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Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2015

Open to Public

Inspection

717-761-7171

X Yes No

Form **990** (2015)

Phone no

Form

Department of the Treasury Internal Revenue Service

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Firm's address

4	<u> </u>	For the 2015	calendar year, or tax year beginning $06/01/15$, and ending $05/31/$	<u> 16</u>			
	В	Check if applicable	C Name of organization AMERICAN COUNCIL OF ENGINEERING	_ [c	Employe	r identification number	
[□ /	Address change	COMPANIES OF PENNSYLVANIA		j		
ſ	٦,	Name change	Doing business as		23-7	293484	
Γ	=	<u> </u>	Number and street (or P O box if mail is not delivered to street address)		Telephor		
L		nitial return Final return/	800 NORTH THIRD STREET RM/STE 301 City or town, state or province, country, and ZIP or foreign postal code		<u> 800-</u>	<u>651-1946</u>	
Ĺ		erminated		677 000			
ſ	\neg	Amended return	Gross rec	eipts\$ 677,890			
Ī	☴,	Application pending	H(a) Is this a group	return for	subordinates Yes X No		
L	ᆜ ′	appacation pending	ERIC MADDEN			ă, ā.	
			800 NORTH THIRD STREET, SUITE 301	H(b) Are all subor			
-			HARRISBURG PA 17102	- " "NO, a	llach a iist	(see instructions)	
-		Tax-exempt status	501(c)(3) X 501(c) (6) 4 (insert no) 4947(a)(1) or 527	4			
2			WW.ACECPA.ORG	H(c) Group exem			
ļ		Form of organization		ear of formation 19	74	M State of legal domicile PA	
Ī	<u> </u>		ummary				
	_		escribe the organization's mission or most significant activities				
	2	SER	SCHEDULE O				
	Jar						
	er						
	Governance	2 Check th	his box if the organization discontinued its operations or disposed of more than	25% of its net a	ccetc		
	9		of voting members of the governing body (Part VI, line 1a)	. 20 /0 0/ 110 1101 0	3	20	
	Activities &		of independent voting members of the governing body (Part VI, line 1b)		4	20	
	iţi				5	3	
	흦		mber of individuals employed in calendar year 2015 (Part V, line 2a)			20	
	ĕ		mber of volunteers (estimate if necessary)		6		
			related business revenue from Part VIII, column (C), line 12		7a	0	
-		b Net unre	lated business taxable income from Form 990-T, line 34	Dwan Yaas		0	
		9 Contribu	trong and grants (Bort \/III, line 1h)	Prior Year	0	Current Year	
	Revenue		tions and grants (Part VIII, line 1h)	630	,323	643,375	
	Ver	_	service revenue (Part VIII, line 2g)				
	Re		ent income (Part VIII, column (A), lines 3, 4, and 7d)		302	5,162	
			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		506	16,599	
-			renue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		131	665,136	
			ind similar amounts paid (Part IX, column (A), lines 1–3)	15	,000	10,000	
		14 Benefits	paid to or for members (Part IX, column (A), line 4)		0	0	
	es		other compensation, employee benefits (Part IX, column (A), lines 5–10)	301	000	305,047	
	Expenses	16aProfessi	onal fundraising fees (Part IX, column (A), line 11e)		0	0	
	ğ	b Total fur	idraising expenses (Part IX, column (D), line 25) ▶ 0				
	ш		penses (Part IX, column (A), lines 11a-11d-11f-24e)	482	025	427,246	
		18 Total exp	penses Add lines 13-17 (must equal Part IX, column (A); line 25)	798	025	742,293	
_		19 Revenue	e less expenses Subtract line 18 from line 12	-140	894	-77,157	
	let Assets or and Balances		sets (Part X, line 16) Sets (Part X, line 26)	Beginning of Curre		End of Year	
	set	20 Total ass	sets (Part X, line 16)		849	405,938	
	Ş₽	21 Total liat	pilities (Part X, line 26)		, 908	310,544	
3	원	22 Net asse	ets or fund balances Subtract line 21 from line 20, and the subtract line 21 from l	200	,941	95,394	
Ī	P	art II Si	gnature Block				
<u> </u>	Ur	nder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to th	e best of	my knowledge and belief, i	
r S			complete Declaration of preparer (other than officer) is based on all information of which prep				
, -							
•	Sig		Signature of officer		Date	10.1221	
	He		ERIC MADDEN EXECU	TIVE VIC		ES.	
'			Type or print name and title	TTAR ATC	F F C	<u> </u>	
• -			pe preparer's name Preparer's signature / /	Date	10:	of PTIN	
	Paic	. "		Date	Check	L_J"	
		120	HEROLD /W/TW/			ployed P00033501	
		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Firm	n's EIN	<u>25-1644159</u>	
(use	Only	210 GRANDVIEW AVE	ĺ			

