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DLN: 93493320139226

OMB No 1545-0047

2015

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

**Return of Organization Exempt From Income Tax** 

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Open to Public Inspection

A F	or the	2015 ca	lendar year, or tax year beginnin	g 01-01-2015 , and ending 12-31-20	15			
_		pplicable	C Name of organization INSTITUTE OF TRANSPORTATION			D Employ	er ider	ntification number
Address change Name change Initial return		-	ENGINEERS INC			53-02	32732	2
<u> </u>		-	Doing business as					
	ınal /termın	atod	Number and street (or P O box if m	ail is not delivered to street address) Room/si	uıte	E Telepho	ne num	ber
_	nended		1627 EYE STREET NW NO 600	,		(202)	785-0	060
—Ap	plication	n pending	City or town, state or province, coun WASHINGTON, DC 20006	try, and ZIP or foreign postal code		<b>G</b> Gross re	eceipts \$	\$ 9,270,900
			<b>F</b> Name and address of princip	al officer	H(a) I	s this a group	return	for
			JEFF PANIATI 1627 EYE STREET NW NO 60	0	s	ubordinates?		☐ Yes 🗸
			WASHINGTON, DC 20006			No .re all subordıı	nates	
I Ta	x-exem	npt status	<b>√</b> 501(c)(3)	nsert no ) 4947(a)(1) or 527	ir	ncluded?		⊤Yes
J W	ebsite	e:► WW	/W ITE ORG			•		(see instructions)
K Fon	m of ore	ganızatıon	✓ Corporation Trust Associa	tion Other ►		Group exemption 193		State of legal domicile C1
Pa	rt I		mary scribe the organization's mission	or most significant activities				
				1ATION FOR THE EDUCATION OF 1	TRANSPO	RTATION EN	GINEE	RS
Ce	-							
nan								
Governance	2 (	Check th	is box ▶ ┌─ if the organization di	scontinued its operations or disposed	of more th	an 25% of its	net as	ssets
Ĝ						1	ı	
Activities &			•	ng body (Part VI, line 1a)		-	3	21
ŢĘ.				f the governing body (Part VI, line 1b)	•	-	4	21
Ě				alendar year 2015 (Part V, line 2a)			5	28
Ă			·	rt VIII, column (C ), line 12			6 7a	377,634
				m Form 990-T, line 34		·	7b	-14,679
						Prior Year	75	Current Year
	8	Contri	butions and grants (Part VIII, lir	ne 1h)		102,3	20	202,759
ġ	9	Program service revenue (Part VIII, line 2g)				5,644,6		4,741,388
Ravenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)				305,9	34	44,166
æ	11	Other	revenue (Part VIII, column (A),		681,8	31	153,927	
Ϋ́	12		revenue—add lines 8 through 11	(must equal Part VIII, column (A), lir	ne	6,734,6	92	5,142,240
	12	12)	and similar amounts noid (Dout	IV salumn (A) lines 1 2 \		125.0	124	249,178
	13 14		, , ,	IX, column (A), lines 1-3)		135,8	0	249,178
	15		·	te benefits (Part IX, column (A), lines	.		+	
Æ	13	5-10		e benefits (Fare 1x, column (x), mes		3,156,8	12	2,859,385
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	0
ੜੇ	b	Total fu	ındraısıng expenses (Part IX, column (D)	, line 25) ▶ <u>0</u>				
_	17	Other	expenses (Part IX, column (A), I	ines 11a-11d, 11f-24e)		3,238,1	.31	3,852,607
	18		·	st equal Part IX, column (A), line 25)		6,530,7	77	6,961,170
. 40	19	Reven	ue less expenses Subtract line	18 from line 12	+	203,9	15	-1,818,930
Net Assets or Fund Balances					Beginni	ng of Current \	'ear	End of Year
sse) Bafa	20	Total	assets (Part X, line 16)			7,027,0	97	4,955,658
Z Z	21	Total	liabilities (Part X, line 26)			2,287,9	83	2,610,423
Žζ	22		sets or fund balances Subtract	line 21 from line 20		4,739,1	14	2,345,235
	rt II		ature Block	mined this return, including accompa	nyına sche	dules and sta	tement	ts and to the best of
my k	nowled	dge and		plete Declaration of preparer (other t				
		****	ature of officer			2016-11-15 Date		
Sigr Her						Dute		
Heli	-		PANIATI EXECUTIVE DIRECTOR & CEO or print name and title					
			rint/Type preparer's name		Date	Check If	PTIN	2106
Pai	d	<u> </u>	R MATTHEW FRANK		2016-11-15	self-employed	P01277	/196
Pre	pare	r ⊢	irm's name FRANK & COMPANY PC			Firm's EIN ► 54		
	On	1 1	irm's address ► 1360 BEVERLY ROAD SU	JITE 300		Phone no (703)	821-07	/02
			MCLEAN, VA 22101					
May	the IR	S discus	s this return with the preparer sh	nown above? (see instructions)				√Yes No

4,045,948

Total program service expenses ▶

Par	t 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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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		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?	6		No
7	If "Yes," complete Schedule D, Part I	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 2	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
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	Yes	
11	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			
	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	
	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
	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 2	<b>11</b> c		No
	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? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	<b>12</b> a		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	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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	15		No
16	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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	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		

Form	990 (2015)			Page <b>4</b>
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 domestic 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 or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		
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), 501(c)(4), and 501(c)(29) organizations.			

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

352

35b

36

37

38

Yes

Yes

Yes

Form 990 (2015)

Νo

Nο

Νo

Nο

Nο

Nο

Νo

Nο

Nο

Nο

Nο

Νo

Νo

Nο

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

29 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

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*Did the organization complete Schedule O and provide explanations in Schedule O for Part VI. lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . 36

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

**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?

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

instructions for applicable filing thresholds, conditions, and exceptions)

30

31

37

Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			_
	Check if Schedule o contains a response of flote to any line in this part v	· · · ·	Yes	No
1a	a Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a	2	103	110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportal	nle.		
·	gaming (gambling) winnings to prize winners?	. <b>1c</b>	Yes	
2a	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	28		
<b>L</b>	by this return	20 2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	125	103	
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
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	Yes	
4a	<b>a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other autho	rity		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		N
	account)?			No
Ь	These, enter the hame of the foreign country P			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Account (FBAR)	its		
5a	• Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • •	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			No
	: If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
٠	11 Tes, to fine 3a of 3b, did the organization me Form 8888-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
_	organization solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions were not tax deductible?	or gifts 6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	s and <b>7a</b>		No
	services provided to the payor?	-1		
	) If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was req	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra	ct?		
_	Dia the organization receive any rando, an early or manifesting, to pay premiants on a personal behavior contra	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8 required?	899 as <b>7g</b>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			
	Form 1098-C?	. 7h		
8		timo		
	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any during the year?	8		
Qa	a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	75		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			ı İ
	Section 501(c)(12) organizations. Enter			
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
-	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instruction	ons for		
	additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		l I No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			
-	. , , , , , , , , , , , , , , , , , , ,			L

Form 990 (2015) Page 6 Governance, Management, and Disclosure Part VI 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. Check if Schedule O contains a response or note to any line in this Part VI . . . . . . . . Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax **1**a 21 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 Enter the number of voting members included in line 1a, above, who are ındependent 1b 21 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Νo 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 7a Yes 

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? . . . . . . . . . . . . . Yes

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . . . Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.

