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DLN: 93493126018215

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	endar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-	2014					
B Ch	eck ıf a	applicable	C Name of organization The American Society of Mechanical Engineers		D Employe	identifi	cation number		
☐ Add	ress cl	hange	,		13-1623	3899			
∏ Na	me cha	ange	Doing Business As ASME						
_	ial retu		Number and street (or P O box if mail is not delivered to street address) Room/suite TWO PARK AVENUE		E Telephone	number			
	mınate 		Suite		(212)59	1-700	0		
		return n pending	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10016						
i Abi	Jilcatioi	ii penung	F. Name and address of numerical officers		G Gross rece	•	5,071,623		
			F Name and address of principal officer THOMAS G LOUGHLIN		is a group re rdinates?	turn for	┌ Yes 🗸 No		
			TWO PARK AVENUE						
			NEW YORK, NY 10016	H(b) Are a	all subordina	tes	┌ Y es ┌ No		
I Ta	x-exen	npt status	▼ 501(c)(3)			lıst (se	e instructions)		
J W	ebsite	e: ► WW	W ASME ORG	H(c) Grou	up exemptior	numbe	r ►		
K For	n of or	rganization	✓ Corporation Trust Association Other ►	L Year of fo	rmation 1880	M Stat	e of legal domicile NY		
	rt I		mary				o en regar de rimene in r		
Governance	'		escribe the organization's mission or most significant activities MOTE THE ART, SCIENCE AND MULTIDISCIPLINARY ENGINEERING	AND ALLI	ED SCIENC	ES ARC	UND THE		
<u> </u>									
30VE	2	Check th	his box $lacktriangledown$ if the organization discontinued its operations or disposed of i	more than 2	25% of its ne	t asset	s		
	3	Number	of voting members of the governing body (Part VI, line 1a)		1	з	12		
Activities &			of independent voting members of the governing body (Part VI, line 1b)		⊢	4	12		
Ĭ			mber of individuals employed in calendar year 2013 (Part V, line 2a)		_	5	448		
হ	6	Total nu	mber of volunteers (estimate if necessary)			6	8,000		
	7a	Total un	related business revenue from Part VIII, column (C), line 12		🗔	7a	1,553,101		
	ь	Net unre	elated business taxable income from Form 990-T, line 34		7	7b	179,835		
				Pric	or Year		Current Year		
_	8	Contri	butions and grants (Part VIII, line 1h)		10,010,42	9	606,591		
Revenue	9	Progra	am service revenue (Part VIII, line 2g)	42,843,88		8	63,670,381		
e ve	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)		5,945,18	0	5,320,085		
ш.	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		33,508,58	8	32,843,301		
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		92,308,08	5	102,440,358		
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		478,77	6	48,173		
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)			0	0		
\$	15	Saları 5–10	es, other compensation, employee benefits (Part IX, column (A), lines		50,465,66	1	52,832,851		
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)			0	0		
ੜ	ь	Total fu	ındraısıng expenses (Part IX, column (D), lıne 25) ▶0	expenses (Part IX, column (D), line 25) •0					
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		43,691,42	7	47,721,224		
	18	Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		94,635,86	4	100,602,248		
	19	Reven	ue less expenses Subtract line 18 from line 12		-2,327,77	9	1,838,110		
Not Assets or Fund Balances				_	g of Current /ear		End of Year		
ess. Bak	20	Total	assets (Part X, line 16)		164,052,95	8	189,185,105		
2 E	21		liabilities (Part X, line 26)		73,232,59		83,989,480		
	22		ssets or fund balances Subtract line 21 from line 20		90,820,36	6	105,195,625		
Unde my k	nowled arer ha	alties of dge and as any k	perjury, I declare that I have examined this return, including accompanying belief, it is true, correct, and complete Declaration of preparer (other than nowledge *** ature of officer IAM GAROFALO ASSISTANT TREASURER	officer) is					
			or print name and title						
 Paid	4	F	Print/Type preparer's name Preparer's signature Date OCELYNE MILLER KPMG LLP	I CIR		TIN 00634378			
	a pare		irm's name	Firm	n's EIN 🟲				
	On		Firm's address > 345 PARK AVENUE	Pho	one no (212) 5	91-7000			

NEW YORK, NY 10154

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

✓ Yes ☐ No

Forn	n 990 (2013)					Page 2
Pai		t of Program Serv				_
	Check if Sch	nedule O contains a res	ponse or note t	to any line in this Part II	ı	
1	Briefly describe th	e organization's missio	n			
					G, DISSEMINATING AND AF HE EXCITEMENT OF ENGINE	
2	Did the organizatio the prior Form 990		cant program s	ervices during the year w	which were not listed on	┌ Yes ┌ No
	If "Yes," describe t	hese new services on S	Schedule O			
3	Did the organizatio	——————————————————————————————————————	make sıgnıfıca	nt changes in how it cond	ducts, any program	┌ Yes ┌ No
	If "Yes," describe t	hese changes on Sche	dule O			
4	expenses Section		4) organization	s are required to report t	e largest program services, a he amount of grants and alloc	
4a	(Code) (Expenses \$	19,227,682	ıncludıng grants of \$	396,568) (Revenue \$	31,621,458)
	DEMONSTRATED ABIL		TENTS OF AN ASME		IPANY OR AN INDIVIDUAL IS ASSESS OVIDE A VITAL SERVICE TO ENHANC	
4b	(Code) (Expenses \$	14,492,719	ıncludıng grants of \$) (Revenue \$	1,402,097)
		CES AND PREPARES THE TE EDINGS AND BOOKS, BOTH 1			C DISTRIBUTION AND SALE IN THE F	ORM OF JOURNALS,
4c	(Code) (Expenses \$	12,694,285	ıncludıng grants of \$) (Revenue \$	6,199,744)
				ECHNICAL MECHANICAL ENGI CHANICAL ENGINEERING TOPI	NEERING ISSUES, AND HOLDS TECH CS AND SUBJECTS	NICAL MEETINGS AND
	Other program se	rvices (Describe in Sch	nedule O)			

) (Revenue \$

21,719,196 including grants of \$

68,133,882

(Expenses \$

Total program service expenses ►

38,561,152)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
L 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

GI I	Statements Regarding Other 1R5 Fillings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	.j∨ No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 343		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
1	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
,	If "Yes," enter the name of the foreign country ▶UK, CH			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to fine 50 of 55, and the organization meriorin 0000-1.	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	ı	
	Organizations that may receive deductible contributions under section 170(c).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		
		1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	٣		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	•		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	[
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Ν
	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		
	Did the organization have local chapters, branches, or affiliates?		Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a	Yes Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10a 10b	Yes Yes Yes	
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b	Yes Yes Yes	
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
b 111a b 112a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
b 111a b 112a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ►THOMAS MEEHAN CONTROLLER 22 LAW DRIVE
 FAIRFIELD,NJ 07004 (973) 244-2255

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

Check if Schedule O contains a response or note to any line in this Part VII $\,\cdot\,\,$. $\,\cdot\,\,$.