CAMP HILL, PA 17011-1706

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

For Paperwork Reduction Act Notice, see the separate instructions. DAA

	AMERICAN COUNCIL Statement of Program Se		293484	Page 2
		ns a response or note to any line in th	is Part III	X
	cribe the organization's mission IEDULE O			
DEB DCI				
Did the orga	anization undertake any significa	int program services during the year which were	not listed on the	
prior Form	990 or 990-EZ? scribe these new services on Sc			Yes X No
services?	-	nake significant changes in how it conducts, any	program	Yes X No
Describe th expenses.		e accomplishments for each of its three largest porganizations are required to report the amount		
		including grants of\$ NEERS IN THE BETTERMENT FOR THE MEMBERS.) (Revenue \$ OF THEIR PROFESSION	THROUG
b (Code) (Expenses \$	including grants of\$) (Revenue \$)
c (Code) (Expenses \$	including grants of\$) (Revenue \$)
d Other progr (Expenses	ram services (Describe in Sched	•	Revenue \$	

Part IV Checklist of Required Schedules

			_res	110
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	_	х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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		X
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		
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	_X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		Ì	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
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			v
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10	ľ	x
4	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
1	VII, VIII, IX, or X as applicable.	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a	\mathbf{x}	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	-,,,,,		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	and the second of the second o			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ĺ	- [
	Schedule D, Parts XI and XII	12a	_X	
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		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	446		v
_	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	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		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13		- 12
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		\neg	
•	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	ļ	X
8	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	x	
9	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		X

Form 990 (2015) AMERICAN COUNCIL OF ENGINEERING
Part IV Checklist of Required Schedules (continued)

Pa	art IV Checklist of Required Schedules (continued)	_		
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
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		X
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	_X	
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	_ <u>X</u>	
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			7,
	through 24d and complete Schedule K If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		İ	
	to defease any tax-exempt bonds?	24c		
	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. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	05.		
26	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any		ĺ	
	current or former officers, directors, trustees, key employees, highest compensated employees, or	26		x
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27	l	X
28	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20			i	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	ZOA		
U	Schedule L, Part IV	28b		X
_	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	-	
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23	_	
-	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		21
٠.	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		$\neg \neg$	
~	complete Schedule N, Part II	32	l	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
••	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
• •	or IV, and Part V, line 1	34	ŀ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ł	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
- -	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		ļ	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	\mathbf{x}	

Forn	990 (2015) AMERICAN COUNCIL OF ENGINEERING 23-7293484		Р	age 5
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u>, L.L</u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1	_		i
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		├
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	- i	ľ	ľ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3		.	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	\vdash
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	-	X
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			İ
	account)?	4a		x
b	If "Yes," enter the name of the foreign country	"		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			!
	(FBAR).			,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	l	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u></u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	ļ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			1 :
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1,6	 	<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		\vdash
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C3			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		1	
a	Initiation fees and capital contributions included on Part VIII, line 12	_] ,
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	
11	Section 501(c)(12) organizations. Enter			,
a	Gross income from members or shareholders Cross process from ethographic and an action of the company of the c		l	
þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZa		┢
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\dashv		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O	1		
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 13b		1	l .
c	Enter the amount of reserves on hand		<u></u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
_b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
DAA		For	n 990	(2015)

Forr	n 990 (2015) AMERICAN COUNCIL OF ENGINEERING 23-7293484		P	age 6
_	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and fo		
-	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			_X_
<u>Sec</u>	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 20			
	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			
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		-	
2	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	,		v
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	<u>3</u> 4		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6	X	
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint		- 22	
·a	one or more members of the governing body?	7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	_,		
~	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	ie Co	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
þ	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	12 <u>a</u>	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u>x</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	<u> </u>	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	<u>X</u>	
15	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?	45-		Ť
a	The organization's CEO, Executive Director, or top management official	15a		<u>x</u>
b	Other officers or key employees of the organization	15b		
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
108	with a taxable entity during the year?	16a		X
b		IVa		
D	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		
Sac	ction C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE	<u>-</u>		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
- •	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	HE ORGANIZATION 800 NORTH THIRD STREET			
	ARRISBURG PA 17102 800	-65	1 – 1	946

Form 990 (20	015) AMERICAN COUNCIL OF ENGINEERING 23-7293484	Page 7
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 organization's	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the 's tax year.	
1	of the community of the control of t	?