Yes **10a** Did the organization have local chapters, branches, or affiliates? . . 10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b Yes affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . . Yes **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 Yes Did the organization have a written document retention and destruction policy? . . . 14 Yes

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? a The organization's CEO, Executive Director, or top management official . . . . . 15a Yes 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a **16**a Νo **b** 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

### Section C. Disclosure

List the States with which a copy of this Form 990 is required to be filed▶

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)

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

State the name, address, and telephone number of the person who possesses the organization's books and records ▶THE ORGANIZATION 1627 EYE STREET NW NO 600 WASHINGTON, DC 20006 (202) 785-0060

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

#### 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, 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

(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the organization (W- 2/1099-	(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	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) JOHN J KENNEDY	2 00	l								
INTERNATIONAL PRESIDENT	1 00	×		X				0	0	0
(2) KENNETH J PETRAGLIA DIRECTOR	2 00	×						0	0	0
(3) DEAN KAISER DIRECTOR	2 00	х						0	0	0
(4) PAULA F BENWAY INTERNATIONAL VICE PRESIDENT	2 00	х		×				0	0	0
(5) W HIBBETT NEEL JR INTERNATIONAL PAST PRESIDENT	2 00	х		×				0	0	0
(6) HARDIK R SHAH DIRECTOR	2 00	х						0	0	0
(7) SHAWN LEIGHT DIRECTOR	2 00	x						0	0	0
(8) ROBERT P MURPHY DIRECTOR	2 00	x						0	0	0
(9) JENNY GROTE DIRECTOR	2 00	х						0	0	0
(10) JENNIFER A ROSALES DIRECTOR	2 00	х						0	0	0
(11) ALYSSA REYNOLDS RODRIGUEZ DIRECTOR	2 00	х						0	0	0
(12) BRUCE BELMORE DIRECTOR	2 00	х						0	0	0
(13) DONALD J MCKENZIE DIRECTOR	2 00	x						0	0	0
(14) JASON A CRAWFORD DIRECTOR	2 00	х						0	0	0

art 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 for related	unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the organization (W- 2/1099-	(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	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)		organization and related organizations
(15) ROSANA CORREA-VERDEJO	2 00	Х							0	0	0
DIRECTOR											
(16) BEVERLY T KUHN COORDINATING COUNCIL REPRESENTATIVE	2 00	х							о	0	0
(17) EVA LERNER-LAM	2 00										
NON-VOTING AMBASSADOR TO CHINA		Х							0	0	0
(18) DALE J BRACEWELL	2 00	,,								_	
CHAIR OF LEADERSHIP ITE ALUMNI		Х							0 0		0
(19) KATHERINE KORTUM	2 00	.,									
CHAIR, YOUNG MEMBER COMMITTEE		Х							0	0	0
(20) MICHAEL P SANDERSON	2 00	.,								_	
LEADERSHIP ITE REPRESENTATIVE		Х							0	0	0
(21) JIMMY LIN	2 00	.,								_	
VP CANDIDATE		Х							0	0	0
(22) THOMAS BRAHMS	40 00							252.04		_	F2 F20
EXECUTIVE DIRECTOR	1 00			X				353,94	٥	0	53,529
(23) PHILIP J CARUSO	40 00										
DEPUTY EXECUTIVE DIRECTOR						X		191,60	1	0	39,764
(24) SIVA NARLA	40 00										
SR PROGRAM DIRECTOR						X		145,07	0	0	30,245
(25) DOUGLAS NOBLE	40 00										
SR PROGRAM DIRECTOR						X		154,01	7	0	11,918
1b Sub-Total				•							
c Total from continuation sheets to Part VI	[, Section A .			▶ [							
d Total (add lines 1b and 1c)				▶□			84	44,634	0		135,456

\$100,000 of reportable compensation from the organization > 4

3	Did the organization list any <b>former</b> 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 I for such			
	ındıvıdual	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.

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year								
(A) Name and business address	(B) Description of services	(C) Compensation						
FRANK & COMPANY PC	ACCOUNTING	165,700						
1360 BEVERLY ROAD SUITE 300 MCLEAN, VA 22101								
JDG ASSOCIATES LTD	CONSULTING	154,810						
1700 RESEARCH BLVD ROCKVILLE, MD 20850								
PILLAR CONSULTING INC	CONSULTING	136,226						
4511 JICARILLO AVE SAN DIEGO, CA 92117								
CAVANAUGH & COMPANY PLLC	ACCOUNTING	124,729						
777 LONESOME DOVE TRAIL SUITE B HURST, TX 76054								
BROADPOINT TECHNOLOGIES	INFORMATION TECHNOLOGY	111,592						
7501 WISCONSIN AVE SUITE 720 WEST BETHESDA, MD 20814								

Yes No

Form 99		15)						Page <b>9</b>
Part V	Ш	Statement o						
		Check If Schedu	ıle O contains a respor	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र र	1a	Federated camp	paigns 1a					
Grants smounts	ь	Membership du	es <b>1b</b>					
٠ آ	С	Fundraising eve	ents <b>1c</b>					
ifts lar z	d	Related organiz	ations <b>1d</b>					
s, G imi	e	Government grants	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b>	202,759				
ig #	g	Noncash contribution	ons included in lines					
ontr nd (	h	1a-1f \$  Total. Add lines	12_1f		202,759			
<u>ة ت</u>	"	Total. Add lines	, ia-ii	· · · •	202,733			
풀	2a	CONTRACT REVEN	UE	Business Code 541900	1,999,502	1,999,502		
₹ ₹	ь	MEMBERSHIP DUES		900099	1,801,335	1,333,302		1,801,335
F.	с	MEETINGS & CONF	ERENCES	541900	536,992	536,992		, ,
ž.	d	ADVERTISING		541800	345,059		345,059	
Program Service Revenue	е	WEB SEMINARS/E-	LEARNING	541900	58,500	58,500		
ogra	f	All other progra	ım service revenue					
Ğ	g	Total. Add lines	32a-2f	•	4,741,388			
	3		ome (including dividendar amounts)		98,578			98,578
	4		tment of tax-exempt bond	H				
	5	Royalties		🕨	15,963			15,963
	6.	Gross rents	(ı) Real	(II) Personal				
	6a							
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental incor		· · · · <b>&gt;</b>				
	7a	Gross amount	(ı) Securities	(II) O ther				
		from sales of assets other than inventory	3,396,002					
	ь	Less cost or other basis and	3,450,414					
		sales expenses Gain or (loss)	-54,412					
	c d		s)		-54,412			-54,412
anue		Gross income fi events (not incl	rom fundraising	,				
Other Revenue			reported on line 1c) e 18					
Ě	b	Less direct exp	penses b					
0	С		loss) from fundraising	events ▶				
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	ь	Less direct exp	penses b					
	С	Net income or (	loss) from gaming acti	vities				
	10a	Gross sales of i						
		returns and and	a a	467,155				
	b	Less cost of go	oods sold <b>b</b>	678,246				
	С		loss) from sales of inve		-211,091	-243,666	32,575	
	11a	Miscellaneous OTHER REVEN		Business Code 541900	349,055	349,055		
	b	O THER REVEN	<u> </u>					
	с							
	d	All other revenu	ıe					
	e	Total. Add lines	s 11a-11d	•	349,055			
	12	Total revenue.	See Instructions .	•	5,142,240	2,700,383	377,634	1,861,464

