome and contributions exceeds \$15,000)	6b		
	C	Less dire	ect expenses from gaming and fundraising events	6c		1
	d	Net incon	ne or (loss) from gaming and fundraising events (add lines 6a and 6b ai	nd subtract line 6c)	_	6d
	7a	Gross sal	les of inventory, less returns and allowances	7a		
•	b		st of goods sold	7b		
	C	-	ofit or (loss) from sales of inventory (Subtract line 7b from line 7a)		L	7c
) 3	8		enue (describe in Schedule O)	See Schedule O		8 104.
	g		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	0.1. 0.1. 1.2		g 98,206.
3	10		nd similar amounts paid (list in Schedule 0)	See Schedule O	-	10 31,430.
j	11		paid to or for members		L	11 20 707
Ses.	12		other compensation, and employee benefits		-	12 29,787.
ع وا	13		onal fees and other payments to independent contractors		L	13 35,464.
	14	•	cy, rent, utilities, and maintenance		Ļ	14
Expenses	15		publications, postage, and shipping	Coo Cabodula o	<u> </u>	15 381.
3	16		penses (describe in Schedule O)	See Schedule 0	_	16 12,780.
<u>^</u> _	17		penses. Add lines 10 through 16		P	17 109,842.
ş	18		r (deficit) for the year (Subtract line 17 from line 9)		-	18 <11,636.>
Net Assets	19		s or fund balances at beginning of year (from line 27, column (A))			50 026
Ϋ́	00	-	ree with end-of-year figure reported on prior year's return)	Coo Cahadula o	-	19 50,836.
ž	20		anges in net assets or fund balances (explain in Schedule 0)	See Schedule 0	_ }	20 1,746. 21 40,946.
	21	-	ts or fund balances at end of year Combine lines 18 through 20			
ᄖ	4 ror	rayerW0f	rk Reduction Act Notice, see the separate instructions.			Form 990-EZ (2012)

Form 990-EZ (2012)

Pa	rt II	Balance Sheets (see the inst	ructions for Part II)					
		Check if the organization use	d Schedule O to respo	ond to any que			_	X
					(A) Beginning of year		(B) En	d of year
22	Cash,	, savings, and investments		{	50,836.	22		38,279.
23	Land	and buildings				23		
24	Other	assets (describe in Schedule 0)	ee Schedule O		0.	24		8,870.
25	Total	assets			50,836.	25		47,149.
26	Total	liabilities (describe in Schedule 0) Se	ee Schedule O	1	0.	26		6,203.
_27	Net a	ssets or fund balances (line 27 of column	B) must agree with line 21)		50,836.	27		40,946.
Рa	rt III	Statement of Program Serv	ce Accomplishments	s (see the instr	uctions for Part III)		Ex	enses ,
		Check if the organization use				X	(Required 1	
What	t is the d	organization's primary exempt purpose?Se						nd 501(c)(4) ns and section
Descr	nbe the o	organization's program service accomplishments for	each of its three largest program serv	rices, as measured by ex	penses in a clear and concise		4947(a)(1)	trusts, optional
		nbe the services provided, the number of persons b					for others)	
28	See	Schedule O						
				_			\	
•				_				
	(Grants	s\$) If this	amount includes foreign gran	nts, check here			28a	
29								
	(Grants	s\$) If this	amount includes foreign gran	nts, check here			29a	
30								
							1	
	(Grants	s\$) If this	amount includes foreign grai	nts, check here	•		30a	
31	Other	program services (describe in Schedul	e O)					
	(Grants	· · ·	amount <u>includes foreign gra</u> i	nts, check here	_		31a	
		program service expenses (add lines				•	32	
Pa	ırt IV	List of Officers, Directors,	rustees, and Key Em	ployees List each	n one even if not compensated (s	ee the	instructions fo	r Part IV)
		Check if the organization use	d Schedule O to respon	ond to any que	estion in this Part IV			
				(b) Average hour	(() i i oporazbio		alth benefits,	(e) Estimated
		(a) Name and title		per week devoted	to compensation (Forms W-2/1099-MISC)	emple	nbutions to oyee benefit	amount of other
				position	(if not paid, enter -0-)		and deferred pensation	compensation
Ro	ber	t Patten						
Pa	st-	President		1.00	_ 0.		0.	0.
Br	ett	Hart						
Tr	eas	urer		2.00	0.		0.	0.
Jo	ann	Fryer						
		tary		2.00	0.		0.	0.
Ow	en 1	McCullough		-				
Pr	esi	dent Elect		1.00	0.		0.	0.
Ge	ne	Shephard						
	rec			1.00	0.		0.	0.
Ca	rol	yn Bird				_		
Di	rec	tor		1.00	0.		0.	0.
Ja	mes	Wilson						
Pr	esi	dent		2.00	0.		0.	0.
Jo	hn :	Nelson						
Di								
	rec			1.00	0.		0.	0.
Sc	rec			1.00				
	rec	tor		1.00	0.		0.	0.
Di	rec ott rec	tor Graham					0.	0.
Di Pe	rec ott rec ggy	tor Graham tor						
Di Pe Di	rec ott rec ggy rec	tor Graham tor Duval tor		1.00	0.		0.	0.
Di Pe Di Tr	rec ott rec ggy rec avi	tor Graham tor Duval tor s Noyes		1.00	0.		0.	0.
Di Pe Di Tr	rec ott rec ggy rec avi rec	tor Graham tor Duval tor s Noyes tor		1.00	0.		0.	0.
Di Pe Di Tr Di Jo	rec ott rec ggy rec avi rec	tor Graham tor Duval tor s Noyes		1.00	0.		0.	0.

