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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Firm siname

Firm's address ▶

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

For Paperwork Reduction Act Notice, see the separate instructions.

Use Only

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

Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Inspection ▶ Information about Form 990 and its instructions is at www.irs gov/form990 For the 2014 calendar year, or tax year beginning October 1 2014, and ending September 30 20 15 D Employer identification number Cneck if applicable C Name of organization American Society of Civil Engineers Louisiana Se Address change - 0237342 Doing business as □ Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number 1801 Alexander Bell Drive 703 - 295-6109 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminate 356,498 Reston, VA 20191-4382 G Gross receipts \$ Amended return F Name and address of principal officer H(a) Is this a group return for subordinates? 🔲 Yes. 🗹 No. Application pending H(b) Are all suborginates included? Yes No. 501(c)(3) 501(c) (If "No," attach a list (see instructions)) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status Website ▶ H(c) Group exemption number ▶ L Year of formation M State of legal domicile LA Form of organization Corporation Trust ✓ Association
☐ Other ▶ 1914 Part Summary Briefly describe the organization's mission or most significant activities Governance Advance Science and Promote Civil Engineering Profession Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 14 Number of independent voting members of the governing body (Part VI, line 1b) . 4 14 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 65 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7h 0 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) 56,571 41,986 9 Program service revenue (Part VIII, line 2g) 314,507 305,412 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A). line 12) 362,060 356,498 12 32,237 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 40.042 0 Benefits paid to or for members (Part IX, column (A), line 4) . 0 14 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 15 n Professional fundraising fees (Part IX, column (A), line 11e) 16a b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 372,823 336,527 Total expenses Add lines 13 - Adjuste bua Par IX, column (A), line 25)
Revenue less expenses Subtract line 18 from line 12(2) 412,865 368,764 19 (50,305)(12, 266)End of Year Beginning of Current Year Total assets (Part X, line 36)
Total liabilities (Part X, line 26) 189,995 177,729 20 21 189,995 177,729 Net assets or fund balances Signature Block Under penalties of perjury, I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Jeffrey L Duplantis, PE - Section Treasurer Type or print name and title Print/Type preparer's name Preparer s signature Date Paid Check | if Preparer



☐ Yes ☐ No Form 990 (2014)

Firm's EIN ▶

Phone no

Cat No 11282Y

orm 99	0 (2014)			Page 2
Part I				
	Check if Schedule O contains a response or no	ote to any line in this I	Part III	<u> </u>
1	Briefly describe the organization's mission. To advance the knowledge and practice of engineer reliable information that affects the engineering processes to exchange views on common interest.	ofession. To provide	a forum for engineering	
	organizations individually could not accomplish the			at member
2	Did the organization undertake any significant program prior Form 990 or 990-EZ?			he Yes 🗹 No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make sign services?	gnificant changes in	how it conducts, any progra	ım □Yes ☑No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplise expenses. Section 501(c)(3) and 501(c)(4) organization the total expenses, and revenue, if any, for each program.	s are required to repo		
4a	(Code) (Expenses \$ 191,062 includ Annual Meetings / Technical Meetings and Present		0) (Revenue \$	293,441)
	The Louisiana Section of the American Society of achievements of the Section, engineers, and proje numerous technical seminars and presentations the include topics that span the entire civil engineering about their specific discipline, and explore into discipline.	Civil Engineers has it cts In addition, the hroughout the year. T ng profession. They e	affiliated technical groups h he technical seminars and p ncourage individual membel	ost resentations
4b	(Code.) (Expenses \$ 154,209 includ Awards & Younger Member Group Activities:			41,986)
	The American Society of Civil Engineers Louisiana high school students pursuing interests related to scholarships on predetermined criteria to continue undergraduate and postgraduate level.	the civil engineering	profession. Students receiv	e
4c	(Code) (Expenses \$ 23,493 includ	ling grants of \$	0) (Revenue \$	21,066)
	The American Society of Civil Engineers Louisiana journal and newsletter to inform the civil engineeri current civil engineering issues.			
4d	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$	0) (Revenue	s	