### Part IX Statement of Functional Expenses

ection $501(c)(3)$ and $501(c)(4)$	) organizations must complete all	columns All other organizations	must complete column (A.)

	<b>√</b>				
	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 domestic organizations and domestic governments. See Part IV, line 21				
_		5,760	5,760		
2	Grants and other assistance to domestic individuals See Part IV, line 22	243,418	243,418		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	407,475	210,502	196,973	
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	Other salaries and wages	1,930,428	997,329	933,099	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	86,878	44,885	41,993	
9	Other employee benefits	276,704	142,954	133,750	
10	Payroll taxes	270,704	142,934	133,730	
10	· · · · · · · · · · · · · · · · · · ·	157,900	81,576	76,324	
11	Fees for services (non-employees)				
а	Management				
ь	Legal	16,709		16,709	
С	Accounting	348,057		348,057	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
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)	786,132	786,132		
12	Advertising and promotion	17,271	9,671	7,600	
13	Office expenses	412,670	160,219	252,451	
14	Information technology	275,113	155,183	119,930	
15	Royalties				
16	Occupancy	838,414	433,150	405,264	
17	Travel	284,846	95,475	189,371	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	468,312	466,626	1,686	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	64,621	33,385	31,236	
23	Insurance	110,797	57,241	53,556	
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	BANK CHARGES	123,792	60,025	63,767	
b	POSTAGE & FREIGHT	81,917	50,040	31,877	
c	REPAIRS & MAINTENANCE	23,956	12,377	11,579	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,961,170	4,045,948	2,915,222	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)				

557,512

2,287,983

3,868,778

4,739,114

7,027,097

870,336

25

26

27

28

29

30 31

32

33

34

587,618

2,610,423

1,628,589

2,345,235

4,955,658

Form 990 (2015)

716,646

Form	990 (2	2015)					Page <b>11</b>			
Par	t X	Balance Sheet								
		Check if Schedule O contains a response or note to any lin	e in this	S Part X						
					(A) Beginning of year		<b>(B)</b> End of year			
	1	Cash-non-interest-bearing			740,758	1	533,015			
	2	Savings and temporary cash investments			469,628	2	0			
	3	Pledges and grants receivable, net	and grants receivable, net							
	4	Accounts receivable, net			1,192,876	4	771,448			
Assets	5	key employees, and highest compensated employees Co	Loans and other receivables from current and former officers, directors, trustee key employees, and highest compensated employees Complete Part II of Schedule L							
	6	Loans and other receivables from other disqualified person section 4958(f)(1)), persons described in section 4958(contributing employers and sponsoring organizations of subjuntary employees' beneficiary organizations (see institute of Schedule L	), and 501(c)(9)		6					
	7	Notes and loans receivable, net				7				
	8	Inventories for sale or use			716,490	8	351,110			
	9	Prepaid expenses and deferred charges			299,393	9	177,079			
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,783,534			<u> </u>			
	ь	Less accumulated depreciation	<b>10</b> b	1,308,219	519,660	<b>10</b> c	475,315			
	11	Investments—publicly traded securities			3,087,312	11	2,646,711			
	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			980	15	980			
	16	Total assets.Add lines 1 through 15 (must equal line 34)			7,027,097	16	4,955,658			
	17	Accounts payable and accrued expenses			552,111	17	714,214			
	18	Grants payable				18				
	19	Deferred revenue			1,178,360	19	1,308,591			
	20	Tax-exempt bond liabilities				20				
	21	Escrow or custodial account liability Complete Part IV o	f Sched	ule D		21				
Liabilities	22	Loans and other payables to current and former officers, on key employees, highest compensated employees, and dis		'						
Ġ		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 pai	rties .			24				

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Complete Part X of Schedule D

Unrestricted net assets .

complete lines 30 through 34.

Total net assets or fund balances

Temporarily restricted net assets

Permanently restricted net assets .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances

. . . . . . . . . .

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

25

26

27

28

29

30

31

32

33

34

Net Assets or Fund Balances

Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII . . . . . . .

Separate basis Consolidated basis

a separate basis, consolidated basis, or both

**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

1 Accounting method used to prepare the Form 990

✓ Consolidated basis

Separate basis

Schedule O

Schedule O

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?

If the organization changed either its oversight process or selection process during the tax year, explain in

Single Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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

Cash ✓ Accrual COther

Both consolidated and separate basis

Both consolidated and separate basis

Yes

Yes

Yes

Yes

Yes Form 990 (2015)

2a

2b

2c

3a

3b

No

Νo

#### Additional Data

(Code

Software ID: Software Version:

**EIN:** 53-0232732

Name: INSTITUTE OF TRANSPORTATION ENGINEERS INC

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ 181,157 including grants of \$ 180,407 ) (Revenue \$ SCHOLARSHIPS/FELLOWSHIPS - ALL EXPENSES INCURRED TO PROVIDE SCHOLARSHIPS AND FELLOWSHIPS TO STUDENTS WISHING TO PURSUE COURSE WORK IN TRANSPORTATION ENGINEERING AWARDS - ALL EXPENSES INCURRED TO SELECT. DISTRIBUTE, AND PRESENT AWARDS FOR EXCELLENCE IN THE FIELD OF TRANSPORTATION ENGINEERING AND SERVICE TO THE ORGANIZATION

68,771 including grants of \$

AWARDS - ALL EXPENSES INCURRED TO SELECT, DISTRIBUTE, AND PRESENT AWARDS FOR EXCELLENCE IN THE FIELD OF TRANSPORTATION ENGINEERING AND SERVICE TO THE ORGANIZATION

) (Expenses \$

68,771 ) (Revenue \$

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

DLN: 93493320139226

53-0232732

SCHEDULE A (Form 990 or 990EZ)