Page 3

	instructions for Part V) Check if the organization used Sch. O to response	511G CO C				X
					Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a d	etailed des	cription of each			
	activity in Schedule O			33		X
	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			34		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business					
	on lines 2, 6a, and 7a, among others)?		,	35a		Х
h	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Sc	hedule O		35b	N/	A
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) no		ting, and proxy tax			
•	requirements during the year? If "Yes," complete Schedule C, Part III		0. , ,	35c	X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets du	ırına the v	ear? If "Yes."			
•	complete applicable parts of Schedule N	,	•	36		X
372	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.			
	Did the organization file Form 1120-POL for this year?			37b		Х
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or we	re anv suc	h loans made	,,		
00 a	in a prior year and still outstanding at the end of the tax year covered by this return?	,		38a	[Х
h	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A			
39	Section 501(c)(7) organizations Enter			1		
-	Initiation fees and capital contributions included on line 9	39a	N/A		Į :	
	Gross receipts, included on line 9, for public use of club facilities	39b	N/A	1		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	000		1		
404	section 4911 ► N/A , section 4912 ► N/A , section 4955	•	N/A			
h	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess beni					
U	year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its					1
	If "Yes," complete Schedule L, Part I	phot i otti	13 330 01 330 EZ-	40b	N/	A
	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers.			700		<u> </u>
Ü		•	N/A	-		
	or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the					
u			N/A			
_	organization		117 21			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			40e	1	X
	transaction? If "Yes," complete Form 8886-T			406		122
41	List the states with which a copy of this return is filed ► ME The organization's books are in care of ► Eaton Peabody Consulting Gro	Talas	hone no ► 207-62		820	1
42 a	Located at > 77 Sewall St, Ste 3000, Augusta, ME			77_9		
	Located at P // Sewall St, Ste Sooo, Augusta, Mr.	reiep	7ID . 4	22-9	2-5	240
D			ZIP + 4 ► (22-9 0433	2-5	249
	At any time during the calendar year, did the organization have an interest in or a signature or other authorit		ZIP + 4 ► (22-9 0433	2-5	249
	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		ZIP+4 ► (0433	2-5	249 No
	At any time during the calendar year, did the organization have an interest in or a signature or other authorit over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		ZIP+4 ▶ (22-9)433 42b	2-5	249
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	y	ZIP+4 ► (0433	2-5	249 No
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C	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S?	y	ZIP+4 ► (0433	2-5	249 No X
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c 43	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	y	ZIP + 4 ► (42b 42c	Yes	249 No X
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country	y	ZIP+4 ► (42b	Yes	249 No X
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43 44 a	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country 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 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be complete Form 990-EZ	y and Finar	ZIP+4 ► C	42b 42c	Yes	No X
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43 44 a b	At any time during the calendar year, did the organization have an interest in or a signature or other authorit over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country 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 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed form 990-EZ Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed form 990-EZ Did the organization receive any payments for indoor tanning services during the year? If "No," provide an existing the year? If "No," provide an existing the year? If "No," provide an existing the year?	and Finar	ZIP + 4	42b 42c N/F 44a 44b 44c	Yes Yes	Nc X
43 44 a b c d	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country 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 Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed form 990-EZ Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed form 990-EZ Did the organization receive any payments for indoor tanning services during the year? If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an example of the payments? I	and Finar ted instead inpleted inst	ziP+4 • (42b 42c N/F 44a 44b 44c 44d	Yes Yes	No X X

O of compensation from the
(c) Compensation
Yes No
elief, it is true, correct, and complete
1/13/14
Date
<u>-</u>
if PTIN
ed
P01201030
▶ 04-3353527
207-685-9202
207-003-3202
V V
► X Yes No
Form 990-EZ (2012

SCHEDULE-C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2012

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public Inspection

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," t	•	y Tax), or Form 990-6	EZ, Part V, line 35c (Proxy	Tax), then
Compan	an Council of Eng ies of Maine			oloyer identification number $01-0414899$
Part I-A Complete if the or	rganization is exempt und	der section 501(c	or is a section 527	organization.
 Provide a description of the organ Political expenditures Volunteer hours 	aization's direct and indirect politi	cal campaign activities		\$
Part I-B Complete if the or	rganization is exempt und	der section 501(c)(3).	
1 Enter the amount of any excise ta				\$
2 Enter the amount of any excise ta	x incurred by organization manag	ers under section 495	55	\$
3 If the organization incurred a sect	ion 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the or	rganization is exempt und	der section 501(c		
 Enter the amount directly expend 				\$
2 Enter the amount of the filing orga	anization's funds contributed to o	ther organizations for		
exempt function activities				\$
3 Total exempt function expenditur	es. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	•
line 17b				\$
4 Did the filing organization file For		714 D. A. 507		Yes No
5 Enter the names, addresses and made payments. For each organizer				
contributions received that were				
political action committee (PAC).				
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
	-			
	1			
		200 200 57	<u> </u>	0 /F 000 - 000 FT 001

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

232041 01-07-13 American Council of Engineering

Schedule C (Form 990 or 990-EZ) 2012	Companies o	f Maine		01-0	0414899 Page 2
Part II-A Complete if the org		npt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under sec					
			Part IV each affiliated	group member's nar	me, address, EIN,
:	e of excess lobbying e				
B Check if the filing organizat	ion checked box A an	d "limited control" pro	visions apply.	(a) Filip a	(h) Affiliated annual
	s on Lobbying Expen litures" means amou	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public opinion (g	grass roots lobbying)			
b Total lobbying expenditures to influ					
c Total lobbying expenditures (add li					
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1d)		·	
f Lobbying nontaxable amount. Enter	er the amount from the	e following table in bot	n columns.		J
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000		0 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17		0 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000,0	000			
g Grassroots nontaxable amount (er	ter 25% of line 1f\				
h Subtract line 1g from line 1a. If zer	•		!		-
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than ze	· · · · · · · · · · · · · · · · · · ·	line 11, did the organiz	ation file Form 4720		
reporting section 4911 tax for this					Yes No
	ations that made a solumns below. See th	e instructions for line	n do not have to comp es 2a through 2f on pa		
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period	<u> </u>	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(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))					