368,764

4e Total program service expenses ▶

Form 99	0 (2014)		f	Page 3
Part	V Checklist of Required Schedules			
	To the course of a decomb of an arctic of 504/2/00 arc 4047/2/40 (attack) and a course of a 14 and 16 arctic of 17 arctic of 16 arctic		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		/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u> </u>		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
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	1	
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? If "Yes," complete Schedule C, Part III	5		
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		∀
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		√
10	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 V .	10		→
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	110		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		V
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
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		1
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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		✓
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ıı)? If "Yes," complete Schedule E .	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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			
15	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.	14b		√
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		√
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A) lines 5 and 1163 if "Yes," complete Schedule C. Part I (see instructions)	16		√
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		✓
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
	If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
U	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	:	ı

Part	Checklist of Required Schedules (continued)			
•	Dilli		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓	
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? If "Yes," complete Schedule J	23		✓
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		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
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		√
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 "Yes," complete Schedule L, Part II	26		√
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? If "Yes," complete Schedule L, Part III	27		1
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):		**.	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? If "Yes," complete Schedule R, Part I	33		1
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		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	35a 35b		1
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		√
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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note . All Form 990 filers are required to complete Schedule O	38	001	V (2014
		Ear	~ 441	1 (2014

Form 990 (2014)

art				
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0		165	NO
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			
·	reportable gaming (gambling) winnings to prize winners?	1c	l	,
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	-	√
Za			-	
	otatements, need for the eachdar year chaing with or within the year covered by this return	0.5		,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		*
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2-		,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		,
	,	4a		✓
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
~	(FBAR)			,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a 5b		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		V
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
ua	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		
U	qifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 05		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_ V
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
Ū	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е	-	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		V
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L		1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O			
b	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	1		
С	Enter the amount of reserves on hand		<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	<u> </u>

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O			
Section	on A. Governing Body and Management		. .	
	5 to 10 - 1 - 4 - 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		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			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		 ✓
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		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint	5 6	✓	√
b	one or more members of the governing body?	7a	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	7b		•
а	The governing body?	8a	✓	ļ
b	Each committee with authority to act on behalf of the governing body?	8b	√	
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? If "Yes," provide the names and addresses in Schedule O	9	1 - 1	✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	oae) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	√ ✓	140
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?	10b	√	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		√
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14 15	Did the organization have a written whistleblower policy?	13		✓ ✓
a b	The organization's CEO, Executive Director, or top management official	15a 15b		√
16a	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?	16a		1
	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 organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Louisiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and remainded Matthew Redmon, PE - P O Box 31109 Shreveport LA 71103	cords	. ▶	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

☑ Check this box if neither the organization				•	C)					
(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos neck ss pe	ition more	e than one the thick the t	an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Robert W Jacobsen	2.0							0	0	0
Past President	.0	✓		✓						
(2) Pamela A. Gonzales	2.0	ļ		İ				0	0	o
President	.0	✓		✓		L	_			
(3) Christopher G Humphreys	2.0		ļ	١.				0	0	o
President Elect	.0	✓		✓	ļ		ļ			
(4) Matthew D Redmon	2.0			١,				0	0	O
Vice President	.0	✓	<u> </u>	✓_	<u> </u>					-
(5) Jeffrey L Duplantis	2.0			_ ا			ļ	0	0	0
Secretary Treasurer	.0	✓		✓						-
(6)	.0									
<u></u>	.0		_	_	<u> </u>		_			
(7)										
	.0		ļ	ļ						
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(9)	.0							İ		
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(11)		-								
(4.0)	0.		├				-			
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(13)	.0	-								
/4.4\		 	-	-	├		-	 		
(14)	0.	-							1	