# **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.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

**ENGINEERS INC** 

Part I

1

2 3

INSTITUTE OF TRANSPORTATION

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

www.irs.gov/form990.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

OMB No 1545-0047 Inspection **Employer identification number** 

7	Ė	An organization that no described in <b>section 1</b> ?				om a governm	ental unit or from the g	eneral public
8		A community trust des				tII)		
9 10 11 a	_ I	An organization that receipts from activitie from gross investmen organization after Jun An organization organione or more publicly sthe box in lines 11a th Type I. A supporting osupported organization You must Type II. A supporting management of the su	normally recenters related to it to it to it income and it is a 30,1975. Sized and operated and	ves (1) more than 33 is exempt functions—sunrelated business tax eesection 509(a)(2). In the described in the sure of the supervised, or to regularly appoint or tV, Sections A and I upervised or controlled in the supervised or controlled in the supervised or controlled in the supervised in the super	1/3% of its suppubject to certal value income (legandle income) (legandle income) (legandle incomplete Part to public safet benefit of, to public section 509 (a) of supporting on controlled by it relect a majorital.	port from cont in exceptions, ess section 5: III ) ety See <b>sectio</b> perform the fur j(1) or section ganization and ts supported of ty of the direc	nctions of, or to carry on 509(a)(2) See <b>sectio</b> discomplete lines 11e, 1 organization(s), typical tors or trustees of the orted organization(s), t	331/3% of its support is acquired by the ut the purposes of n 509(a)(3). Check 1f, and 11g ly by giving the supporting by having control or
		must complete Part IV				_		
С		Type III functionally i supported organization	n(s) (see instr	uctions) You must co	mplete Part IV,	, Sections A , D	, and E.	
d e	Г	<b>Type III non-function</b> not functionally integra (see instructions) <b>You</b> Check this box if the o integrated, or Type III	ated The orga u must comple organization re	nnization generally must te Part IV, Sections A sceived a written deter	st satisfy a dist . <b>and D, and Par</b> mination from t	rıbutıon requi <b>t V.</b> he IRS that it	rement and an attentiv	eness requirement
f	Ente	r the number of supporte		, , , , , , , , , , , , , , , , , , , ,				
g		Provide the following in	3					
Nar	ne of s	(i) supported organization	(ii)EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organ Iisted in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
					Yes	No		
Tota	ı							
							1	

	edule A (Form 990 of 990-EZ) 2013						Page Z
Pa	Support Schedule fo						
	(Complete only if you of Part III. If the organization						
Se	ection A. Public Support	reion runs to qu	dilly dilder die	tests listed bei	iow, picase con	inpicte i die iii.	,
	Calendar year	I		T	T		T
(or	fiscal year beginning in)	(a)2011	<b>(b)</b> 2012	(c)2013	( <b>d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
•	Gifts, grants, contributions, and						
	membership fees received (Do						
	not include any unusual grants )						
2	Tax revenues levied for the						
	organization's benefit and either						
3	paid to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit						
	to the organization without charge						
4	<b>Total.</b> 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						
Se	ection B. Total Support		T	Т	T	1	1
(or	Calendar year fiscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
•	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	<b>Total support.</b> Add lines 7						
12	through 10 Cross receipts from related activiti	es etr (see inst	ructions)			12	
13	First five years. If the Form 990 is f		•	third fourth or:	fifth tay year ac a		3) organization
	check this box and <b>stop here</b>	3	•		•	<u>`</u>	5) organization,
Se	ection C. Computation of Pub	olic Support F	Percentage				
14	Public support percentage for 2015	• •		11. column (f))		14	
15	Public support percentage for 2014	•	• •	, , , , , , , , , , , , , , , , , , , ,		15	
	<b>33 1/3% support test—2015.</b> If the	ŕ	•	c on line 13. and	line 14 is 33 1/3%		this box
	and <b>stop here.</b> The organization qua	-		•	,	,	▶ □
b	<b>33 1/3% support test—2014.</b> If the	•			, and line 15 is 33	3 1/3% or more,	check this
	box and <b>stop here.</b> The organization						▶□
17a	10%-facts-and-circumstances test-	_				•	
	is 10% or more, and if the organiza in Part VI how the organization mee						
	•	.ca the Tacts-dfl	u circumstances	cest The Olyan	izacion qualilles d	a publicity supp	. —
h	organization  10%-facts-and-circumstances test-	<b>_2014</b> If the ora:	anization did not a	check a boy on lir	ne 13 16a 16b	or 17a and line	▶
D	15 is 10% or more, and if the organ						
	Explain in Part VI how the organiza				•	•	cly
	supported organization						` ▶ ┌
<b>L8</b>	Private foundation. If the organization	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	•
	instructions						▶┌
							•

Section A. Public Support

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.)