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

(A) Name and Title	(B) Average hours per week (list any	box	, unle	ss pe	ition more rson i	than or s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1)BARRY EPLEY							一				
İ	1.00	1					1	İ	İ		
IMM.PAST PRESIDENT	0.00	x		X				0	0	0	
(2) SEAN HENDERSON											
]	1.00						- 1				
PRESIDENT	0.00	X		X				0	0	0	
(3) MATTHEW CUMMING	S										
	1.00	1									
PRESIDENT ELECT	0.00	<u> </u>		X				0	0	<u>_</u> 0	
(4) JOSEPH O'NEIL	_										
]	1.00	1					Į	ļ			
VICE PRESIDENT	0.00	X		X				0	0	0	
(5) PERRY SCHWEISS						1	Į				
]	1.00	1					l				
<u> </u>	0.00	X		X	<u> </u>			0	0		
(6) DAVID LOWDERMIL		ł				łł	ŀ	ł			
	1.00	1				1					
PAST PRES(TIL 5/15)	0.00	X		X		$\sqcup \downarrow$		0	0	0	
(7)ERIC FRARY											
	1.00					i I				_	
SECRETARY	0.00	X	_	X		Ш		0	0	0	
(8) CHRISTOPHER BOR							Ì				
	1.00					li		_		_	
ACEC DIRECTOR	0.00	X	<u> </u>			\sqcup	_	0	0	0	
(9) GREG LEBO]	,				J	j			
	1.00						١		_	_	
DIRECTOR	0.00	X	_		<u> </u>	\sqcup	_	0	0	0	
10)MATTHEW MARQUAR		1	l								
	1.00		1						_	_	
DIRECTOR	0.00	X	\vdash	L.,	L.	┞—┼		0	0	0	
11)TROY HOLLOWAY				·							
	1.00	1						_		_	
DIRECTOR	0.00	X		l .	l			0	0	Form 990 (2015	

DAA

Form 990 (2015) AMERICAN								ING 23-729 , and Highest Compens		ad\		<u>P</u>	age (
Part VII Section A. Officers (A) Name and title	(B) Average hours per week (list any	o not d	Pos check ess pe	c) ition more rson	than d	one n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	Est am		(F) stimated nount of other pensation		
	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from to organize and rela organiza	ation ated	
(12) EDWARD REESE	1.00							0					
DIRECTOR (13) LEA NADLER	0.00	X	-			Н		0	0				
(13) Barr Madain	1.00												
DIRECTOR (14) BILL GROSS	0.00	X						0	0				<u>C</u>
(==, ==================================	1.00												
DIRECTOR	0.00	x						0	0				0
(15) ROSELINE MAR													
	1.00								_				_
DIRECTOR (16) YASSMIN GRAM	0.00	X	\vdash	_				0	0	├──			<u>C</u>
(10) TASSMIN GRAM	1.00	l						!		İ			
DIRECTOR	0.00	x						0	0				0
(17) MICHAEL BOUG		-				Г							
	1.00)			
DIRECTOR	0.00	X						0	0	<u> </u>			0
(18) SCOTT STERNB													
DIRECTOR (TIL 5/15)	1.00	x						0	0				C
(19) ERIC VEYDT													
	1.00												_
DIRECTOR	0.00	X	L					0	0				0
1b Sub-total c Total from continuation she	note to Bort VIII		atio.	۰.۸				161,000		├──		6	778
_ d Total (add lines 1b and 1c)	sets to Fait Vii	i, Je	Ctioi	'^				161,000		 			778
Total number of individuals (i reportable compensation from				to th	ose	liste	d ab						
	organizac		_								\Box	Yes	No
3 Did the organization list any f									ensated	ŀ	3		X
employee on line 1a? If "Yes, 4 For any individual listed on lir									tion from the	ŀ	- 		 ^
organization and related orga										J.	-	<u>.</u> .	
individual 5 Did any person listed on line									on or individual		4	<u> </u>	
for services rendered to the of Section B. Independent Contract		<u>Yes</u>	s," cc	mpi	ete :	Sche	dule	y J for such person			5		X
Complete this table for your f compensation from the organ	ive highest con									tax year			_
	(A) business address	COII	ipen	Sauc	<i>/</i> 11 10	1 010	Can		(B)	tax year		(C) mpensa	ntion.
ivarrie and	ousiness address						\vdash	Descrip	DON OF SCIAICGS			mpelisa	ad <u>VII</u>
-													
					_								
							ļ						
										ļ			
 							\vdash						
							I			- 1			