Part	VI Section A. Officers, Directors, Trust	ees, Key E	mploy	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (ontinu	ied)		
					•	C) sition								
	(A) Name and title	(B) Average			neck	more	than o		(D) Reportable	(E) Reportabl	е		F) nated	
		hours per week (list any	office	er and	dad	lirect	or/trust	tee)	compensation	compensation related			unt of her	
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highe	Former	the organization	organizatio (W-2/1099-M		compe	ensation in the	
		organizations below dotted	dual ector	utiona	βĀ	mplc	st co oyee	ę	(W-2/1099-MISC)	(** 27 7000 14.	.00,	organ	ization elated	
		line)	truste	al trus		yee	mpen						zations	
			ő	tee			Highest compensated employee							
(15)		.0					-							
(16)		.0			-									
(17)		.0												
		.0												
(18)	•	.0 .0												
(19)		.0						-						
(00)		.0						_						
(20)		.0												
(21)		.0												
(22)		.0											.	
\		.0										_		
(23)		.0												
(24)		.0				-							<u>-</u>	
		.0												
(25)		0.												
1b	Sub-total		L	٠	<u> </u>		l	>	0		0			0
C	Total from continuation sheets to Part	VII, Sectio	n A				٠	•	0		0			0
d	Total (add lines 1b and 1c) Total number of individuals (including but	not limited	to th	nse	list	ed:	ahove	•) w	the received m	ore than \$10	0 000) of		0
	reportable compensation from the organi		0		, 1131									
3	Did the organization list any former of	ficer direc	tor o	or tr	net	۵۵	kov s	mr	Novee or high	est compe	neatec	,	Yes	No
·	employee on line 1a? If "Yes," complete 3) () () () () () () () () () (·	isaicc	์ 3		✓
4	For any individual listed on line 1a, is the													
	organization and related organizations individual	greater th	an \$1	150,	OOC)	r "Ye	s, "	complete Sch	eauie J toi	sucr	' 4		1
5	Did any person listed on line 1a receive of									ation or ind	ivıdua			•
Contin	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedu	ıle J f	or s	such person	•	•	5	J	✓_
1	on B. Independent Contractors Complete this table for your five highest of	compensat	ed inc	depe	end	ent	contr	act	ors that receive	ed more that	n \$100	0,000 of		
	compensation from the organization. Repyear.	ort compe	nsatio	on fo	or th	пе с	alend	ar y	ear ending wit	h or within t	he org	ganizatio	n's tax	(
	(A) Name and business address								(B) Description of s	ervices	(C) Compensation			
					•						_			
								-						
			_											
	Total number of independent contractor	rs (includir	na hi	ıt n	ot I	lımıt	ed to	l 1 th	nose listed abo	ove) who				
	received more than \$100,000 of compens	-	-						.cccc.cc abi	2.0,0				

Part	VIII	Statement of Revenue Check if Schedule O contains a re	sponse or note to	any line in this	Dart VIII		
		Check il Schedule O contains a re	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns . 1a	1				
ž z	b	Membership dues 1b	16,346				
is, C Am	С	Fundraising events 10		2 % , `			
Gift Tar	d	Related organizations 10	[* ** .	:	
S, iE	е	Government grants (contributions) 1e	•		, "		
er S	f	All other contributions, gifts, grants,			. *7		i
년 F		and similar amounts not included above	20,070		\$ 4		
on d	g	Noncash contributions included in lines 1a-1f \$					
Other Revenue Contributions, Gifts, Gran	h	Total. Add lines 1a-1f	Business Code	41,986			
ž	200		 	216 204	216 204	-	
eve Seve	2a	Technical Meetings	000000	216,294 56,911	216,294 56,911		
Program Service R	b	Annual Tec Meeting		20,236	20,236		
Š	d	Seminars/Presentations Newletter/Website		21,066	21,066		
Š	e		300033	21,000	21,000		
gra	f	All other program service revenue					
5	g	Total. Add lines 2a-2f	•	314,507		ý`	
	3	Investment income (including divi	dends, interest,				
		and other similar amounts)	>	5			5
	4	Income from investment of tax-exempt	bond proceeds ►				
	5	Royalties	. ▶				
	i '	(i) Real	(ii) Personal	<i>'</i> *		` s,	
	6a	Gross rents					
	b	Less rental expenses		, , , ,		*	*
	С	Rental income or (loss)		a	. vás		» »
	d	Net rental income or (loss) . Gross amount from sales of (i) Securities	(ii) Other	1			*, *
	7a	assets other than inventory	(ii) Galler			ľž:	*
	b	Less cost or other basis		*,	*	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	"	and sales expenses .					,
	c	Gain or (loss) .					
	ď	Net gain or (loss)	. •				
ne	8a	Gross income from fundraising					
		events (not including \$ of contributions reported on line 1c).					
7		0 0 10/1 1 10	a		*		
Ě	Ь		b	** , *.			
U	С	Net income or (loss) from fundraisin	g events . ▶		,4×	-	
	9a	Gross income from gaming activities.			,		
	ь		b				
		Net income or (loss) from gaming ac					
	1	Gross sales of inventory, less					
		and the second of the second o	а				
	b		b				
	С	Net income or (loss) from sales of in	ventory	1			
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue	L	<u> </u>			
	e	Total. Add lines 11a–11d		0			
	112	Total revenue. See instructions	-	356 408	24.4 507	, ^	ı <i>E</i>