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 Companies of Maine

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)).

of the lobbying activity	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description			(b)		
1 During the year, did the	,	Yes	No	Amo	unt	
local legislation, includir or referendum, through	filing organization attempt to influence foreign, national, state or ig any attempt to influence public opinion on a legislative matter the use of:				-	
a Volunteers?b Paid staff or managemec Media advertisements?	nt (include compensation in expenses reported on lines 1c through 1i)?	-				
d Mailings to members, le	giplators or the public?		 			
-	ed or broadcast statements?					
• •		-				
_	ations for lobbying purposes? slators, their staffs, government officials, or a legislative body?		 			
			 			
	, seminars, conventions, speeches, lectures, or any similar means?		+ 1			
i Other activities?			1 1			
j Total. Add lines 1c thro	T		 			
	1 cause the organization to be not described in section 501(c)(3)?		 			
	int of any tax incurred under section 4912		1 	-		
	int 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?	- F04/s	\(\(\) \(\			
	f the organization is exempt under section 501(c)(4), sec	o) rue non:	y(s), or sect	ion		
501(c)(6).				Yes	No	
				163	<u>X</u>	
	10% or more) dues received nondeductible by members?		1			
	ike only in-house lobbying expenditures of \$2,000 or less?		2	-	<u>X</u>	
3 Did the organization ag	ree to carry over lobbying and political expenditures from the prior year?		3		X	
Part III-B Complete 501(c)(6) a	f the organization is exempt under section 501(c)(4), sec nd if either (a) BOTH Part III-A, lines 1 and 2, are answer	ed "No," C	e)(5), or sect PR (b) Part II	ion I-A, lir	e 3, is	
answered				7.0	105	
	d similar amounts from members		1		,125.	
	uctible lobbying and political expenditures (do not include amounts of po le section 527(f) tax was paid).	litical		2.5	115	
expenses for which th			_2a			
expenses for which the a Current year					<u>3,115.</u>	
•	r		2b			
a Current year	r		2b 2c	23	3,115.	
a Current yearb Carryover from last yeac Total	r orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			23		
a Current yearb Carryover from last yearc Total3 Aggregate amount report			2c	23	3,115.	
 a Current year b Carryover from last year c Total 3 Aggregate amount report 4 If notices were sent an 	orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	excess	2c	23	3,115.	
 a Current year b Carryover from last year c Total 3 Aggregate amount report 4 If notices were sent an 	orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d the amount on line 2c exceeds the amount on line 3, what portion of the agree to carryover to the reasonable estimate of nondeductible lobbying ar	excess	2c	23	3,115.	
 a Current year b Carryover from last year c Total 3 Aggregate amount reported 4 If notices were sent and does the organization and expenditure next year? 	orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d the amount on line 2c exceeds the amount on line 3, what portion of the agree to carryover to the reasonable estimate of nondeductible lobbying ar	excess	2c 3	23	3,115.	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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.

2012
Open to Public Inspection

Name of the organization

American Council of Engineering Companies of Maine

Employer identification number 01-0414899

Amount: 104. 31,430.
104.
31,430.
31,430.
31,430.
31,430.
31,430.
Amount:
4,439.
6,061.
1,000.
250.
1,030.
12,780.
Amount:
1,711.
1,711.

Form 990-EZ, Part II, Line 24, Other Assets:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

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 Open to Public Inspection

Internal Revenue Service Name of the organization

American Council of Engineering

Employer identification number

Name of the organization	American Council of Engineering Companies of Maine			r identification number 0414899
Description		Beg. of	ear_	End of Year
Undeposited fur	nds		0.	2,016.
Accounts receiv	vable		0.	6,854.
Total to Form 9	990-EZ, line 24		0.	8,870.
Form 990-EZ, Pa	art II, Line 26, Other Liabilitie	es:		
Description		Beg. of	Year	End of Year
Accounts payab	le		0.	6,203.
Form 990-EZ, Pa	art III, Primary Exempt Purpose -	- To protec	t the	public
interest, to ac	dvance the professional quality o	of consulti	ng en	gineering
both nationally	y and in Maine by continually imp	proving the	busi	ness
practices of co	onsulting engineering, and otherw	wise to pro	mote	the
common business	s interests of its members.			
				
Form 990-EZ, Pa	art III, Line 28, Program Service	e Accomplis	hment	s:
Activities inc	lude: financially supporting the	national		
ACEC to assure	member access to their services;	; manage th	e	
Fall Forum, En	gineering Excellence Awards progr	ram,		
statewide and	regional membership meetings, the	e ACEC of M	aine	website
and quarterly	newsletters; monitor, report and	participat	e in	state and
federal legisl	ative, regulatory and administrat	tive action	s; en	sure
member partici	pation on joint committees with	the Maine D	epart	ment of
Transportation	and the Maine Department of Env	ironmental	Prote	ction;
and advance th	e use of Quality Based Selection	•		

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)
Department of the Treasury

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.

2012
Open to Public Inspection

Name of the organization

American Council of Engineering Companies of Maine

Employer identification number 01-0414899

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.