		0 (2015) AMERICAN (OF ENGI	LNEERING	23-1293484	<u> </u>		Page 9
Pa	art V	III Statement of Re	venue)			ina in thia Dant VIII	1)		
10.0	*.5	Check if Schedule	<u> </u>	ontains	a respons	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue		(D) Revenue duded from tax nder sections 512-514
Program Service Revenue Contributions, Gifts, Grants	1a	Federated campaigns	1a							
Gra	ь	Membership dues	1b							
Ą,	ြင	Fundraising events	1c				:			
igit ia	d	Related organizations	1d						ļ	
ns,	е	Government grants (contributions)	1e						ļ	
tio er S	f	All other contributions, gifts, grants,							1	
햧	ĺ	and similar amounts not included above	1f_							
ğ	g	Noncash contributions included in lines	1a-1f	\$					1	
ည္အမြ	h	Total. Add lines 1a-1f			▶					
ž					Busn Code					
Şev.	2a	MEMBERSHIP DUES			900099	444,744	444,744		↓ _	
9	b	MEETING REVENUE			900099	198,631	198,631		 	
Ž	C								├	
Š	d				<u> </u>				├ ──	
lan	е				<u> </u>				 	
rog	f	All other program service re	venue			642 255		· · · · · · · · · · · · · · · · · · ·	<u></u>	
	- 3					643,375				
	3	Investment income (includir	ig divid	ends, inte	erest,	5,162				5,162
		and other similar amounts)		. 4 1		5,162			├	5,162
	4	Income from investment of the	ax-exe	mpt bond	proceeds				├	
	5	Royalties		(-)	Damasal P			-	├──	
	_ ا	(i) Real		(11)	Personal					
	6a	Gross rents	-							
	b	Less rental exps				:			ſ	
	C	Rental inc or (loss								
	d 7a	Net rental income or (loss) Gross amount from (i) Securitie		- /11	Othor				├	
	1	sales of assets		 '') Other					
	.	other than inventory		 						
	["	Less cost or other								
	١.	basis & sales exps		┼						
	Ι.	Gain or (loss) Net gain or (loss)		<u> </u>						
4	d	Gross income from fundraising e	wonte							
nge) °a	(not including \$.venta]	
Ve		of contributions reported on line	1c)						1	
ď	l	See Part IV, line 18	a		29,353					
Other Rever	 	Less direct expenses	b		12,754				l	
ŏ	l .	Net income or (loss) from fu		na events		16,599				16,599
		Gross income from gaming activ		lig events	· ·	20,000		-	\vdash	
	٦	See Part IV, line 19	a.						1	
	۱ ہ	Less direct expenses	b							
		Net income or (loss) from ga	_	ctivities					<u>}</u> -	
		Gross sales of inventory, les		OUVILLOS					\vdash	
	'"	returns and allowances	a a							
	Ь,	Less. cost of goods sold	b							
	ı	Net income or (loss) from sa	_	nventory					Ì	-
	Ť	Miscellaneous Revenu		y	Busn Code		- "-			
	11a									•
	ь								$\overline{}$	
	ءَ ا									
	ď	All other revenue								
	e	Total. Add lines 11a-11d			•					
	12	Total revenue. See instruc	tions		• I	665,136	643,375	0		21,761

_	n 990 (2015) AMERICAN COUNCI		RING 23-72	93484	Page 1
	art IX Statement of Functional Ex				
Sect	ion 501(c)(3) and 501(c)(4) organizations mus			st complete column (A)	
	Check if Schedule O contains a res			(0)	(0)
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u> </u>	3b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic	10 000			
•	individuals. See Part IV, line 22	10,000			
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,				
J	trustees, and key employees	161,000			
6	Compensation not included above, to disqualified	101/000			
·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	j			
7	Other salaries and wages	99,121		*	
8	Pension plan accruals and contributions (include			_	
	section 401(k) and 403(b) employer contributions)	4,644			
9	Other employee benefits	22,093			
10	Payroll taxes	18,189			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	12,650			
d	Lobbying				
е	Professional fundraising services See Part IV, line	7			
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)	14,053			
12	Advertising and promotion	7,834			
13	Office expenses	19,937			
14	Information technology				<u> </u>
15	Royalties				
16	Occupancy	37,655			
17	Travel	17,624			
18	Payments of travel or entertainment expense	s			
	for any federal, state, or local public officials	156 701			
19	Conferences, conventions, and meetings	156,781			
20	Interest	104,701			
21	Payments to affiliates	22,994			
22 23	Depreciation, depletion, and amortization Insurance	4,616			
24		7,010			
24	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	DUES & SUBSCRIPTIONS	18,632			
a b	BANK CHARGES & CC FEES	12,419			
c	CHARITABLE CONTRIBUTION	1,000			
d	TENANT IMPROVEMENTS	240			
	All other expenses	-3,890			
25	Total functional expenses. Add lines 1 through 24e	742,293	0	0	
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				