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	office	ess er :)	from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
(1) ANDREW C TAYLOR	4 0	V						0	0		
MEMBER-AT-LARGE	1 0	X						0	0	(
(2) BERNARD HRUBALA	4 0										
MEMBER-AT-LARGE	1 0	X						0	0	(
(3) BETTY L BOWERSOX	4 0										
MEMBER AT LARGE		Х						0	0	(
MEMBER-AT-LARGE (4) CHARLA K WISE	1 0										
		х						0	0	(
MEMBER-AT-LARGE	10										
(5) J ROBERT SIMS JR	4 0	l x						0	0	(
PRESIDENT-NOMINEE/ELECT	1 0										
(6) JOHN F ELTER	4 0	l x						0	0	(
MEMBER-AT-LARGE	1 0							ŭ	9	,	
(7) JULIO C GUERRERO	4 0	<u></u>									
MEMBER-AT-LARGE	1 0	X						0	0	(
(8) MADIHA EL MEHELMY KOTB	4 0										
PRESIDENT	1 0	X		Х				0	0	(
(9) MARC W GOLDSMITH	4 0										
PAST PRESIDENT	2.0	Х		Х				0	0	(
(10) RICHARD T LAUDENAT	2 0										
		х						0	0	(
MEMBER-AT-LARGE	10				_						
(11) STACEY S HARNETTY	4 0	x						0	0	(
MEMBER-AT-LARGE	1 0										
(12) WILLIAM M WOREK	4 0	l x						0	0	(
MEMBER-AT-LARGE	1 0							Ŭ	3	,	
(13) WARREN DEVRIES	4 0] ,		,					S	,	
SECRETARY	10	×		×				0	0	(
(14) JOHN DELLI VENNERI	40 0										
ASSISTANT SECRETARY	1 0			Х				332,856	0	40,481	
(15) JUNE LING	40 0										
,				х				388,645	0	170,893	
2ND ASSISTANT Treasurer (16) THOMAS LOUGHLIN	1 0			\vdash	\vdash	\vdash					
				х				622,215	0	268,200	
EXECUTIVE DIRECTOR	2 5				_						
(17) WILLIAM GAROFALO	40 0			х				285,960	0	15,060	
ASSISTANT TREASURER	2 0		I	l		1		l '		•	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot ect	not box h ar or/tr	chec k, unle n offic- ustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(18) LAUREL RASO	40 0				X			289,331	0	131,918
MANAGING DIRECTOR	0 0									
(19) MICHAEL MERKER	40 0				х			303,833	0	106,957
MANAGING DIRECTOR	0 0									
(20) ROY ARBEIT MANAGING DIRECTOR	40 0				х			279,451	0	37,565
(21) JAMES REESE MEISINGER	0 0 40 0									
MANAGING DIRECTOR	3 0					х		266,290	0	76,342
(22) MARK SHEEHAN	40 0					x		265,783	0	104,783
MANAGING DIRECTOR	0 0					^		203,703	0	104,703
(23) MICHAEL IRELAND	40 0					х		253,147	0	73,082
MANAGING DIRECTOR	0 0								_	,
(24) SRINI CHANDRA SHEKHAR	40 0					x		221,473	0	28,306
MANAGING DIRECTOR	5 0									
(25) WILLIAM BERGER	40 0					x		283,962	0	118,054
MANAGING DIRECTOR	0 0									
1b Sub-Total						F				1
c Total from continuation sheets to Part						►				
d Total (add lines 1b and 1c)	-					•		3,792,946	0	1,171,641
Total number of individuals (including b					bove	e) who	rec	eived more than		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
3 PARK LLC, PO BOX 347398 PITTSBURGH PA 15320	RENT & PROPERTY SVCS	3,619,028
PATTERSON BELKNAP WEBB TYLER LLP, 1133 AVE OF THE AMERICAS NEW YORK NY 10036	LEGAL SERVICES	1,091,389
BALLARD SPAHR LLP, 1735 MARKET ST 51ST FLOOR PHILADELPHIA PA 19103	LEGAL SERVICES	337,536
DANIEL E CHEETHAM, 9203 ELKWOOD COURT PASADENA CA 21122	CONSULTANT	269,206
PATRICK M NIGHTENGALE, 2217 AVENTURA DRIVE MOUNT JULIET TN 371226477	CONSULTANT	206,316