3115

(Rev December 2009)
Department of the Treasury

Application for Change in Accounting Method

OMB No 1545-0152

Internal Revenue Service				
Name of filer (name of parent corporation if a consolidated	d group) (see instructions)	Identification number (se		
American Council of Engineering Compan	nies of Maine			,
		Principal business activity	code number (see instructions	5)
Number street and room or suite no. If a P.O. hov. see th	ne instructions	Tax year of change begins	(MM/DD/////) 07/04	1/2012
,	io instructions			
				2010
		James Wilson		
	on number(s) (see instructions)		Contact person's telepho	ne number
			207-622-982	0
				_
				<u> </u>
		_	a change being reques	itea.
_ ,	- '	•	ortization	
	- '	= :		es of
	-			63 01
		☐ Other (specify) ▶		
corporation (Sec. 448(d)(2))				
✓ Exempt organization. Enter Code section	▶ 501(c)(6)			
Caution. To be eligible for approval of the requester	d change in method of accounting, the	e taxpayer must provide all in	oformation that is relevant to	the taxpayer
or to the taxpayer's requested change in method of ac	ccounting. This includes all informatio			
		lad three rehard this famo		
	· · · · · · · · · · · · · · · · · · ·	tea throughout this form	l	
		umbar for the requested of	utomatia abanga Entar	Waa Na
				Yes No
IRS. If the requested change has no des	signated automatic accounting me	ethod change number, che	eck "Other," and provide	
both a description of the change and cit	tation of the IRS guidance providir	ng the automatic change.	See instructions.	
▶ (a) Change No. 122	b) Other ☐ Description ▶			
(=, = : : : : : : : : : : : : : : : : : :		Proc. 2008-52 cause au	tomatic consent to be	
				/
		gh E of this form (if appli	cable).	
				Yes No
3 Did or will the applicant cease to e	engage in the trade or busines	s to which the request	ed change relates, or	
•	*	= :		
	eral income tax return(s) under e	Admination (See instructi	0113):	
-	licant is requesting to change a	n issue (with respect to	either the applicant or	
		. =		7
American Council of Engineering Companies of Maine American Council of Engineering Companies of Maine American Council of Engineering Companies of Maine Immber, street, and room or suite no. If a P.O. box, see the instructions Tax year of change begins (MM/DD/YYYY) 07/01/2012 Tax year of change begins (MM/DD/YYYY) 06/30/2013 Name of contact person (see instructions) Augusta, ME 04332-5249 James Wilson Contact person's telephone number (see instructions) American Council (see instructions) James Wilson Contact person's telephone number 207-622-9820 If the applicant is a member of a consolidated group, check this box If Form 2848, Power of Attorney and Declaration of Representative, is attached (see instructions for when Form 2848 is equired), check this box Corporation Corporation Sec. 957) Insurance co. (Sec. 1381) Controlled foreign corporation (Sec. 904(d)(2)(E)) Exempt organization. Enter Code section ▶ 501(c)(6) Caution. To be eligible for approval of the requested change in method of accounting, the taxpayer must provide all information that is relevant to the taxpayer of the taxpayer must attach all policiable by the only one designated automatic accounting method change number of the taxpayer must attach all policiable of the provides and of the counting method change number of the taxpayer must attach all policiable subjections of the taxpayer must attach all policiable subjected engineering method change number of the taxpayer must attach all policiable subjected engineering method change number of the requested automatic change Enter only one designated automatic accounting method change number for the requested automatic change Enter only one designated automatic accounting method change number for the requested automatic change Enter only one designated automatic accounting method change number for the requested automatic change Enter only one designated automatic accounting method change number, check "Other," and provide both a description of the change and citation of the IRS				
Under penalties of perjury, I declare that I have examined the application contains all the relevant facts relating to	d this application, including accompanyi	ng schedules and statements,	and to the best of my knowle	edge and belief, is based on all
Mare of territ (pame of parent corporation if a consolidated group) (see instructions) Mare merican Council of Engineering Companies of Maine				
Filer	4	Preparer (other	r than filer/applicant)	
	· mul	Im & Dim	11/ 12/3/13	
Signature and date	~ (0,0017	Signature of individual pr	renaring the application and	date
	Amu	P. Trunnell, CPA	chains are abbused in que	
James Wilson, President Name and title (print or type)			ring the application (print or	type)
The and throng a short		P. Trunnell, CPA	·	
	<u></u>		repanng the application	

Form 311	15 (Rev 12-2009)	P	age 2
Part I	Information For All Requests (continued)	Yes	No
4c	Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the	* · * · ·	
	applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)?		/
	Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)?	,	· · ·
	Is the request to change the method of accounting being filed under the 90-day or 120-day window period? If "Yes," check the box for the applicable window period and attach the required statement (see instructions). ☐ 90 day ☐ 120 day: Date examination ended ▶		✓
	If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination. Name ▶ Tax year(s) ▶		
g	Has a copy of this Form 3115 been provided to the examining agent identified on line 4f?	-	<u> </u>
5a	Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court?		1
	If "Yes," enter the name of the (check the box) ☐ Appeals officer and/or ☐ counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court. Name ▶ Tax year(s) ▶		1 × 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?		
С	Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?		\ \frac{1}{2}
6	If "Yes," attach an explanation. If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group, attach a statement that provides each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court.		
7	If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as a partnership or an S corporation, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity?		
	If "Yes," the applicant is not eligible to make the change.	1. 7	
8a	Does the applicable revenue procedure (advance consent or automatic consent) state that the applicant does not receive audit protection for the requested change (see instructions)?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	If "Yes," attach an explanation.		
9a	Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years (including the year of the requested change)?		
b		*,\\	
С	If any application was withdrawn, not perfected, or denied, or if a Consent Agreement granting a change was not signed and returned to the IRS, or the change was not made or not made in the requested year of change, attach an explanation.		
10a	Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in method of accounting, or technical advice?		1
b	If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in method of accounting, or technical advice), and the specific issue(s) in the request(s).		
11	Is the applicant requesting to change its overall method of accounting?	<u> </u>	1
	If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of accounting. Also, complete Schedule A on page 4 of this form.		