_	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 20	)15	(f)Total
•	iscal year beginning in) ► Gifts, grants, contributions, and	(,	(-,	(-/	(-,	(-/-		(-,
1	membership fees received (Do not include any "unusual	6,665,445	6,288,205	6,183,032	2,143,272	2	,004,094	23,284,048
	grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services performed, or facilities furnished							
	in any activity that is related to				1,287,201	1	,030,072	2,317,273
	the organization's tax-exempt							
_	purpose						-	
3	Gross receipts from activities that are not an unrelated trade or							
	business under section 513							
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities							
_	furnished by a governmental unit							
	to the organization without							
6	charge <b>Total.</b> Add lines 1 through 5	6,665,445	6,288,205	6,183,032	3,430,473	3	,034,166	25,601,321
	Amounts included on lines 1, 2,	3,000,110	3,233,233	3,233,332	3,133,175		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	20,001,021
, ,	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							0
	the amount on line 13 for the							
	year							
	Add lines 7a and 7b							0
8	<b>Public support.</b> (Subtract line 7c from line 6)							25,601,321
Se	ction B. Total Support							
	Calendar year			4-12012	(4)2014	1-120	115	<b>(f)</b> ⊤otal
	Calcilual year	/a\2011	<b>(b)</b> 2012					
	iscal year beginning in) 🟲	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)20		
9	iscal year beginning in) ► Amounts from line 6	(a)2011 6,665,445	<b>(b)</b> 2012 6,288,205	6,183,032	3,430,473		,034,166	25,601,321
	iscal year beginning in) ► Amounts from line 6 Gross income from interest,	6,665,445	6,288,205	6,183,032	3,430,473		,034,166	25,601,321
9	iscal year beginning in) ► Amounts from line 6							
9 LOa	Fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,665,445	6,288,205	6,183,032	3,430,473		,034,166	25,601,321
9	Fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	-34,603	6,288,205	6,183,032	3,430,473 164,979		114,541	25,601,321 765,483
9 LOa	Fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)	6,665,445	6,288,205	6,183,032	3,430,473		,034,166	25,601,321
9 LOa	Fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	-34,603	6,288,205	6,183,032	3,430,473 164,979		114,541	25,601,321 765,483
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091		,034,166 114,541 377,634	25,601,321 765,483 693,038
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091 475,070		,034,166 114,541 377,634 492,175	25,601,321 765,483 693,038 1,458,521
9 10a b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,	-34,603 419	6,288,205 170,619 4,928	6,183,032 349,947 -34	3,430,473 164,979 310,091 475,070	3	,034,166 114,541 377,634 492,175	25,601,321 765,483 693,038 1,458,521
9 10a b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	-34,603 419 -34,184 6,631,261	6,288,205 170,619 4,928 175,547	6,183,032 349,947 -34 349,913	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199
9 10a b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years.If the Form 990 is	-34,603 419 -34,184 6,631,261	6,288,205 170,619 4,928 175,547	6,183,032 349,947 -34 349,913	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199
9 10a b c 111 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	6,665,445  -34,603  419  -34,184  6,631,261  for the organization	6,288,205 170,619 4,928 175,547 6,463,752 on's first, second,	6,183,032 349,947 -34 349,913	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199
9 10a b c 111 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	6,665,445 -34,603 419 -34,184 6,631,261 for the organization	6,288,205 170,619 4,928 175,547 6,463,752 on's first, second,	6,183,032 349,947 -34 349,913 6,532,945 third, fourth, or f	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3 section!	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199
9 10a b c 111 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here extion C. Computation of Pul	6,665,445  -34,603  419  -34,184  6,631,261  for the organization	6,288,205 170,619 4,928 175,547 6,463,752 pn's first, second, ercentage (f) divided by line	6,183,032 349,947 -34 349,913 6,532,945 third, fourth, or f	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3 section !	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199 7) organization, 92 510 %
9 10a b c 111 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pul Public support percentage for 201 Public support percentage from 20	6,665,445  -34,603  419  -34,184  6,631,261  for the organization  olic Support P  5 (line 8, column  14 Schedule A, P	6,288,205 170,619 4,928 175,547 6,463,752 on's first, second, ercentage (f) divided by line art III, line 15	6,183,032 349,947 -34 349,913 6,532,945 third, fourth, or f	3,430,473 164,979 310,091 475,070 264,302 4,169,845	3 section!	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321 765,483 693,038 1,458,521 613,357 27,673,199
9 10a b c 111 112 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pul Public support percentage from 20	6,665,445  -34,603  419  -34,184  6,631,261  for the organization  olic Support P  (line 8, column  14 Schedule A, P	6,288,205 170,619 4,928 175,547 6,463,752 on's first, second, ercentage (f) divided by line art III, line 15 me Percenta	6,183,032 349,947 -34 349,913 6,532,945 third, fourth, or f	3,430,473 164,979 310,091 475,070 264,302 4,169,845 rifth tax year as a	3 section !	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321  765,483  693,038  1,458,521  613,357  27,673,199  1) organization,  92 510 %  95 080 %
9 10a b c 111 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pul Public support percentage for 201 Public support percentage from 20	6,665,445  -34,603  419  -34,184  6,631,261  for the organization of the organization	6,288,205  170,619  4,928  175,547  6,463,752  on's first, second,  ercentage (f) divided by line art III, line 15  me Percentagolumn (f) divided	6,183,032 349,947 -34 349,913 6,532,945 third, fourth, or f	3,430,473 164,979 310,091 475,070 264,302 4,169,845 rifth tax year as a	3 section ! 15 16	,034,166 114,541 377,634 492,175 349,055 ,875,396	25,601,321  765,483  693,038  1,458,521  613,357  27,673,199  2) organization,  92 510 %  95 080 %  5 270 %
9 10a b c 111 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pul Public support percentage from 20 ection D. Computation of Inv Investment income percentage fro	6,665,445  -34,603  419  -34,184  6,631,261  for the organization  plic Support P 5 (line 8, column 14 Schedule A, P  restment Inco 2015 (line 10c, c m 2014 Schedule	6,288,205  170,619  4,928  175,547  6,463,752  on's first, second,  ercentage (f) divided by line art III, line 15  me Percentage olumn (f) divided A, Part III, line 1	6,183,032  349,947  -34  349,913  6,532,945  third, fourth, or f  13, column (f))  ge by line 13, column	3,430,473 164,979 310,091 475,070 264,302 4,169,845 iffth tax year as a	3 section ! 15 16 17 18	,034,166 114,541 377,634 492,175 349,055 ,875,396 5 0 1 (c)(3	25,601,321  765,483  693,038  1,458,521  613,357  27,673,199  27,673,199  9 5 10 %  9 5 080 %  5 270 %  4 060 %
9 10a b c 111 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pul Public support percentage for 201 Public support percentage from 20	6,665,445  -34,603  419  -34,184  6,631,261  for the organization  plic Support P 5 (line 8, column  14 Schedule A, P  restment Inco  2015 (line 10c, c  m 2014 Schedule e organization did	6,288,205  170,619  4,928  175,547  6,463,752  on's first, second,  ercentage (f) divided by line art III, line 15  me Percentagolumn (f) divided A, Part III, line 1 not check the bo	6,183,032  349,947  -34  349,913  6,532,945  third, fourth, or f  13, column (f))  ge by line 13, colum7 x on line 14, and	3,430,473  164,979  310,091  475,070  264,302  4,169,845  iffth tax year as a	3 section ! 15 16 17 18 than 33 1,	,034,166 114,541 377,634 492,175 349,055 ,875,396 501(c)(3	25,601,321  765,483  693,038  1,458,521  613,357  27,673,199  27,673,199  9 5 10 %  9 5 080 %  5 270 %  4 060 %

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 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, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V, D

	I, complete Sections A and D, and complete Part V )			
Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section	2		
3a	509(a)(1) or (2)  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 <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	<b>3</b> c		
<b>4</b> a	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?	4b		
_	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  Did the organization support any foreign supported organization that does not have an IRS determination under	15		 
C	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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	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 <b>Part VI</b> .	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 II of Schedule L (Form 990)	8		
<b>9</b> a	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 <b>Part VI</b> .	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 <b>Part VI</b> .	9b		
c	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 <b>Part VI</b> .	<b>9</b> c		
0a	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	<b>10</b> a		
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)	<b>10</b> b		
1	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) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 3.5% controlled entity of a person described in (a) or (b) above 2.16 "Vee" to a bioric provide detail in Part VI	116		1

each of the supported organizations? Provide details in Part VI

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

Par	t IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			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 <b>Part VI</b> 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 organization(s) that operated, supervised, or controlled the supporting organization?  If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Se	ection 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 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
	estion F. Tune III Functionally Internated Companies Operations			
	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below			
2	Activities Test Answer (a) and (b) below.		Yes	No
	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 <b>Part VI identify those supported organizations and explain</b> 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			

3a

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	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)	6		
,	Other expenses (see instructions)	7		
;	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	<b>—</b>		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c)  Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	ictions		
·	20010115		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
a			
b			
<u>c</u>			
d From 2013			
e From 2014			
f Total of lines 3a through e  g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
			(F 000 000 F7) /2 0 1 F