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►14

Part VI	111	Statement of Chack of School	of Revenue ule O contains a respor	ose or note to any lin	e in this Part VIII			Г
		CHECK II SCHOOL	uic o contums a respon	ise of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
u se	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	ıes 1b					
ons, Gifts, Grants Similar Amounts	c	Fundraising ev	ents 1c	13,210				
£, ₹	d		zations 1d	569,988				
5 है	e	Government grant						
Sin's	e	_						
탈닐	f	similar amounts no	ons, gifts, grants, and 1f ot included above	23,393				
tribution Other	g	g Noncash contributions included in lines 1a-1f \$		į	į	j	İ	
Cont	h	Total. Add line:	s 1 a - 1 f		606,591			
ه د		Totall / (dd illie:		· · · · •	,			
E	2a	CONFORMITY ASS	ECCMENT	Business Code	21 621 450	21 621 450		
ever	b	TRAINING AND DE		611430	31,621,458	31,621,458		
α Έ	c	INSTITUTES SECT		511130 611430	7,082,144 7,388,490	7,082,144		
3 2	d	KNOWLEDGE AND		611430	6,199,744	7,388,490 6,199,744		
Program Serwoe Revenue	e	MEMBERSHIP DUE		511120	8,290,363	8,290,363		
ra Fe	f		am service revenue	311120	3,088,182	1,707,273	1,213,650	167,25
ွို					3,000,102	1,707,275	1,213,030	107,23
-	g		s 2a-2f		63,670,381			
	3		come (including dividendar ar amounts)		2,605,158			2,605,15
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties .		🔸	18,394,376			18,394,37
	_		(ı) Real 68,356	(II) Personal				
	6a b	Gross rents Less rental	61,680					
	_	expenses	6,676	0				
	С	Rental income or (loss)	,	0				
	d	Net rental inco	me or (loss)		6,676		6,676	
	7a	Gross amount from sales of assets other	(1) Securities 45,515,659	(II) O ther				
	b	than inventory Less cost or other basis and sales expenses	42,800,732					
	c	Gain or (loss)	2,714,927					
	d	Net gain or (los	ss)		2,714,927			2,714,92
Other Revenue	8a	т	luding 3,210 s reported on line 1c)					
<u> </u>	ь	Less direct ex	penses b	4,596				
5	c		(loss) from fundraising		-4,596			
	9a		from gaming activities ne 19 a					
	b	Less direct ex	penses b					
			(loss) from gaming acti	vities	0			
	10a	Gross sales of returns and allo		32,492,496				
	b	Less costofa	oods sold b	19,764,257				
			(loss) from sales of inve		12,728,239	12,728,239		
		Mıscellaneou	s Revenue	Business Code				
	11a	OTHER INCOM	ME	900001	1,385,831	1,385,831		
	b	JOB BOARD R	EVENUE	900001	332,775		332,775	
	C							
	d		ue					
	е	Total. Add line:	s 11a-11d		1,718,606			
	12	Total revenue.	See Instructions .	· · · · •	102,440,358	76,403,542	1,553,101	23,881,72

Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) organizations	s must complete all columns	All other organizations must o	omplete column (A)
--	-----------------------------	--------------------	-----------------------------	--------------------------------	-------------------	---

	Check if Schedule O contains a response or note to any line in this				
,	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	48,173	48,173		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,779,909	2,458,652	1,321,257	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	34,452,358	25,839,269	8,613,089	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	4,556,545	3,098,451	1,458,094	
9	Other employee benefits	7,619,245	5,638,241	1,981,004	
10	Payroll taxes	2,424,794	1,745,852	678,942	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	2,317,324	1,501,114	816,210	
С	Accounting	210,101	12,839	197,262	
d	Lobbying	270,000	270,000		
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	322,767		322,767	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	E 902 76E	2 245 505	2 (40 100	
12	Schedule O)	5,893,765	3,245,585		
13	Advertising and promotion	1,666,740	1,658,939		
14	Information technology	3,598,458 1,752,883	1,913,916 1,296,823	1,684,542 456,060	
	Royalties			456,060	
15	·	157,713 6,537,007	157,713 1,487,639	5.040.360	
16 17	Occupancy	5,151,023		5,049,368 975,669	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	3,131,023	4,175,354	973,009	
19	Conferences, conventions, and meetings	8,860,657	8,530,792	329,865	
20	Interest	0,000,037	-,555,752	223,003	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,651,983	1,287,431	4,364,552	
23	Insurance	296,722	115,191	181,531	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	,	,	,	
а	A WARDS & HONORARIUMS	1,198,289	1,185,732	12,557	
b	PROFESSIONAL SUPPORT	945,864	797,336	148,528	
c	PUBLICATION PRODUCTION	170,961	158,704	12,257	
d	CHAPTER EXPENSES	348,395	348,395		
e	All other expenses	2,370,572	1,161,741	1,208,831	
25	Total functional expenses. Add lines 1 through 24e	100,602,248	68,133,882	32,468,366	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	T X	Check if Schedule O contains a response or note to any line in this Part X	<u></u>		<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	14,468,135	1	14,400,115
	2	Savings and temporary cash investments	826,553	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	12,157,315	4	15,483,094
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	o	5	0
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0		0
Assets		Niches and Issue versusable web	0	7	0
As	7	Notes and loans receivable, net	1,790,104		
	8	Inventories for sale or use	2,909,680	9	1,012,490 2,469,485
	9	Prepaid expenses and deferred charges	2,909,680	9	2,469,465
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 60,565,829			
	b	Less accumulated depreciation	. ,		29,330,375
	11	Investments—publicly traded securities	99,922,722	11	126,489,546
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	164,052,958	16	189,185,105
	17	Accounts payable and accrued expenses	47,250,032	17	49,776,322
	18	Grants payable	0	18	0
	19	Deferred revenue	25,982,560	19	34,213,158
	20	Tax-exempt bond liabilities	0	20	0
Ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L	О	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	0	25	0
	26	Total liabilities. Add lines 17 through 25	73,232,592	26	83,989,480
s e s		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
e G	27	Unrestricted net assets	90,291,314	27	104,618,387
<u> </u>	28	Temporarily restricted net assets	392,485	28	440,671
₹	29	Permanently restricted net assets	136,567	29	136,567
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Ą.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
*	33	Total net assets or fund balances	90,820,366	33	105,195,625
Net	34	Total liabilities and net assets/fund balances	164,052,958		189, 185, 105
	J-4	i otal navinties and net assets/lund valantes	104,002,908	34	109, 100, 100