☐ Accrual

✓ Accrual

✓ Cash

☐ Cash

Present method:

Proposed method:

☐ Hybrid (attach description)

☐ Hybrid (attach description)

+1711 Attach a summary of the computation and an explanation of the methodology

used to determine the section 481(a) adjustment. If it is based on more than one component, show the computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see instructions), and

the amount of the section 481(a) adjustment attributable to each applicant.

Form 31	15 (Rev 12-2009)	F	age 4
Part	Section 481(a) Adjustment (continued)		No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?	1.0	
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties?	<i></i>	7
	If "Yes," attach an explanation.	1.00	
Sche	dule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be comple	ted.)	
Par	t Change in Overall Method (see instructions)		
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." Als statement providing a breakdown of the amounts entered on lines 1a through 1g.	o, atta	ch a
		Amount	
а	Income accrued but not received (such as accounts receivable)		4118
b	Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method		
С	Expenses accrued but not paid (such as accounts payable)		2407
d	Prepaid expenses previously deducted		
е	Supplies on hand previously deducted and/or not previously reported		
f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II .		
9	Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment. ▶		
h	Net section 481(a) adjustment (Combine lines 1a–1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25		+171 <u>1</u>
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	s 🔽	No
3	Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applied the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submit Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach explaining the differences.	d used tted wi Part I,	when ith the lines
Par	Change to the Cash Method For Advance Consent Request (see instructions)		
	cants requesting a change to the cash method must attach the following information:		
1	A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and n supplies used in carrying out the business.	naterial	s and
. 2	An explanation as to whether the applicant is required to use the accrual method under any section of the Code of	regula	tions.
Sche	dule B—Change to the Deferral Method for Advance Payments (see instructions)		
1	If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 2004-34, 2004-1 C.B. 991, attach the following information:	of Rev	. Proc.
а	A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.		
b	If the applicant is filing under the automatic change procedures of Rev. Proc. 2008-52, the information require 8.02(3)(a)-(c) of Rev. Proc. 2004-34.	d by s	ection
С	If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information require 8.03(2)(a)-(f) of Rev. Proc. 2004-34.	d by s	ection
2	If the applicant is requesting to change to the deferral method for advance payments described in Regulat 1.451-5(b)(1)(ii), attach the following.	ions s	ection
а	A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).		
b	A statement explaining what portions of the advance payments, if any, are attributable to services, whether sucl integral to the provisions of goods or items, and whether any portions of the advance payments that are a non-integral services are less than five percent of the total contract prices. See Regulations sections 1.451-5(a)(2)(2)(3)	ttributa	able to
_	A statement explaining that the advance payments will be included in income no later than when included in gross		

purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii).

Schedule C-Changes Within the LIFO Inventory Method (see instructions)

Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970**, Application To Use LIFO inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method).
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.).
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable.
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970.

Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure.
- b A description of the types of processes and raw materials used to produce the products in each proposed pool.
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
- **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool.
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3).
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