	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must com				olumn (A).
	Check if Schedule O contains a respon-		ne in this Part IX $$.		<u></u> . 🗆
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations and domestic governments. See Part IV, line 21	6,000	6,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	26,237	26,237		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management .	104,214	104,214		
b	Legal				ļ
С	Accounting .				<u> </u>
d	Lobbying				<u> </u>
е	Professional fundraising services. See Part IV, line 17		, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) .			· · · · · · · · · · · · · · · · · · ·	
12	Advertising and promotion	5,346	5,346		
13	Office expenses	1,574	1,574		
14	Information technology				
15	Royalties				_
16	Occupancy				
17	Travel	7,258	7,258		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		_		
19	Conferences, conventions, and meetings	183,804	183,804		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance .				
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	Newsletter & Website	16,573			
b	Awards & YM Group Activities	17,758			
С	Report Card & Fees	0			
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	368,764	368,764		0 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				

.

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing .	189,995	1	177,729
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net .		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		. 5	>
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		6	
Assets	7	Notes and loans receivable, net		7	
ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	,		
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11 .		12	
	13	Investments – program-related. See Part IV, line 11.		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	189,995	16	177,729
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties .		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	0	26	
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.		_20	
ű	27	Unrestricted net assets	400.000	07	477 700
ala	28	· ·	189,995	27 28	177,729
8	29	Temporarily restricted net assets Permanently restricted net assets		29	
Net Assets or Fund Balances	23	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.		29	
S	30	Capital stock or trust principal, or current funds	* 7 5 55	30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
<u>e</u>	33	Total net assets or fund balances	189,995	33	177,729
2	34	Total liabilities and net assets/fund balances	189,995	34	177,729
					Form 990 (2014)

Form 990 (2014) Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 2 Revenue less expenses. Subtract line 2 from line 1 3 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 5 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 7 7 Investment expenses . 8 8 Prior period adjustments 9 9 Other changes in net assets or fund balances (explain in Schedule O) . . . 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 . . Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990 🗹 Cash 🗌 Accrual 🔲 Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 2b **b** Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in 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? За If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2014)

3b

SCHEDULE A (Form 990 or 990-EZ)

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.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open to Public

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number American Society of Civil Engineers Louisiana Section 51 - 0237342 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E Type III non-functionally integrated A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (iv) is the organization (ii) FIN (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-9) other support (see support (see document? above or IRC section instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Total

instructions .

Part	Support Schedule for Organiza	ations Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)			
	(Complete only if you checked the						alıfy under			
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, p	lease comple	ete Part III.)				
	on A. Public Support	· · · · · · · · · · · · · · · · · · ·								
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")									
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3									
5	The portion of total contributions by each person (other than a governmental unit or 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		\	♦ > १ 4	*					
Secti	on B. Total Support				J=					
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total			
7	Amounts from line 4									
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)									
11	Total support. Add lines 7 through 10	. 2 !			À.,					
12	Gross receipts from related activities, etc					12				
13	First five years. If the Form 990 is for the organization, check this box and stop he					ear as a sectio	n 501(c)(3)			
Casti			<u> </u>		· · ·					
	on C. Computation of Public Suppo			1 column (f)		14	%			
14 15	Public support percentage for 2014 (line Public support percentage from 2013 Sc		-	i, coluinii (i))		15	%			
16a	331/3% support test—2014. If the organi				d line 14 is 331					
	box and stop here. The organization qua						▶ □			
b	331/3% support test—2013. If the organ check this box and stop here. The organ	nization did no	t check a box	on line 13 or		e 15 is 33½%	or more, . ► □			
17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.									
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets the neets the "facts	e "facts-and-ci s-and-circums	rcumstances"	test, check the	nis box and st	op here			