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				.
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		102,4	40,358
2	Total expenses (must equal Part IX, column (A), line 25)	2		100,6	502,248
3	Revenue less expenses Subtract line 2 from line 1	3		1 (338,110
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	-		1,0	30,110
•	Net assets of faile balances at beginning of year (mast equal 1 are x, mile 33, column (A))	4		90,8	320,366
5	Net unrealized gains (losses) on investments	5		12,7	732,202
6	Donated services and use of facilities			<u> </u>	· ·
_	_	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	•			
•	the changes in her assets of faile safances (explain in schedule 6).	9		-1	95,053
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		105,1	.95,625
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separasis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	<u></u>	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

	the organization	Employer identification number								
ne americ	an Society of Mechanical Engineers	13-1623899								
Part I										
	nization is not a private foundation because it is (For lines 1 through 11, check only one box	•								
1 F	A church, convention of churches, or association of churches described in section 170(b)	•								
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)	(=)()(-)-								
ъ , з Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A	Miii								
4 F	A medical research organization operated in conjunction with a hospital described in section	• • •	r the							
• ,	hospital's name, city, and state	on 170(b)(1)(A)(iii). Ente	i ciic							
5	An organization operated for the benefit of a college or university owned or operated by a g	jovernmental unit describe	ed in							
	section 170(b)(1)(A)(iv). (Complete Part II)									
6 T	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)									
·		_	·							
8 _	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)									
A community trust described in section 170(b)(1)(A)(vi) An organization that normally receives (1) more than 33 receipts from activities related to its exempt functions—its support from gross investment income and unrelated acquired by the organization after June 30, 1975. See see	An organization that normally receives (1) more than 331/3% of its support from contribut	ions, membership fees, ar	ıd gros	S						
	receipts from activities related to its exempt functions—subject to certain exceptions, and	d (2) no more than 331/3%	of							
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses									
	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part	III)								
lo 厂	An organization organized and operated exclusively to test for public safety See section 5	i09(a)(4).								
l 1 ┌	An organization organized and operated exclusively for the benefit of, to perform the functi	ons of, or to carry out the	purpos	es of						
	one or more publicly supported organizations described in section 509(a)(1) or section 50		a)(3).	Check						
	the box that describes the type of supporting organization and complete lines 11e through a Type I b Type II c Type III - Functionally integrated d Ty		intogra	tod						
		•	_							
e	By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization									
	section 509(a)(2)		, , (=)(=	.,						
f	If the organization received a written determination from the IRS that it is a Type I, Type I	I, or Type III supporting	organız	zatio <u>n,</u>						
	check this box			J						
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons?	tne								
	(i) A person who directly or indirectly controls, either alone or together with persons desc	ribed in (ii)	Yes	No						
	and (III) below, the governing body of the supported organization?	11g(i)								
	(ii) A family member of a person described in (i) above?	11g(ii)								
	(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)								
h	Provide the following information about the supported organization(s)	 5()								

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	organizat col (i) lis your gove	(iv) Is the organization in ol (i) listed in vour governing document? (v) Did you notify the organization in in col (i) of your support? (vi) Is the organization in col (i) organized in the U S?		on in anized	(vii) A mount of monetary support		
	instructions))	Yes	No	Yes	No	Yes	No		
Total									

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support	_						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	8,846,922	10,312,083	10,326,422	10,627,078		606,591	40,719,096
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	76,687,494	92,359,704	89,313,372	75,197,989	76	,403,542	409,962,101
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	85,534,416	102,671,787	99,639,794	85,825,067	77	,010,133	450,681,197 0
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the							0
с 8	year Add lines 7a and 7b Public support (Subtract line 7c from line 6)							0 450,681,197
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	13	(f) Total
9	A mounts from line 6	85,534,416	102,671,787	99,639,794	85,825,067	77,	010,133	450,681,197
.0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,460,233	4,759,212	5,966,865	20,870,684	21,	.006,211	57,063,205
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,550,922	1,703,568	1,633,527	1,840,278		137,214	6,865,509
c	Add lines 10a and 10b	6,011,155	6,462,780	7,600,392	22,710,962	21	143,425	63,928,714
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	46,985	0	1,604,114	2,269,806		167,259	4,088,164
13	Total support. (Add lines 9, 10c, 11, and 12)	91,592,556	109,134,567	108,844,300	110,805,835		.320,817	518,698,075
14	First five years. If the Form 990 is	for the organizat	ion's first, second	, thırd, fourth, or f	ifth tax year as a	501(c)(3) organı	
Sa	check this box and stop here ction C. Computation of Pul	alic Support B	ercentage					<u>▶</u> □
15	Public support percentage for 201			13, column (f))		15		86 887 %
16	Public support percentage from 20			, , , , , ,		16		89 490 %
Se	ction D. Computation of Inv							
17	Investment income percentage for				n (f))	17		12 325 %
18	Investment income percentage fro					18		9 740 %
19a	33 1/3% support tests-2013. If th	e organızatıon dıc	I not check the bo:	x on line 14, and	line 15 is more th	nan 33 1/3	3%, and l	ıne 17 ıs not

^{33 1/3%} support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction			
Facts And Circumstances Test					
Retu	ırn Reference	Explanation			
		Schodulo A / Form 000 o	000 E7) 201		

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493126018215

OMB No 1545-0047

Political Campaign and Lobbying Activities

SCHEDULE C (Form 990 or 990-EZ)

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

organization answered "Ves" to Form 990 Part IV. Line 5 (Proxy Tax) or Form 990 F7. Part V. line 35c (Proxy Tax) then

	me of the organization American Society of Mechanical Engine	eers		Employer ider	ntification number
	,			13-1623899	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect po	lıtıcal campaıgn act	tivities in Part IV	
2	Political expenditures			►	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization mai	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	1720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	er section 501(c), except section 50)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to	o other organization	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b ►	¢
4	Did the filing organization file F	Form 1120-POL for this year?			↑ — Yes
5	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	funds Also enter the anization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar			(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	Ī	270,000	
c	Total lobbying expenditures (add lines 1a and 1b	o)		270,000	
d	Other exempt purpose expenditures			100,332,248	
e	Total exempt purpose expenditures (add lines 1	c and 1d)		100,602,248	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both		1,000,000	
	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 lin	e 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ento	er -0-	ſ		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	Ī		
j	If there is an amount other than zero on either lii	ne 1h or line 1), did the organization file Form 47	20 rep	ortina	

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 Expend	litures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	134,978	237,867	232,955	270,000	875,800
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures					

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), (or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493126018215