	Cala	lyle D. Change in the Treatment of Lang Town Contracts Hade	- Cootic- 460	Inventories er	Other	Tage U		
1 To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested change. If the applicant is a construction contractor, attach a detailed description of its construction activities. 2a Are the applicant's contracts long-term contracts as defined in section 460(e) (see instructions)?			r Section 460, I	inventories, or	Juler			
and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requester change. If the applicant is a construction contracts at a defined in section 460(ft) (see instructions)?	Parl	Change in Reporting Income From Long-Term Contracts	(Also complete	Part III on page	es 7 and	8.)		
2a Are the applicant's contracts long-term contracts as defined in section 460(h) (see instructions)?	1	To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested						
If line 2 b is "No," attach an explanation. If line 2 b is "Yes, "is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.460-4(p)? If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(p)? If line 2c is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor. If line 2d is "Yes," attach an explanation of what method the applicant is using and the authority for its use. 3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? If yes, "attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts. Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods. To determine a contract's completion factor using the percentage-of-completion method: Will the applicant set the cost-to-cost method in Regulations section 1.460-4(p)? Yes No If line 4 is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-4(p)? Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts. Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III on pages 7 and 8.) Attach a description of the inventory goods being changed. Attach a description of the inventory goods firmly) NOT being changed. Attach a description of the inventory goods firmly) NOT being changed. If No, 'attach a delated explanation (see the applicant will be applicant subject to section 283A? If 'No,' go to line 4a (see the applicant's present inventory valuation method in compliance with section 263A (see instructions)? Yes No Inventory Not Inventory Read Inventory in the August Inventory Read Inventory Read Inventory Read Inventory		Are the applicant's contracts long-term contracts as defined in section 460)(f)(1) (see instruct	ions)?	☐ Yes	= : :		
cost under Regulations section 1.460-4(p)? If line 2 to 1s "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(p)(2)? If line 2 d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor. If line 2 d is "No," attach an explanation of what method the applicant is using and the authority for its use. Boes the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? Other the applicant and explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts. Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods. To determine a contract's completion factor using the percentage-of-completion method: Will the applicant use the cost-to-cost method in Regulations section 1.460-4(p)? If line 4 a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))? Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts. Partitle Change in Valuing inventories including Cost Allocation Changes (Also complete Part III on pages 7 and 8.) Attach a description of the inventory goods (if any) NOT being changed. Is the applicant's present inventory agods (if any) NOT being changed. Is the applicant's present inventory valuation method in compliance with section 283A (see instructions)? Yes No Inventory Being Changed Freeet method Proposed method Present method Present method Cost or market, whichever is lower Retail, lower of cost or market Other (attach explanation) Valuation methods: Cost or market, whichever is lower Retail, lower of cost or market Other (attach explanation) Free the value at the end of the tax year preceding the year of change If the applicant is changing from		If line 2b is "No," attach an explanation.						
method under Regulations section 1.460-4c)(2)? If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor. If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use. 3D Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts. Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods. To determine a contract's completion factor using the percentage-of-completion method: Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)? If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))? Attach a description of the inventory goods being changed. Attach a description of the inventory goods being changed. Attach a description of the inventory goods being changed. Attach a description of the inventory goods being changed. Attach a description of the inventory goods (if any) NOT being changed. Attach a description of the inventory yaduation method in compliance with section 263A (see instructions)? If "No," attach a detailed explanation. Present method Check the appropriate boxes below. Identification methods. Specific identification. FIFO Other (attach explanation) Valuation methods: Cost Cost or market, whichever is lower Retail lower of cost or market Other (attach explanation) The present method of the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (st instructions). The proposed method of the present method. Copies of Form(s) 970 filed to adopt or expand the use of the method. Copies of Form(s) 970 filed to adopt or expand the use of the method. Conly for applicant	С	cost under Regulations section 1.460-4(b)?			☐ Yes	□ No		
contract's completion factor. If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use. 3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?	d	method under Regulations section 1.460-4(c)(2)?			☐ Yes	□ No		
Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?		contract's completion factor.	•					
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Is the applicant subject to section 263A? If "No," go to line 4a	2	Attach a description of the inventory goods (if any) NOT being changed.						
If "No," attach a detailed explanation	За	Is the applicant subject to section 263A? If "No," go to line 4a			☐ Yes	□ No		
If "No," attach a detailed explanation	b	Is the applicant's present inventory valuation method in compliance with	section 263A (see	e instructions)?				
Check the appropriate boxes below. Identification methods. Specific identification					☐ Yes	☐ No		
Check the appropriate boxes below. Identification methods. Specific identification FIFO LIFO Other (attach explanation) Valuation methods: Cost Cost or market, whichever is lower Retail cost Retail, lower of cost or market Other (attach explanation) b Enter the value at the end of the tax year preceding the year of change If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (so instructions). a Copies of Form(s) 970 filed to adopt or expand the use of the method. b Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method required by Regulations section 1.472-6(a) or (b), or whether the applicant is proposing a different method. c Only for applicants requesting an automatic change. The statement required by section 22.01(5) of the Appendix of Reproc. 2008-52 (or its successor).			Inventory Pr	ong Changad	Inver	tory Not		
Identification methods. Specific identification	4a	Check the appropriate boxes below.	inventory be	ang Changed	Being	Changed		
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Retail, lower of cost or market					1			
Retail, lower of cost or market								
Other (attach explanation)						_		
b Enter the value at the end of the tax year preceding the year of change If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (so instructions). a Copies of Form(s) 970 filed to adopt or expand the use of the method. b Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method required by Regulations section 1.472-6(a) or (b), or whether the applicant is proposing a different method. c Only for applicants requesting an automatic change. The statement required by section 22.01(5) of the Appendix of Re Proc. 2008-52 (or its successor).		·						
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		required by Regulations section 1.472-6(a) or (b), or whether the applicant Only for applicants requesting an automatic change. The statement	t is proposing a d	ifferent method.				
		Proc. 2008-52 (or its successor).			0445			

Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

Section A-Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following:

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

Section B-Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposed method
1	Direct material		<u> </u>
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs	<u>. </u>	
9	Handling, processing, assembly, and repackaging costs	-11-5-5	
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs.)		
			0448

	Method of Cost Allocation (see instructions) (continued)			
	n C-Other Costs Not Required To Be Allocated (Complete Section C only if the ap	plicant is reques	iting to ch	nange its
metho	d for these costs.)	5	T B	4454
		Present method	Proposed	d method
1	Marketing, selling, advertising, and distribution expenses		 	
2	Research and experimental expenses not included in Section B, line 26		 	
3	Bidding expenses not included in Section B, line 22	<u> </u>	-	
4	General and administrative costs not included in Section B			
5	Income taxes		 	
6	Cost of strikes		-	
7	Warranty and product liability costs		 	
8			<u> </u>	
9	On-site storage		-	<u>-</u>
10	Depreciation, amortization, and cost recovery allowance not included in Section B,			
	line 11		+	
11	Other costs (Attach a list of these costs.)			
Sche	dule E—Change in Depreciation or Amortization (see instructions)			
	ants requesting approval to change their method of accounting for depreciation or a		plete this	section.
	ants must provide this information for each item or class of property for which a change is re			
	See the List of Automatic Accounting Method Changes in the instructions for inform			
	sections 56, 167, 168, 197, 1400l, 1400L, or former section 168. Do not file Form 3115 w	with respect to co	ertain late	elections
and el	ection revocations (see instructions)			_
1	Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)	?	☐ Yes	☐ No
	If "Yes," the only changes permitted are under Regulations section 1.167(a)-11(c)(1)(III).			
2	Is any of the depreciation or amortization required to be capitalized under any Code section	n (e.g., section	_	_
	263A)?		Yes	☐ No
	If "Yes," enter the applicable section ▶			
3	Has a depreciation, amortization, or expense election been made for the property (e.g., the			
	sections 168(f)(1), 179, or 179C)?		☐ Yes	∐ No
	If "Yes," state the election made ▶			
4a	To the extent not already provided, attach a statement describing the property being cha	nged. Include in	the descr	iption the
	type of property, the year the property was placed in service, and the property's use in	the applicant's to	ade or bu	isiness or
	income-producing activity.			п
ь	If the property is residential rental property, did the applicant live in the property before rent		∐ Yes	□ No
С	Is the property public utility property?		☐ Yes	☐ No
5	To the extent not already provided in the applicant's description of its present method, att			
	property is treated under the applicant's present method (e.g., depreciable property,			
_	Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible			
6	If the property is not currently treated as depreciable or amortizable property, attach a st	atement of the t	acts supp	orting the
-	proposed change to depreciate or amortize the property.	ala proporti ==	ovida tha	following
7	If the property is currently treated and/or will be treated as depreciable or amortizal information for both the present (if applicable) and proposed methods:	ые ргорепу, рг	ovide trie	ionowing
_	The Code section under which the property is or will be depreciated or amortized (e.g., sec	tion 168(a))		
a			400 (M	40D0\ -
b	The applicable asset class from Rev. Proc. 87-56, 1987-2 C.B. 674, for each asset depreci			
	under section 1400L, the applicable asset class from Rev. Proc. 83-35, 1983-1 C.B. 745 former section 168 (ACRS); an explanation why no asset class is identified for each ass			
	been identified by the applicant.	et for willon air	asser cias	13 1143 110
С	The facts to support the asset class for the proposed method.			
_	The depreciation or amortization method of the property, including the applicable Code si	action (e.g. 2000	% decline	n halance
d	method under section 168(b)(1)).	5011011 (6.g., 200	, acciiiii	y paidilio
е	The useful life, recovery period, or amortization period of the property.			
f	The applicable convention of the property.			
9	A statement of whether or not the additional first-year special depreciation allowance (f	or example, as i	provided t	ov section
9	168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the propert			
	as to why no special depreciation allowance was or will be claimed.	,, a.co pre		,
			n 3115 (F	2 10 0000