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

Secti	on A. Public Support	4.744		, piodoc oc	implote rait		
	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees	(8) 2010	(0) 2011	(6) 2012	(a) 2013	(6) 2014	(i) iotai
•	received. (Do not include any "unusual grants.")	59,020	42,229	42,396	56,571	41,986	242 202
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	211,792	264,301	233,192	305,412	314,507	1,329,204
3	Gross receipts from activities that are not an unrelated trade or business under section 513	29,909					29,909
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
6	Total. Add lines 1 through 5	300,721	306,530	275,588	361,983	356,493	1,601,315
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			•			0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)	* *		* 🔻		Š@ 74 (2)	1,601,315
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	300,721	306,530	275,588	361,983	356,493	1,601,315
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,584	755	120	77	5	2,541
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
С	Add lines 10a and 10b	1,584	755	120	77	5	2,541
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 VI)						0
13	Total support. (Add lines 9, 10c, 11, and 12.)	302,305	307,285	275,708	362,060	356,498	1,603,856
14	First five years. If the Form 990 is for the organization, check this box and stop her	e organizatıon			, or fifth tax ye		
Secti	on C. Computation of Public Suppor		•			· · · · · · · · · · · · · · · · · · ·	· [_
15	Public support percentage for 2014 (line 8			3. column (f))		15	99.84 %
16	Public support percentage from 2013 Sch		•	,		16	99.74 %
	on D. Computation of Investment Inc					•	
17	Investment income percentage for 2014 (I	ine 10c, colum	n (f) divided by	y line 13, colur	nn (f)) .	17	0.158 %
18	Investment income percentage from 2013					18	0.261 %
19a	331/3% support tests—2014. If the organi						
	17 is not more than 331/3%, check this box a					-	
b	331/3% support tests – 2013. If the organiz line 18 is not more than 331/3%, check this b	oox and stop he	ere. The organi	zation qualifies	as a publicly s	upported organi	zation 🕨 🗌
20	Private foundation. If the organization did	d not check a t	oox on line 14,	19a, or 19b, c	heck this box	and see instruc	ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Sections A, D, and E I	f you checked 11d of Pa	rt I, complete Sections A and
Section A. All Supporting Organ	izations	

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		,
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		ļ
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b c	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		,
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	-	
	on B. Type I Supporting Organizations	10		<u> </u>
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	-	
2	Did the organization operate for the benefit of any supported organization other than the supported	<u>'</u>		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			, ' ,
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		137	
1	Mayor a majority of the average trade discrete or twickers disman the toy year also a majority of the discrete		Yes	NO
•	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1	Ī	
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1	,
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	. ;	**	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations		l	l .
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	inetru	ction	e).
٠,	The organization satisfied the Activities Test Complete line 2 below	nsuu	CHOIL	3)
a b	The organization satisfied the Activities rest <i>Complete line 2 below</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i> .			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	see ins	structi	ons)
•	Activities Test Anguay (a) and (b) below		Yes	No
2	Activities Test Answer (a) and (b) below.		165	INO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20	 	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain a support of the containing organization.			structions. All
Section A - Adjusted Net Income	•	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)	6		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount	·	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).	17.75		*
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors (explain in detail in Part VI):	,	0	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount		Star Star Star	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	* * *	
2 Enter 85% of line 1	2	8.3.1 y A	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	· · · · · · · · · · · · · · · · · · ·	
4 Enter greater of line 2 or line 3	4	4.	
5 Income tax imposed in prior year	5	* * 7. V	
6 Distributable Amount Subtract line 5 from line 4, unless subject to	_	**	_
emergency temporary reduction (see instructions)	6	<u> </u>	0
7 Check here if the current year is the organization's first as a non-functional	ly-ın	itegrated Type III supportin	g organization (see