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

emai Revenu	le Service and its instruct	ions is at www.iis.gov/ioimsso.			Tiishecu	UII
Name of The Americ	the organization can Society of Mechanical Engineers			oloyer identifica 1623899	ation number	_
Part I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,				. Complete	e ıf th
		(a) Donor advised funds		(b) Funds and	other accour	nts
Tota	I number at end of year					
Aggr	regate contributions to (during year)					
Aggr	regate grants from (durıng year)					
Aggr	regate value at end of year					
	the organization inform all donors and donor adviso Is are the organization's property, subject to the or	_	nor adv	ısed	☐ Yes	┌ No
used	the organization inform all grantees, donors, and do d only for charitable purposes and not for the benef ferring impermissible private benefit?				┌ Yes	┌ No
art II	Conservation Easements. Complete if	the organization answered "Yes"	to Forr	n 990, Part I\	/, line 7.	
Г F Г F Сот	pose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Inplete lines 2a through 2d if the organization held a	or education) Preservation of a Preservation of a	certifie	d historic struc	ture	
ease	ement on the last day of the tax year			1		
- .				Held at the	End of the	Year
	al number of conservation easements		2a			
	al acreage restricted by conservation easements		2b			
	nber of conservation easements on a certified histo	• •	2c			
histo	nber of conservation easements included in (c) acq oric structure listed in the National Register		2d		4	
	nber of conservation easements modified, transferratax year 🕨	ed, released, extinguished, or terminat	ea by tr	ne organization	auring	
Num	nber of states where property subject to conservati	ion easement is located ►				
Doe	s the organization have a written policy regarding to procement of the conservation easements it holds?			f violations, and	∫ Yes	┌ No
Staf ►	f and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ements o	during the year		
. <u>—</u>	 ount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	a the vear		
► \$,, and emoreing conservation casemen	es aarm	g the year		
Doe	s each conservation easement reported on line $2(c section 170(h)(4)(B)(ii))^2$	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
bala	art XIII, describe how the organization reports cor ince sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia				
art III	Organizations Maintaining Collections Complete if the organization answered "You		or Ot	her Similar	Assets.	
work	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education	, or rese	earch in further		 c
If th work	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education	statem	nent and balanc		с
(i) _F	Revenues included in Form 990, Part VIII, line 1			► \$		
(ii)	Assets included in Form 990, Part X					
Ifth	ne organization received or held works of art, historiousing amounts required to be reported under SFAS					
Reve	enues included in Form 990, Part VIII, line 1			- \$		
				· +		
Ass	ets included in Form 990, Part X			F \$		

Part	•••• Organizations Maintaining Co	<u>llections of Art</u>	t, His	storic	<u>al Tı</u>	reasu	res, or O	the	<u>r Similar As</u>	ssets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other recor	ds, cl	heck a	ny of	the foll	owing that a	are a	significant use	e of its	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams			
b	Scholarly research		е	\vdash	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	in ho	w they	furth	er the d	organızatıon	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit								ılar		
Do	assets to be sold to raise funds rather than t								!! t- F (☐ Yes	☐ No
Раг	Escrow and Custodial Arrang Part IV, line 9, or reported an an						i answere	u r	es to Form	990,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						or other ass	ets r	not	┌ Yes	
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing ta	ble						
									1A	mount	
C	Beginning balance							1c			
d	Additions during the year						L	1d			
e	Distributions during the year							1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, lin	e 21?	>						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expl	anatıo	n has	been p	rovided in F	art :	KIII		
Pa	rt V Endowment Funds. Complete							_			
		(a)Current year	(b)	Prior yea			vo years back		hree years back	(e) Four	years back
1a	Beginning of year balance	529,052		1,63	37,454		2,076,697		1,918,842		1,651,043
Ь	Contributions								500		95,839
С	Net investment earnings, gains, and losses	88,162		ϵ	1,731		18,817		388,445		259,116
d	Grants or scholarships										
e	Other expenditures for facilities and programs	39,976		1,17	0,133		40,581		231,090		87,156
f	Administrative expenses						417,479	_			
g	End of year balance	577,238			9,052		1,637,454		2,076,697		1,918,842
2	Provide the estimated percentage of the cur	ent year end balan	ce (lır	ne 1g,	colum	nn (a))	held as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ► 76 340 %										
C	Temporarily restricted endowment \blacktriangleright 23 to The percentages in lines 2a, 2b, and 2c sho	560 % uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	re hel	d and a	ıdmınıstere	d for	the		
	organization by (i) unrelated organizations								3a	(i) Ye	s No No
	(ii) related organizations							•	3a	• • •	No
ь	If "Yes" to 3a(II), are the related organization							٠. ٔ	· · · · · · · · · · · · · · · · · · ·	b	1
4	Describe in Part XIII the intended uses of the	·									
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		the o	rganı	zatio	n ansv	vered 'Yes	' to	Form 990, Pa	art IV,	line
	Description of property				Cost or (inves	other tment)	(b)Cost or of basis (othe		(c) Accumulated depreciation	d (d)	Book value
1a	Land						583	,077			583,077
b	Buildings						2,831	,502	1,346,73	33	1,484,769
c	Leasehold improvements						13,042	,459	1,298,47	76	11,743,983
d I	Equipment						35,179	,701	22,529,05	59	12,650,642
							8,929	,090	6,061,18	36	2,867,904
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	umn (B), line	10(c).)			🛌		29,330,375
									Schedule I	D (Form	990) 2013

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	>	
Part VIII Investments—Program Related. Co	omplete if the organizati	on answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n anguared 'Vas' to Form Of	20 Part IV line 11d See Form 200 Part V line 15
(a) Descr		(b) Book value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization		to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		to form 330, Fait IV, line Tie of Til. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	0
		4
		1
		-
	<u> </u>	
	, — ——————————————————————————————————	
		_
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	. 0	

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete If
1	Total revenue, gains, and other support per audited financial statements	1	136,464,387
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	14,520,859
3	Subtract line 2e from line 1	3	121,943,528
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 322,767		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-19,503,170
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	102,440,358
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	121,894,076
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	21,614,594
3	Subtract line 2e from line 1	3	100,279,482
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 322,766		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	322,766
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	100,602,248