American Council of Engineering Companies of Maine Tax ID # 01-0414899 Attachments to Form 3115

Part II, line 13 -

Tax exempt trade association whose primary purpose is to protect the public interest, to advance the professional quality of consulting engineering both nationally and in Maine by continually improving the business practices of consulting engineering, and otherwise to promote the common business interests of its members.

Schedule A, Part I, line 3 -

Attached are copies of the pages 1 and 2 of the Form 990EZ filed for the preceding year, ending June 30, 2012 which was reported on the cash basis. Amounts in Part I, lines 1a through 1g do not agree with the attached documents because they indicate accrual income and expenses. Details of the amounts shown in lines 1a through 1g are as follows:

1a.	Dues and program revenue receivable	\$ 4,118
1c.	Administrative fees and expenses payable	(2,407)
	Net section 481(a) adjustment	<u>\$ 1,711</u>

Attachment · Form 3115

Form **990-EZ**

Department of the Treasury Internal Revenue Service

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 fruist or private foundation)
Sponsoring organizations of dohor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 5 12(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.

OMB No 1545-1150

Open to Public .

		\mathbf{z} 2011 calendar year, or tax year beginning $\mathbf{JUL} \ 1$, $\ 2011$ and ending \mathbf{JU}		0, 2	
R C	heck if		D Emp	loyer id	entification number
	Addre	ss change American Council of Engineering			
		change Companies of Maine			14899
X	Initial	· · · · · · · · · · · · · · · · · · ·		phone r	
느	Termi		207-622-9820		
Ļ		City or town, state or country, and ZIP + 4	F Gro	up Exen	ption
<u> </u>	Applica	hon pending Augusta, ME 04332-5249		nber ►	
		ting Method: X Cash	H Che	ck 🖊	X if the organization is not
		e: ▶www.acecmaine.org	requ	ured to	attach Schedule B
<u>J</u>	ax-ex	empt status (check only one) 501(c)(3) X 501(c) (6) ◀(insert no.) 4947(a)(1) or 527			990-EZ, or 990-PF).
	heck				
). A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instruction	ons). Bu	it if the i	organization chooses to file
		, be sure to file a complete return.			
		es 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,		405 005
		column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	<u>. </u>	\$	106,286.
1	irt I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instri	uctions	tor Part	
		Check if the organization used Schedule O to respond to any question in this Part		. 1	<u> </u>
	1	Contributions, gifts, grants, and similar amounts received		1	6,800.
	2	Program service revenue including government fees and contracts		2	1,980.
	3	Membership dues and assessments		3	96,305.
	4	Investment income		4	
	Ι.	Gross amount from sale of assets other than inventory Less; cost or other basis and sales expenses		áU	
	D	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			
	C 6			5c	
	١ ٠,	Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than		, }	
Ę	*			<i>3</i> :	
Revenue	١,	\$15,000) Gross income from fundraising events (not including \$ of contributions			
æ	"	from fundraising events reported on line 1) (attach Schedule G if the sum of such		30° 10' 9	
		gross income and contributions exceeds \$15,000)			
	6	Less: direct expenses from gaming and fundraising events 6c			
	ď	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	
	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)		7c	
	8	Other revenue (describe in Schedule 0) See Schedule 0		8	1,201.
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	106,286.
	10	Grants and similar amounts paid (list in Schedule 0) See Schedule 0		10	32,853.
	11	Benefits paid to or for members		11	
S	12	Salaries, other compensation, and employee benefits		12	
SC	13	Professional fees and other payments to independent contractors		13	40,873.
Expenses	14	Occupancy, rent, utilities, and maintenance		14	
Ш	15	Printing, publications, postage, and shipping		15	158.
	16	Other expenses (describe in Schedule 0) See Schedule 0		16	12,302.
_	17	Total expenses. Add lines 10 through 16	>	17	86,186.
ςς	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	20,100.
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))		ř.	·····
AS		(must agree with end-of-year figure reported on prior year's return)		19	30,736.
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule 0)		20	0.
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	<u> </u>	21	50,836.
LH/	∖ Foi	Paperwork Reduction Act Notice, see the separate instructions.			Form 990-EZ (2011)