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER	MISCELLANEOUS INCOME - 2014 AMOUNT \$ 264,302 2015 AMOUNT \$ 349,055

INCOME

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DLN: 93493320139226

## **SCHEDULE D**

(Form 990)

Department of the

Treasury

# **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

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_	nal Revenue Service	,				peccon
INS	I <b>me of the organization</b> STITUTE OF TRANSPORTATION GINEERS INC				oyer identification r 232732	number
Pa	Organizations Maintaining Donor Complete if the organization answere					
		(a) Donor advised fun	ds	(b)	Funds and other acc	ounts:
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t	_		or advis	sed $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	∕es
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?				· · · ·	∕es
Pa	rt II Conservation Easements. Comple	ete if the organization	n answered "Yes" o	n Form	າ 990, Part IV, lin	e 7.
1	Purpose(s) of conservation easements held by th	,	ll that apply)			
	Preservation of land for public use (e.g., recreeducation)	eation or [	Preservation of a	n histori	ically important land	d area
	Protection of natural habitat	· [			d historic structure	· urcu
	Preservation of open space	·				
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conserv	ation contribution in t	he form	of a conservation	
					Held at the End	of the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easeme		dodun (a)	2b		
c d	Number of conservation easements on a certified  Number of conservation easements included in (c		, ,	2c		
a 3	historic structure listed in the National Register  Number of conservation easements modified, trai		•	2d	organization during	a the
•	tax year >	nisterred, released, extir	iguisticu, or terminate	d by the	s organization during	, the
	,					
4	Number of states where property subject to cons		•	—— Hung of		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e Staff and volunteer hours devoted to monitoring,	easements it holds?	J ,		☐ Yes	□ No
6	year	mspecting, nanding of v	riolations, and emore	ng cons	ervation easements	, during the
7	A mount of expenses incurred in monitoring, insperior \$	ecting, handling of violat	cions, and enforcing c	onserva	tion easements duri	ing the year
8	Does each conservation easement reported on III (B)(I) and section $170(h)(4)(B)(II)$ ?	ne 2(d) above satisfy th	e requirements of sec	tion 17	0(h)(4) <b>Yes</b>	┌ No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the o			·	
Par	<b>Organizations Maintaining Collect</b> Complete if the organization answere			or Oth	er Similar Asse	ts.
<b>1</b> a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	assets held for public e	xhibition, education,	or resea	arch in furtherance o	
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public e	•			
	(i) Revenue included on Form 990, Part VIII, line 1	1		<b>▶</b> \$		
(	ii) Assets included in Form 990, Part X		1			
2	If the organization received or held works of art, held following amounts required to be reported under S		other similar assets fo			
а	Revenue included on Form 990 Part VIII line 1				<b>b</b> ¢	

Assets included in Form 990, Part X

Part	Organizations Maintaining (continued)	Collections of A	rt, His	torical	Treası	ires, or O	ther Similar As	ssets
3	Using the organization's acquisition, according to the collection items (check all that apply)	ession, and other rec	ords,ch	eck any o	f the foll	owing that a	are a significant use	e of its
а	Public exhibition		d	☐ Loa	n or exc	change prog	rams	
b	Scholarly research		e	┌ oth	ner			
c	Preservation for future generations							
4	Provide a description of the organization? Part XIII	s collections and exp	laın how	they furtl	ner the o	organization	's exempt purpose	ın
5	During the year, did the organization solid assets to be sold to raise funds rather the							No
Par	rt IV Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form 9	990, Part	IV, lın	e 9, or rep	oorted an amoun	t on Form 990,
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	todian or other interr	mediary	for contrib	outions	or other ass	ets not <b>Yes</b>	∏ No
ь	If "Yes," explain the arrangement in Pa	art XIII and complete	e the foll	owing tab	le		Amo	ount
c	Beginning balance				-	1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
<b>2</b> a	Did the organization include an amount o	n Form 990, Part X, I	ıne 21, f	or escrow	orcust	odıal accou	nt liability?   Yes	□ No
b	If "Yes," explain the arrangement in Part	XIII Check here if t	he exnla	ination hav	s been r	provided in F	Part XIII	· ·
Pa	rt V Endowment Funds. Comple							
	·	(a)Current year		or year			(d)Three years back	(e)Four years back
<b>1</b> a	Beginning of year balance	2,161,047		2,078,334				
b	Contributions							
c	Net investment earnings, gains, and losses	-2,530		82,713				
d	Grants or scholarships							
е	Other expenditures for facilities and programs	-905,670						
f	Administrative expenses							
g	End of year balance	1,252,847		2,161,047				
2	Provide the estimated percentage of the	Current year end hala	ince (line	e 1a colui	mn (a))	held as	l	
– a	Board designated or quasi-endowment >	100 000 %	mee (m)	c 19, co.u.	(4))	nera as		
b	Permanent endowment > 0 %							
	r ermanene endowmene p	0 %						
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c							
3а	Are there endowment funds not in the pos organization by	ssession of the organ	ızatıon t	hat are he	ld and a	administered	d for the	Yes No
	(i) unrelated organizations						3a	(i) No
	(ii) related organizations						3a(	(ii) No
b	If "Yes" on 3a(II), are the related organize				.?		3	b
4	Describe in Part XIII the intended uses of		endowme	ent funds				
Par	rt VI Land, Buildings, and Equip Complete if the organization a		orm 99	90. Part I	V. line	11a.See F	Form 990. Part X	, line 10.
	Description of property			(a) ost or other	basis Co	(b) ost or other ba (other)	Accumulated	(d)Book value
	Land			/mveadileli	-/	(other)		
	Buildings		. `.⊢					1
	Leasehold improvements					489,70	65 159,77	5 329,990
	Equipment					956,3		

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

0

475,315

337,370

337,370

See Form 990, Part X, line 12.  (a) Description of security or category.	jory	(b)Book value	(c)Method of valuation
(Including name of security)  (1)Financial derivatives			Cost or end-of-year market value
(2)Closely-held equity interests			
(3)O ther			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12	<u>)</u>		
Part VIII Investments—Program Related		O Down IV June 11c	
Complete if the organization answe  (a) Description of investment	red Yes on Form 99	(b) Book value	Gee Form 990, Part X, line 13.  (c) Method of valuation
			Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13		5 000 D 1 W 1	
Part IX Other Assets. Complete if the organiz	<u>'</u>	Form 990, Part IV, line	2 11d See Form 990, Part X, line 15  (b) Book value
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV , line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organize (a) Do	ration answered 'Yes' on escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X  Other Assets. Complete if the organize (a) Do	ration answered 'Yes' on escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X  Other Liabilities. Complete if the organization of the See Form 990, Part X, line 25.	ration answered 'Yes' on escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X  Other Liabilities. Complete if the organiz  See Form 990, Part X, line 25.  (a) Description of liability	ration answered 'Yes' on escription  ine 15 )  organization answere		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	ration answered 'Yes' on escription  ine 15 )  organization answere		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	ine 15 ) organization answere		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	ine 15 ) organization answere		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X  Other Liabilities. Complete if the organization of the Column (B) must equal Form 990, Part X, line 25.	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	tation answered 'Yes' on escription  time 15 )		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In  Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.  1. (a) Description of liability  Federal income taxes	(b) Book value		(b) Book value