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference	Explanation
PART v, LINE 4	ENDOWMENT FUNDS ARE USED FOR MECHANICAL ENGINEERING AWARDS AND MEDALS
PART X LINE 2	THERE ARE CERTAIN TRANSACTIONS THAT COULD BE DEEMED UNRELATED BUSINESS INCOME AND WOULD RESULT IN A TAX LIABILITY MANAGEMENT REVIEWS TRANSACTIONS TO ESTIMATE POTENTIAL TAX LIBILITIES USING A THRESHOLD OF MORE LIKELY THAN NOT IT IS MANAGEMENT'S ESTIMATION THAT THERE ARE NO MATERIAL INCOME TAX LIABILITIES THAT NEED TO BE RECORDED AT JUNE 30, 2014 OR 2013
PART XI, LINE 2D - OTHER ADJUSTMENTS	INTERCOMPANY TRANSFERS \$1,788,658 TOTAL TO SCHEDULE D, PART XI, LINE 2D \$1,788,658
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSE (\$61,680) RECLASS OF COGS (\$19,764,257) TOTAL TO SCHEDULE D, PART XI, LINE 4B (\$19,825,937)
PART XII LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSE \$61,680 RECLASS OF COGS \$19,764,257 INTERCOMPANY TRANSFERS \$1,788,658 TOTAL TO SCHEDULE D, PART XII, LINE 2D \$21,614,595

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

	of the organization				Employer ident	ification number						
The A	merican Society of Mechanical E	ngineers			13-1623899							
Pai	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	zation answered						
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its gran	ts and other						
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace is needed)							
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region							
(1)	East Asia and the Pacific	1	4	Program Services	SEE PART V	475,831						
(2)	Europe (Including Iceland and Greenland)	1	5	Program Services	SEE PART V	627,199						
(3)	South Asia	1	3	Program Services	SEE PART V	296,607						
(4)												
(5)												
b	Sub-total Total from continuation sheets to Part I	3				1,399,637						
C	Totals (add lines 3a and 3b)	1 3	12		1	1.399.637						

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganızatıons or ent	rities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	Г	Yes	⊳	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	্ব	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	<u> </u>	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	ি শ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	<u>~</u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	احا	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3, COLUMN (E)	REGION EAST ASIA AND THE PACIFIC (E) SPECIFIC TYPES OF SERVICES IN REGION ASME, THROUGH WHOLLY OWNED ASME PACIFIC LLC, PROMOTES UNDERSTANDING AND THE USE OF CODES AND STANDARDS
	PROGRAMS IN THE ASIA/PACIFIC MARKETS, SERVING AS AN INQUIRY POINT FOR INFORMATION REGARDIN G ASME EDUCATIONAL COURSES AND SEMINARS, AND FACILITATING NEW MEMBER RECRUITMENT AND CONFE
	RENCE DEVELOPMENT REGION EUROPE (E) SPECIFIC TYPES OF SERVICES IN REGION ASMETHROUGH I NDEPENDENT CONTRACTORS, PROMOTES DIALOGUE WITH LOCAL ENGINEERS, CORPORATIONS, EDUCATIONAL
	INSTITUTIONS, AND TECHNICAL ASSOCIATIONS AS WELL AS PROVIDE LOGISTICAL SUPPORT FOR ASME EVENTS SUCH AS CONTINUING EDUCATION AND WORKSHOPS REGION SOUTH ASIA (E) SPECIFIC TYPES OF SERVICES IN REGION ASME THROUGH INDEPENDENT CONTRACTORS, ENGAGES IN THE MARKETING AND PRO
	MOTION OF ASME STANDARDS, CONFORMITY ASSESSMENT PROGRAMS, TRAINING PROGRAMS, JOURNALS, CON FERENCE PROCEEDINGS, BOOKS AND OTHER PUBLICATIONS AND PROMOTES MEMBERSHIP IN ASME

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

► Inform	nation about Schedule I	(Form 990) and its ins	tructions is at <u>www.irs</u>	<u>.gov /form990</u> .		Inspection
Name of the organization The American Society of Mechanical Engineers						fication number
to award the grants	orassistance?					
						d "Yes" to
(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
13-3372934	501(C)(3)	18,671				SECTOR OPERATIONS - APPROPRIATIONS
13-6128507	501(c)(3)	28,606				ADMINISTRATIVE SUPPORT
1	nical Engineers nation on Grants intain records to subsite to award the grants ganization's procedu ier Assistance to V, line 21, for any (b) EIN	nical Engineers nation on Grants and Assistance intain records to substantiate the amount of the distoler award the grants or assistance?	nation on Grants and Assistance Intain records to substantiate the amount of the grants or assistance to award the grants or assistance?	nation on Grants and Assistance Intain records to substantiate the amount of the grants or assistance, the grantees' eligibility to award the grants or assistance?	nation on Grants and Assistance Intain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or as it to award the grants or assistance?	Imployer identigence of the grants and Assistance Intain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and it to award the grants or assistance?

Enter total number of other organizations listed in the line 1 table

SCHEDULE I, PART I, LINE 2

(a)Type of grant or assistance

(b) Number of

(f)Description of non-cash assistance

I	Grants and Other Assistance to Individuals in the United States. Complete if the orga	anization answered "Yes" to Form 990	, Part IV, line 22.
	Part III can be duplicated if additional space is needed.		•

(d)A mount of

(c)A mount of

(e)Method of valuation

	recipients	cash grant	non-cash assistance	(book, FMV, appraisal, other)	
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.					
Return Reference Explanation					

During the year ended June 30, 2014, ASME only contributed to related 501(c)(3) public charities

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DLN: 93493126018215

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization The American Society of Mechanical Engineers **Employer identification number**

13-1623899

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions □ Payments for business use of personal residence			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		Yes	
	and store, a detaile, and all gaine and a photocorporation and an arrangement and an arrangement and arrangement and arrangement and arrangement and arrangement and arrangement and arrangement and arrangement arrangement and arrangement arrangeme	2	res	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization	ו		
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III	35		110
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation				
	ASME'S PAST PRESIDENT RECEIVED A TRAVEL BENEFIT FOR HIS SPOUSE THIS BENEFIT WAS TAXABLE TO THE RECIPIENT ASME PAID FOR THE SOCIAL CLUB DUES FOR ITS EXECUTIVE DIRECTOR THIS BENEFIT WAS TAXABLE TO THE RECIPIENT ASME PAID FOR THE SOCIAL CLUB DUES FOR ITS ASSISTANT SECRETARY THIS BENEFIT WAS NOT TAXABLE TO THE RECIPIENT				
, ,	THE FOLLOWING INDIVIDUALS PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN DURING 2013 THOMAS LOUGHLIN, \$157,665 JUNE LING, \$27,117				