Attachment Form 3115

· American Council of Engineering 01-0414899 Form 990-EZ (2011) Companies of Maine Page 2 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 (B) End of year (A) Beginning of year 30.736. 50,836. Cash, savings, and investments 22 23 23 Land and buildings Other assets (describe in Schedule O) 24 24 50.836. 30,736. 25 Total assets 25 0. 26 0. Total liabilities (describe in Schedule 0) 26 30,736. 27 50,836. Net assets or fund balances (line 27 of column (B) must agree with line 21) Part III | Statement of Program Service Accomplishments (see the instructions for Part III.) Expenses (Required for section Check if the organization used Schedule O to respond to any question in this Part III X 501(c)(3) and 501(c)(4) What is the organization's primary exempt purpose? See Schedule O organizations and section 4947(a)(1) trusts; optional Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise for others.) manner, describe the services provided, the number of persons benefited, and other relevant information for each program title 28 See Schedule O (Grants \$) If this amount includes foreign grants, check here 29 29a (Grants \$) If this amount includes foreign grants, check here 30) If this amount includes foreign grants, chếck here 30a 31 Other program services (describe in Schedule O)) If this amount includes foreign grants, check here 315 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 (b) Title and average hours (C) Reportable ompensation (Forms W-2/1099-MISC) (d) Health benefits. (e) Estimated contributions to employee benefit plans, and deferred compensation per week devoted to amount of other (a) Name and address position compensation Robert Patten President 776 Main Street, Westbrook, ME 04092 0 0 0. 2.00 Brett Hart Treasurer 136 Center Street, Old Town, ME 04468 0. 0. 2.00 0. Joann Fryer Secretary 0. 0. 316 US Rt 1, York, ME 03909 2.00 0. Owen McCullough Director One Chabot St, Westbrook, ME 04098 0. 0. 1.00 0. Gene Shephard Director 511 Congress St, Portland, ME 04101 0. 0. 0. 1.00 Carolyn Bird Director 424 Fore St, Portland, ME 04101 1.00 0 0. 0. James Wilson, One Merchants Plaza, President-Elect; Director Suite 501, Bangor, ME 04401 1.00 0. 0. 0. John Nelson Director 99 Main Street, ME 04086 0. 0 Topsham, 1.00 0. Scott Graham Director 136 Center Street, Old Town, ME 04468 0. 0 0. 1.00 Bruce Ward Director 482 Payne Rd, Scarborough, ME 04074 0 0. 1.00 0. Randy Bragg, 687 Stillwater Ave, Old Director Town, ME 04468 1.00 0. 0. 0.

Form **990-EZ** (2011)

132172 02-06-12

Form **8868**.

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		•	X	
If you	are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	omplete only Part II (on page 2 of t	his form).			
Do not d	complete Part II unless you have already been granted a	ın automa	tic 3-month extension on a previousl	y filed Fori	m 8868.		
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tim	e to file (6	months for a corp	poration	
required	to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	ion of time. You can electronically fil	e Form 88	68 to request an	extension	
of time to	ofile any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for T	ransfers A	ssociated With C	ertaın	
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format ((see instructions). For more details o	n the elect	tronic filing of this	form,	
visit www	v.irs.gov/efile and click on e-file for Charities & Nonprofits		<u> </u>				
Part I	Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies nee	eded).			
A corpor	ation required to file Form 990-T and requesting an autor	natic 6-mo	nth extension - check this box and o	complete			
Part I on	у					>	
	corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	t an extens	sion of time		
	ome tax returns.						
Type or	Name of exempt organization or other filer, see instru			Employer	imployer identification number (EIN) or $01{-}0414899$		
print	American Council of Engine	ering					
File by the	Companies of Maine						
due date fo filing your return See	Number, street, and room or suite no. If a P.O. box, s 77 Sewall Street, No. 3000	ee Instruci	tions.	Social sec	curity number (SS	·N) 	
instructions	City, town or post office, state, and ZIP code. For a for Augusta, ME 04332-5249	oreign add	ress, see instructions.				
	nagasca, in 04332 3243						
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 1	
		-					
Applicat	ion	Return	Application			Return	
Is For		Code	Is For			Code	
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 99	0-BL	02	Form 1041-A			08	
Form 47	20 (ındıvıdual)	03	Form 4720			09	
Form 99	0-PF	04	Form 5227				
Form 99	0-T (sec 401(a) or 408(a) trust)	05	Form 6069	 		11	
Form 99	0-T (trust other than above)	06	Form 8870			12	
	Eaton Peabody			04222	5040		
	pooks are in the care of \triangleright 77 Sewall St,	ste 3			-5249		
	hone No. ► 207-622-9820		FAX No. ► 207-622-97	32		. —	
	organization does not have an office or place of busines					-	
	is for a Group Return, enter the organization's four digit	•	· · · · · · · · · · · · · · · · · · ·		the whole group		
box ▶	. If it is for part of the group, check this box		ach a list with the names and EINs o		<u>ers the extension</u>	is for.	
1 In	equest an automatic 3-month (6 months for a corporation February 15, 2014, to file the exemp				The extension		
	for the organization's return for:	r organiza	mon return for the organization harm	od above	THE EXICHSION		
 •	calendar year or						
•		. an	nd ending JUN 30, 2013				
		· · ·					
2 If	the tax year entered in line 1 is for less than 12 months, o	heck reas	on Initial return	Final retur	n		
	Change in accounting period						
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
no	nrefundable credits. See instructions.			3a	\$	0.	
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			_	
es	timated tax payments made. Include any prior year over	payment a	llowed as a credit.	3b	\$	<u> </u>	
с Ва	alance due. Subtract line 3b from line 3a. Include your pa	ayment wi	th this form, if required,			•	
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.	
	. If you are going to make an electronic fund withdrawal			orm 8879-			
LHA	For Privacy Act and Paperwork Reduction Act Notice	, see instr	uctions.		Form 8868	(Rev. 1-2013)	