Schedule D (Form 990) 2015

1

PART V, LINE 4

2	Amounts included on line 1 but	t not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) o	on investments 2a			
b	Donated services and use of fa	acılıtıes 2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII )				
e	Add lines 2a through 2d	<del></del>		2e	
3	Subtract line $\mathbf{2e}$ from line $1$ .			3	
4	Amounts included on Form 990	0, Part VIII, line 12, but not on line <b>1</b>			
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII )	4b			
c	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue Add lines 3 and	4c.(This must equal Form 990, Part I, line 12)	🗀	5	
Part		penses per Audited Financial Statements		per	Return.
		ization answered 'Yes' on Form 990, Part IV, li			
1	·	audited financial statements		1	
2		t not on Form 990, Part IX, line 25			
а		acılıtıes			
b	Prior year adjustments				
c	Other losses				
d	Other (Describe in Part XIII )				
e	Add lines 2a through 2d			2e	
3	Subtract line $\mathbf{2e}$ from line $1$ .			3	
4	Amounts included on Form 990	0, Part IX, line 25, but not on line 1:			
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII )	4b			
c	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total expenses Add lines <b>3</b> an	nd <b>4c.</b> (This must equal Form 990, Part I, line 18).		5	
			•		
Pari	XIII Supplemental Info	ormation			
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par lines 2d and 4b, and Part XII, lines 2d and 4b Also c		rovid	e any additional
	Return Reference	Explanation			

THE ENDOWMENT FUNDS ARE USED TO SUPPORT THE ORGANIZATION'S MISSION

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . .

Schedule D (Form 990) 2015		Page <b>5</b>
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
		_

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and C
Governments of the Complete if the organization of the Organizatio

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

Treasury

Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at  $\underline{www.irs.gov/form990}$ .

OMB No 1545-0047

2015

DLN: 93493320139226

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Schedule I (Form 990) 2015

NSTITUTE OF TRANSPORTATION INGINEERS INC  Part I General Information on Gr  Does the organization maintain records to the selection criteria used to award the grant part IV the organization's processing the selection of the selection criteria used to award the grant part IV the organization's processing the selection of the sel	o substantiate the amount of t	he grants or assistance,			53-0232732	
Part I General Information on Gr  1 Does the organization maintain records to the selection criteria used to award the g  2 Describe in Part IV the organization's pro-	o substantiate the amount of t	he grants or assistance,				
the selection criteria used to award the g  Describe in Part IV the organization's pro		he grants or assistance,				
	ocedures for monitoring the us	e of grant funds in the Ur	nited States			√ Yes No
Part II Grants and Other Assistance to Do that received more than \$5,000 F	omestic Organizations and Dor Part II can be duplicated if add		nplete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 21	, for any recipient
`   <b>`</b>	(c) IRC section if applicable		(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

Cat No 50055P

		l .

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Explanation Return Reference THE ORGANIZATION MAINTAINS RECORDS AND DOCUMENTATION FOR EACH GRANTEE FINANCIALLY ASSISTED BY THE PROGRAM TO PART I, LINE 2

ENSURE THAT ALL GRANT FUNDS ARE DISBURSED FOR THEIR INTENDED USE THE GRANTS AWARDED ARE ACTIVELY MONITORED BY RECEIVING PROGRESS REPORTS FROM THE GRANTEE AND BY HAVING FREQUENT MEETINGS WITH THE GRANTEE'S OFFICERS

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

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. at Schedule J (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

DLN: 93493320139226 OMB No 1545-0047

2015

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Department of the Treasury	▶ Information abou
Treasury	

Schedule J (Form 990)

Νa	ne of the organization ITTUTE OF TRANSPORTATION		Employer identificat	ion nui	nber	
	INEERS INC		53-0232732			
Pa	rt I Questions Regarding Compensation					
					Yes	No
La	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement or provision of all of the expenses desc			1b		
2	Did the organization require substantiation prior to rein directors, trustees, officers, including the CEO/Execut			2		
3	Indicate which, if any, of the following the filing organiz organization's CEO/Executive Director Check all that used by a related organization to establish compensati	apply	Do not check any boxes for methods			
	✓ Compensation committee	<b>√</b>	Written employment contract			
	✓ Independent compensation consultant	<b>√</b>	Compensation survey or study	İ	Ì	
	Form 990 of other organizations	<b>▽</b>	Approval by the board or compensation committee	ļ		
1	During the year, did any person listed on Form 990, Pa or a related organization	art VII	I , Section A , line $1  extstyle a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymen	t?	4a		No
b	Participate in, or receive payment from, a supplementa	al none	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-base	ed cor	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provi	ıde th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizatio	ns mu	ıst complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the revenues of	ine 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III					
5	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ine 1a	, did the organization pay or accrue any			
а	The organization?			<b>6</b> a		Νo
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			7		Νo
3	Were any amounts reported on Form 990, Part VII, par subject to the initial contract exception described in R in Part III		•	8		Νο
9	If "Yes" on line 8, did the organization also follow the r	ebutt	able presumption procedure described in Regulations			

Cat No 50053T

Schedule J (Form 990) 2015

For each individual whose compensation must be reported on 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)(I)-(III) 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  Base (i) compensation		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	` '	(E) Total of columns	(F) Compensation in
			(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 THOMAS BRAHMS EXECUTIVE DIRECTOR	(i)	353,946	0	0	29,348	24,181	407,475	0
	(ii)	0	0	0	0	0	0	0
2 PHILIP J CARUSO DEPUTY EXECUTIVE	(i)	191,601	0	0	15,555	24,209	231,365	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
3 SIVA NARLA	/ix	145,070	0	0	11 949	18 296	175 315	0

		(1) compensation	Bonus & incentive compensation	Other reportable compensation	compensation			as deferred on prior Form 990
1 THOMAS BRAHMS EXECUTIVE DIRECTOR	(i)	353,946	0	0	29,348	24,181	407,475	0
	(ii)	0	0	0	0	0	0	0
2 PHILIP J CARUSO DEPUTY EXECUTIVE	(i)	191,601	0	0	15,555	24,209	231,365	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
3 SIVA NARLA SR PROGRAM DIRECTOR	(i)	145,070	0	0	11,949	18,296	175,315	0
	1							

	· · · · /							
3 SIVA NARLA SR PROGRAM DIRECTOR	(i)	145,070	0	0	11,949	18,296	175,315	0
(ii)	(ii)	0	0	0	0	0	0	0
4 DOUGLAS NOBLE SR PROGRAM DIRECTOR	(i)	154,017	0	0	11,918	0	165,935	0
	(ii)	0	0	0	0	0	0	0