Part		3) Supporting Organ	izations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exi	empt purposes of suppo	orted	
	organizations, in excess of income from activity	 		
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	inizations	
4	Amounts paid to acquire exempt-use assets			
5	(F			
6	Other distributions (describe in Part VI) See instructions			
7				0
8	Distributions to attentive supported organizations to which	the organization is res	sponsive	
	(provide details in Part VI). See instructions			
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			0.000
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:		7	
a				
b				Fulliform
C				
d				
e	From 2013			
f	Total of lines 3a through e	0		
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount			
_	Carryover from 2009 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f.	0		
4	Distributions for 2014 from Section			
	D, line 7 \$			
<u>a</u>	Applied to underdistributions of prior years			
_ <u>b</u> _	Applied to 2014 distributable amount			
<u>c</u> 	Remainder Subtract lines 4a and 4b from 4	0		
5	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount			1
	greater than zero, see instructions)			i
6	Remaining underdistributions for 2014 Subtract lines 3h		0	
J	and 4b from line 1 (if amount greater than zero, see			1
	instructions)			0
7	Excess distributions carryover to 2015 Add lines 3			0
	and 4c	0		
8	Breakdown of line 7:			
<u>-</u> a				
b				
С				
d	Excess from 2013 0			,
е	Excess from 2014 . 0			· · · · · · · · · · · · · · · · · · ·

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

2014

Department of the Treasury

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ 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.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (s	ee separate instructions), ti	hen			
• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name	of organization			Employer ider	ntification number
Americ	an Society of Civil Enginee				51-0237342
Part		e organization is exempt unde			organization.
1	· ·	the organization's direct and indire	ct political campa	ign activities in Part IV	
2	Political expenditures				;
3	Volunteer hours		•	Ť	
Part	Complete if the	e organization is exempt und	er section 501/c	-1/31	
1		excise tax incurred by the organiza			
2	•	excise tax incurred by organization			·
3		ed a section 4955 tax, did it file For			Yes No
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part	IV			
-Part		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz	ation for section	· · · · · · · · · · · · · · · · · · ·	
	activities			▶ \$	
2		filing organization's funds contrib	uted to other org	anizations for section	
_	527 exempt function acti			\$	
3		expenditures Add lines 1 and 2	Enter here and	on Form 1120-POL,	
		o file Form 1100 POL for this year			
4		n file Form 1120-POL for this year			∐ Yes ∐ No
5		ses and employer identification nur ents. For each organization listed, i			
		ontributions received that were pro-			
		I fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(O) LIN	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)			1		
(2)					
(3)					
(4)			<u>.</u>		
(4)					
(5)					
\ \ \					
(6)			·		
		I		i	i

Sche	dule C (Form 990 or 990-EZ) 2014					Page 2
Pai	t II-A Complete if the organization section 501(h)).	on is exempt u	nder section 50	01(c)(3) and filed	l Form 5768 (el	ection under
	Check ► ☐ if the filing organization be name, address, EIN, expe	enses, and shar	e of excess lobb	yıng expenditur	es).	oup member's
B (Check > I if the filing organization ch	necked box A a	ind "limited conti	rol" provisions a	pply.	
	Limits on Lob (The term "expenditures" n	bying Expenditu			(a) Filing organization's totals	(b) Affiliated group totals
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		019411124101101101410	g. cop .c
18						
1	Total lobbying expenditures to influence	_	dy (direct lobbying	3) ·		
•		la and 1b) .	•	•		
•	d Other exempt purpose expenditures					
	Total exempt purpose expenditures (ad		•			
1	Lobbying nontaxable amount Enter columns	the amount from	om the following	table in both		
	If the amount on line 1e, column (a) or (b) is	s. The lobbying	nontaxable amount	is:	# W	1
	Not over \$500,000	20% of the am	ount on line 1e		**	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000		1
	Over \$17,000,000	\$1,000,000				\$ 37°
	Grassroots nontaxable amount (enter 2	5% of line 1f)				
i	Subtract line 1g from line 1a If zero or	less, enter -0-		•		
į	Subtract line 1f from line 1c If zero or le	ess, enter -0-				
j	If there is an amount other than zero reporting section 4911 tax for this year		1h or line 1i, did	the organization	file Form 4720	Yes No
	(Some organizations that made a se	ection 501(h) ele	Period Under sec ection do not have ructions for lines	e to complete all	of the five colum	nns below.
	Lobbyin	g Expenditures	During 4-Year Av	eraging Period		·
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total