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 13-1623899

Name: The American Society of Mechanical Engineers

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, P	art 1	1 - Officers, Direc	tors, Trustees, Ke	<u>.y Empioyees, and</u>	Hignest Compens	ated Employees		
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
JAMES REESE MEISINGER MANAGING DIRECTOR	(1) (11)		28,526 0	0	76,342 0	0	342,632 0	0
JOHN DELLI VENNERI ASSISTANT SECRETARY	(1) (11)	0	0	0	12,750 0	32,054 0	377,660 0	0
JUNE LING 2ND ASSISTANT Treasurer	(1) (11)	0	0	0	159,541 0	14,052 0	562,238 0	0 0
LAUREL RASO MANAGING DIRECTOR	(1) (11)	0	0	0	105,413 0	27,225 0	421,969 0	0
MARK SHEEHAN MANAGING DIRECTOR	(1) (11)	0	0	0	95,931 0	10,852 0	372,566 0	0 0
MICHAEL IRELAND MANAGING DIRECTOR	(1) (11)	0	30,130 0	0	49,028 0	24,054 0	326,229 0	0
MICHAEL MERKER MANAGING DIRECTOR	(1) (11)		36,142 0	0	105,757 0	3,855 0	413,445 0	0
ROY ARBEIT MANAGING DIRECTOR	(1) (11)		36,726 0	0	15,300 0	24,936 0	319,687 0	0
SRINI CHANDRA SHEKHAR MANAGING DIRECTOR	(1) (11)		27,088 0	0	12,535 0	18,471 0	252,479 0	0
THOMAS LOUGHLIN EXECUTIVE DIRECTOR	(ı) (ıı)	0	0	0	241,746 0	29,154 0	893,115 0	0
WILLIAM BERGER MANAGING DIRECTOR	(1) (11)	0	0	0	107,053 0	13,701 0	404,716 0	0
WILLIAM GAROFALO ASSISTANT TREASURER	(I) (II)		39,303 0	0	10,620 0	4,440 0	301,020 0	0

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SCHEDULE 0 (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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization The American Society of Mechanical Engineers	Employer identification number
,	13-1623899

Return Reference	Explanation
FORM 990, PART III LINE 4D	OTHER PROGRAM SERVICES CODES & STANDARDS - ESTABLISHES AND PUBLISHES PUBLIC SAFETY RELATED INDUSTRIAL AND MANUFACTURING CODES AND STANDARDS FOR THE DESIGN, MANUFACTURING, AND INSTALLATION OF MECHANICAL DEVICES EXPENSES \$ 1,374,811 INCLUDING GRANTS OF \$ 0 REVENUE \$ 1,031,075 PUBLIC AFFAIRS AND OUTREACH - THE PUBLIC AFFAIRS AND OUTREACH SECTOR, UNDER THE DIRECTION OF THE BOARD OF GOVERNORS, IS RESPONSIBLE FOR THE COORDINATED OUTREACH TO INDUSTRY, GOVERNMENT, EDUCATION, AND THE PUBLIC SPECIFICALLY, THIS SECTOR IS RESPONSIBLE FOR INITIATIVES THAT ADDRESS DIVERSITY AND GLOBAL DEVELOPMENT PROGRAMS AS WELL AS THE ACCREDITATION OF ENGINEERING CURRICULA AND THE ACCREDITATION OF ENGINEERING AND ENGINEERING TECHNOLOGY DEGREE PROGRAMS THROUGH ABET AFFILIATION THE PUBLIC AFFAIRS AND OUTREACH SECTOR IS LED BY A COUNCIL THE UNITS OF THE SECTOR INCLUDE THE BOARD ON EDUCATION, BOARD ON GOVERNMENT RELATIONS, INDUSTRY ADVISORY BOARD, DIVERSITY AND INCLUSION STRATEGY COMMITTEE EXPENSES \$ 6,618,180 INCLUDING GRANTS OF \$ 0 REVENUE \$ 431,881 INSTITUTES/TRAINING - PROVIDES CONTINUING EDUCATION COURSES FOR ENGINEERING AND THE TECHNICAL WORKFORCE ADDITIONALLY, THIS AREA HOLDS MEETINGS, CONFERENCES AND WORKSHOPS FOR THE ADVANCED TECHNOLOGY INSTITUTE EXPENSES \$ 7,382,911 INCLUDING GRANTS OF \$ 0 REVENUE \$ 14,503,634 OTHER CATEGORY EXPENSES \$ 6,343,294 INCLUDING GRANTS OF \$ 0 REVENUE \$ 22,594,562

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ASME IS A MEMBERSHIP ORGANIZATION AND HAS NO STOCKHOLDERS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	ASME'S MEMBERS ELECT MEMBERS OF THE ASME BOARD OF GOVERNORS

Return Reference	Explanation			
FORM 990, PART VI, SECTION A, LINE 7B	DECISIONS BY THE GOVERNING BODY TO CHANGE THE ASME CONSTITUTION ARE SUBJECT TO APPROVAL BY MEMBERS			

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE ASME FORM 990 AND SUPPORTING SCHEDULES ARE PREPARED BY AN INDEPENDENT ACCOUNTING FIRM, AND SUBMITTED TO UPPER MANAGEMENT FOR REVIEW ALL REVIEW NOTES ARE CLEARED, AND CHANGES ARE MADE, AND THE DRAFT IS MADE AVAILABLE TO THE ASME BOARD OF GOVERNORS (BOG) ON THE BOG SECURE WEBSITE AT THE END OF THE REVIEW PERIOD, THE FINAL DRAFT IS PROVIDED TO ALL BOG MEMBERS AND IS SUBMITTED TO ASMES INDEPENDENT ACCOUNTING FIRM FOR ELECTRONIC FILING BY DUE DATE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ASME has adopted a conflict of interest policy which applies to board members, officers, committee members and key employees of ASME. On an annual basis, individuals covered under the conflicts of interest policy are required to complete and sign a statement that he or she is in compliance with the policy. If a conflict is identified, the individual with such conflict is prohibited from participation in the deliberations and decisions in the transaction. The Audit Committee oversees the implementation of and compliance with the conflicts of interest policy.