Page 2

Schedule J (Form 990) 2015	edule J (Form 990) 2015						
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						

Schedule J (Form 990) 2015

As Filed Data -

DLN: 93493320139226

Name of the organization
INSTITUTE OF TRANSPORTATION
ENGINEERS INC

ENGINEERS INC

Employer identification number
53-0232732

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS

of Schedule of Supplemental Information						
Return Reference	Explanation					
FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERSHIP OF THE INSTITUTE CONSISTS OF HONARY MEMBERS, FELLOWS, MEMBERS, STUDENT MEMBERS, AND INSTITUE AFFLIATES					
FORM 990, PART VI, SECTION A, LINE 7A	ONLY FELLOWS AND MEMBERS ARE ALLOWED TO VOTE IN THE ELECTION OF OFFICERS AND DIRECTORS EA  CH DISTRICT IS ENTITLED TO ELECT AT LEAST ONE DIRECTOR TO SERVE ON THE GOVERNING BOARD THE ELECTION OF THE PRESIDENT AND VICE PRESIDENT TAKES PLACE AT THE ANNUAL MEETING					

990 Schedule O, Supplemental Information

l,	FORM 990 IS PREPARED BY A CERTIFIED PUBLIC ACCOUNTING FIRM AND A DRAFT IS PROVIDED TO THE ORGANIZATION FOR THEIR REVIEW THE BOARD REVIEWS THE FORM 990 PRIOR TO ITS FILING WITH THE IRS
	IN ORDER TO SUSTAIN THE INSTITUTE OF TRANSPORTATION ENGINEERS' REPUTATION AND CONTINUED SU

Explanation

SECTION B. LINE 12C CCESS. NATIONAL OFFICERS. COUNCIL MEMBERS. EMPLOYEES AND MEMBERS IN LEADERSHIP POSITIONS A ANNUAL DISCLAIMER OR DISCLOSURE OF CONFLICTS OF INTEREST IN ACCORDANCE WITH THE INTERNAL R EVENUE SERVICE GUIDELINES

Return Reference

FORM 990, PART VI. SECTION B. LINE 11 FORM 990. PART VI.

> RE EXPECTED TO CONDUCT THEMSELVES IN A PROFESSIONAL MANNER AND A DHERE TO THE HIGHEST STAND ARDS OF HONESTY AND INTEGRITY ALL OF THE ABOVE NAMED INDIVIDUALS ARE REQUIRED TO EXECUTE AN APPROPRIATE ACKNOWLEDGEMENT OF ADHERENCE TO A CODE OF ETHICS POLICY UPON ASSUMING THEIR POSITIONS AND NATIONAL OFFICERS, COUNCIL MEMBERS, AND KEY EMPLOYEES ARE REQUIRED TO MAKE

990 Schedule O, Supplemental Information

Return Reference Explanation

ALL COMPENSATATION OF EMPLOYEES IS DETERMINED LISING MARKET SALARY SURVEYS AND IS SET

B, LINE 15	BY THE BOARD EXECUTIVE COMMITTEE
FORM 990, PART VI SECTION	THE ORGANIZATION COMPLIES WITH IRC SECTION 6104 AND MAKES ITS FORM 1023 FORM 990 AND FORM

990-T AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST

FORM 990 PART VI SECTION

C. LINE 18

990 Schedule O, Supplemental Information

Return Explanation

EXPENSES 0 TOTAL EXPENSES 786.132

Reference FORM 990. PART

FORM 990, PART

IX. LINE 11G

VI, SECTION C, LINE
19 PUBLIC UPON REQUEST THE ORGANIZATIONS GOVERNING DOCUMENTS MAY BE MADE AVAILABLE UPON REQUEST
BY-LAWS OF THE ORGANIZATION ARE ALSO AVAILABLE FOR PURCHASE THROUGH THE ORGANIZATION'S ON-LINE
EMBLEMATIC SUPPLY STORE

THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE

CONSULTING PROGRAM SERVICE EXPENSES 786.132 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING

990 Schedule O, Supplemental Information

Return Reference Explanation

Return Reterence	Explanation
FORM 990. PART XI. LINE 9	ADJUSTMENT TO CONFORM 990 TO PRIOR YEAR AUDITED NUMBERS -393,493

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

DLN: 93493320139226 OMB No 1545-0047

# **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

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

Inspection

Name of the organization INSTITUTE OF TRANSPORTATION				Employer Ide	entification number		
ENGINEERS INC				53-023273	2		
Part I Identification of Disregarded Entities Com	plete if the organization	answered "Yes" o	n Form 990, Pa	rt IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	( <b>d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	<b>nizations</b> Complete if t i the tax year.	he organization ar	nswered "Yes" o	n Form 990, Part	t IV, line 34 because it ha	ad one	!
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3)		Sectio (b)( contr	(13)
						Yes	No
(1)INSTITUE OF TRANSPORTATION ENGINEERS EDUCATIONAL FOUNDATION 1627 I STREET NW SUITE 600  WASHINGTON, DC 20006 51-0232220	TO PROMOTE PROFESSIONAL EDUCATION IN THE FIELDS RELATING TO TRANSPORTATION	DC	501(C)(3)	LINE 9	INSTITUTE OF TRANSPORTATION ENGINEERS	Yes	

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form	990, Pa	art IV, I	line 34
	because it had one or more related organizations treated as a partnership during the tax year.			

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of [ end-of-year assets	(h Disprop alloca	) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		<b>(k)</b> Percentage ownership
				] 3117			Yes	No	1	Yes	No							
											$\vdash$							
Part TV Identification of Polated Organizations Tayable					I.		<u> </u>											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?		
								Yes	No	

Part V Transactions With Related Organizations Complete if the organization answ	vered "Yes" on Form	990. Part IV. line	34. 35b. or 36.		1 4	age 3
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Tered res errorni	330) Tare 11, mic	31, 333, 61 361		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?				$\vdash$
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	•			1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
e Loans of loan guarantees by felated organization(s)				-		<del>                                     </del>
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				<b>1</b> g		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		No
,						+
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	$\vdash$
o Sharing of paid employees with related organization(s)				10	Yes	$\top$
$\boldsymbol{p}$ Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
$\boldsymbol{q}$ $$ Reimbursement paid by related organization(s) for expenses				1q		No
						<u> </u>
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				<b>1</b> s		No
If the answer to any of the above is "Yes," see the instructions for information on who must complet	te this line, including co	overed relationships	and transaction thresholds	5		
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining ar		مبرمير	
Name of related organization	type (a-s)	Amount involved	Method of determining at	Houric II	ivolve	1
						—
	1					

#### 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													
<b>(a)</b> Name, address, and EIN of entity	( <b>b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	<b>(h)</b> Disproprtiona allocations?		(1) 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	
												1 I	
													<u> </u>