	Lobbyi	ng Expenditures	During 4-Year A	veraging Period		· · · · · · · · · · · · · · · · · · ·
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))	e g	Δ.			
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))			,		
f	Grassroots lobbying expenditures					

ror ea	- b (IV) - I to the detailed	(a)	(b)
	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.	Yes	No	Amount
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	Volunteers?	7		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-	-	v «
	Media advertisements?		1	· · · · · · · ·
	Mailings to members, legislators, or the public?		1	
	Publications, or published or broadcast statements?		1	
	Grants to other organizations for lobbying purposes?		1	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	1		2,7
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		1	
	Other activities?		1	
-	Total Add lines 1c through 1i			2,7
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		√	
	If "Yes," enter the amount of any tax incurred under section 4912	/×> ^	\ \	
d d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		_	. 4
Part I	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	:)(5),	or se	ction
				Yes N
1	Were substantially all (90% or more) dues received nondeductible by members?			1
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)		•.	3
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes." Dues, assessments and similar amounts from members	OR (b) Par	t III-A, line 3,
1	Section 162(e) nondeductible lobbying and political expenditures (do not include amount: political expenses for which the section 527(f) tax was paid).	s of		
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		Ý,	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	ying	4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Part	Supplemental Information e the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grainstructions), and Part II-B, line 1. Also, complete this part for any additional information	وا میرد	-4\. Da	ut II A linna 1 a

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

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

Employer identification number

Schedule I (Form 990) (2014) Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, **%**□ (h) Purpose of grant or assistance ✓ Yes 51-0237342 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of non-cash assistance (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance American Society of Civil Engineers Louisiana Section (**b**) EIN 1 (a) Name and address of organization or government Part II Partl 8 € 3 2 ල 9 5 ම 2 6 Ξ

	(a) Type of grant or assistance					
-		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 College	1 College Scholarships	15	26,237			
2 Contribi	2 Contributions - Other Non-Profit Organizations	4	000'9			
ဗ						
4						
رى						
g						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information re	equired in Part I, lin	e 2, Part III, columr	(b), and any other addit	ional information.
					111111111111111111111111111111111111111	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2014

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

OMB No 1545-0047

American Society of Civil Engineers Louisiana Section 51 - 0237242 FORM 990, PART VI, SECTION A, LINE 6: ASCE LOUISIANA SECTION-RECOGNIZES THE FOLLOWING MEMBERSHIP: THE SUBSCRIBING MEMBERSHIP GRADES SHALL CONSIST OF THE SOCIETY-LEVEL MEMBERSHIP GRADES OF STUDENT MEMBER, AFFLIATE MEMBER, ASSOCIATE MEMBER, MEMBER, FELLOW AND DISTINGUISHED MEMBER. THE QUALIFICATIONS FOR SOCIETY-LEVEL MEMBERSHIP GRADES SHALL BE SET FORTH BY THE AMERICAN SOCIETY OF CIVIL ENGINEERS (SOCIETY) FORM 990, PART VI, SECTION A, LINE 7A: SUBSCRIBING MEMBERS (VOTING) - ALL MEMBERS OF THE SOCIETY, OF ALL GRADES, WHO SUBSCRIBE TO THE CONSTITUTION AND BY LAWS OF THE SECTION. ONLY SUBSCRIBING MEMBERS WHO MEET THE REQUIREMENTS OF THE SOCIETY'S GOVERNING DOCUMENTS SHALL BE ELIGIBLE TO VOTE IN SECTION ELECTIONS. VOTING MEMBERS HAVE THE RIGHT TO ELECT OFFICERS OF THE BOARD OF DIRECTORS AND TO APPROVE CERTAIN SIGNIFICANT DECISIONS OF THE BOARD. FORM 990, PART VI, SECTION A LINE 7B: AMENDMENT TO THE SECTION CONSTITUTION AND BYLAWS A TWO-THIRDS (2/3) VOTE OF THE MEMBERS OF THE SECTION BOARD OF DIRECTORS PRESENT AT DULY CONSTITUTED BOARD MEETING, WHERE A QUORUM IS IN ATTENDANCE, PROVIDED THAT WRITTEN NOTICE CONTAINING THE TEXT OF THE PROPOSED AMENDMENT IS PUBLISHED TO THE MEMBERSHIP AT LEAST THIRTY (30) DAYS IN ADVANCE OF THE MEETING.