Return Reference	Explanation			
FORM 990, PART VI, SECTION B, LINES 15A	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE EXECUTIVE DIRECTOR INCLUDES A REVIEW BY AN INDEPENDENT COMPENSATION CONSULTANT OF COMPARABILITY DATA, INCLUDING COMPENSATION SURVEYS AND FORM 990 DATA FROM SIMILAR ORGANIZATIONS THIS DATA IS THEN PROVIDED TO THE EXECUTIVE DIRECTOR EVALUATION AND STAFF COMPENSATION COMMITTEE (EDESC), A COMMITTEE COMPRISED OF INDEPENDENT DIRECTORS, WHO EVALUATE THE DATA AND MAKE A SALARY RECOMMENDATION TO THE BOARD OF GOVERNORS THE FINAL SALARY DECISION, BASED ON THE RECOMMENDATION OF THE EDESC, IS APPROVED BY THE BOARD OF GOVERNORS ASMES CORPORATE COUNSEL CONTEMPORANEOUSLY DOCUMENTS THE DECISION AND THE RATIONALE OF THE DECISION			

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ASME CONSTITUTION, BY-LAWS, SOCIETY POLICIES INCLUDING THE CONFLICT OF INTEREST POLICY, AND THE ASME FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION POST ADJUSTMENT (\$195,053)

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.
 See separate instructions.
 Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493126018215OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

The American Society of Mechanical Engineers

Employer identification number

13-1623899

Part I Identification of Disregarded Entities Complete	Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
(1) ASME INNOVATIVE TECHNOLOGIES INST LLC 1828 L STREET NW SUITE 810 WASHINGTON, DC 200365104 20-1285874	CODE DEVL	NY	481	274,155	ASME	
(2) ASME STANDARDS TECHNOLOGY LLC TWO PARK AVENUE NEW YORK, NY 10016 20-1471292	CODE DEVL	NY	814,336	1,211,372	ASME	
(3) ASME ASIA PACIFIC LLC UNIT 07B TWIN TOWERS BEIJING, CHAOYANG 100022 CH 20-5946886	TRAINING	СН	508,385	72,942	ASME	
(4) ENGINEERING FOR CHANGE LLC TWO PARK AVENUE NEW YORK, NY 10016 27-0287469	TRAINING	DE	685,000	806,601	ASME	
(5) ASME EAST ASIA HOLDINGS LLC 2711 CENTERVILLE ROAD SUITE 400 WILMINGTON, DE 19808 11-1239908	TRAINING	DE			ASME	
Part II Identification of Related Tax-Exempt Organiza	itions Complete if t	he organization an	swered "Yes" o	on Form 990, Par	t IV, line 34 because it had one	

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

	<u> </u>						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(13) co ent	512(b) ntrolled ity?
						Yes	No
(1) ASME AUXILIARY INC	EDUC LOANS	NY	501(C)(3)	LINE 11B,II	NA		No
TWO PARK AVENUE							
NEW YORK, NY 10016 13-6128507							
(2) ASME FOUNDATION INC	GRANTS	NY	501(C)(3)	LINE,11B,II	NA		No
TWO PARK AVENUE							
NEW YORK, NY 10016 13-3372934						<u> </u>	
(3) the ASME MINING & EXCAVATION RESrch Inst	RESEARCH	NY	501(C)(3)	LINE11B, II	NA		No
TWO PARK AVENUE							
NEW YORK, NY 10016 _52-1582156							

Part III Identification of Related because it had one or more	<mark>d Organizations Taxable</mark> e related organizations trea	as a Partne ited as a part	ership tnership	Completo during t	e if the oi he tax ye	rganız ear.	atıon aı	nswered "Ye	es" on	Form	990, Part	IV, lı	ne 34	1	
(a) Name, address, and related organizat	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	entity	Predon Income(unrela exclude tax u section:			(g) f Share of me end-of-year assets			(i) Code V-UBI amount in bo 20 of Schedule K-: (Form 1065)	managing partner?		Percer	(k) ercentage wnership
									Yes	No		Yes	No		
Part IV Identification of Related line 34 because it had one (a) Name, address, and EIN of related organization			s a cor le breign	poration o		Uring (Type ((C corp			Share	(g) of end- year assets	(h) ntage	S	(i) Section (b)(13 controll entity	512 3) led
(1) ASME India Private Ltd	MARKETING	IN		ASME	ASME	C CORE)	228,373		48,4	07 100 0	nn %		Yes Yes	No
573 1st flr main road chirage delhi new delhi, delhi 110017 IN				, 5115		o com		220,373		10,1	1000				

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
1 D	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No				
b	Gift, grant, or capital contribution to related organization(s)										
C	Gift, grant, or capital contribution from related organization(s)				1c	Yes					
d	Loans or loan guarantees to or for related organization(s)				1d		No				
е	Loans or loan guarantees by related organization(s)				1e		No				
f	f Dividends from related organization(s)										
g	Sale of assets to related organization(s)				1g		No				
h	Purchase of assets from related organization(s)				1h		No				
i	Exchange of assets with related organization(s)				1i		No				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes					
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
ı	I Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)											
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes					
0	Sharing of paid employees with related organization(s)				10	Yes					
р	Reimbursement paid to related organization(s) for expenses				1р		No				
q	Reimbursement paid by related organization(s) for expenses				1q	Yes					
r	Other transfer of cash or property to related organization(s)				1r	Yes					
s	Other transfer of cash or property from related organization(s)				1s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line. (a)	(b)	(c)	(d)							
	Name of related organization	Transaction	Amount involved	Method of determining amo	unt in	volved					
		type (a-s)									
	<u> </u>										

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
	•												

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013