Form **990** (2015)

Form 990 (2015) AMERICAN COUNCIL OF ENGINEERING

23-7293484

Page 11

P	art 2	X Balance Sheet				
		Check if Schedule O contains a response or ne	ote to any line in this Part X			
				(A)		(B)
_		· <u> </u>		Beginning of year		End of year
	1	Cash—non-interest bearing		152,271	1	187,559
	2	Savings and temporary cash investments		97,820	2	59,030
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		3,000	4	
	5	Loans and other receivables from current and forme	r officers, directors,			į
		trustees, key employees, and highest compensated	employees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified				
		4958(f)(1)), persons described in section 4958(c)(3)(ahd	ŀ	
		sponsoring organizations of section 501(c)(9) volunts				
Assets	l _	organizations (see instructions) Complete Part II of	Schedule L		6	
Ass	7	Notes and loans receivable, net			7	
•	8	Inventones for sale or use		2 001	8	2 022
	9	Prepaid expenses and deferred charges	1 1	2,021	9	2,922
	Tua	Land, buildings, and equipment cost or	10a 155,575]	,
	۱ .	other basis Complete Part VI of Schedule D Less' accumulated depreciation	10a 155,575 10b 118,297		10c	37,278
	11	Investments—publicly traded securities	100 110,29	118,465		119,149
	12	Investments—publicly traded securities Investments—other securities See Part IV, line 11		110/403	12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal lin	e 34)	433,849		405,938
_	17	Accounts payable and accrued expenses		83,349		146,455
	18	Grants payable			18_	
	19	Deferred revenue	149,559	19	164,089	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part	V of Schedule D		21	
es	22	Loans and other payables to current and former office	ers, directors,			
Liabilities		trustees, key employees, highest compensated emp	loyees, and			,
dei		disqualified persons Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrelated	third parties		23	
	24	Unsecured notes and loans payable to unrelated thir	•	<u> </u>	24	ļ
	25	Other liabilities (including federal income tax, payabl				
		parties, and other liabilities not included on lines 17-	24). Complete Part X			
	١	of Schedule D		222 000	25	210 544
	26	Total liabilities. Add lines 17 through 25		232,908	26	310,544
Ses		Organizations that follow SFAS 117 (ASC 958), c				
anc	27	complete lines 27 through 29, and lines 33 and 3- Unrestricted net assets	. .	142,760	27	30,614
Bal	27 28	Temporarily restricted net assets		58,181		64,780
ď	1	Permanently restricted net assets		30,101	29	01,700
Ţ		Organizations that do not follow SFAS 117 (ASC	958), check here ▶ and			
ò	İ	complete lines 30 through 34.	Jooj, officer field P and			
ets	30	Capital stock or trust principal, or current funds			30	
155	31	Paid-in or capital surplus, or land, building, or equipr	nent fund	· · · · · · · · · · · · · · · · · · ·	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated incom			32	
Z	33	Total net assets or fund balances	,	200,941		95,394
_	34	Total liabilities and net assets/fund balances		433,849		405,938
_	·					Form 990 (20)

Forn	n 990 (2015) AMERICAN COUNCIL OF ENGINEERING 23-7293484			F	age 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				\Box
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,136
2	Total expenses (must equal Part IX, column (A), line 25)	2			,293
3	Revenue less expenses. Subtract line 2 from line 1	3			,157
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		200	,941
5	Net unrealized gains (losses) on investments	5		-2	,975
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		-25	,415
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		95	,394
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	_			
				Ye	s No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				J
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			I^{-}	
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			.	.
b	Were the organization's financial statements audited by an independent accountant?		2	b X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				T^{-}
	separate basis, consolidated basis, or both		İ		1
	X Separate basis Consolidated basis Both consolidated and separate basis				_ '
С	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?		2	<u>c</u>	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in		F		
	Schedule O.			l	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in]	
	the Single Audit Act and OMB Circular A-133?		3	a	<u> </u>
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		3	b	
			I	orm 9	90 (2015)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A

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

Гах)	(see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizations: Complete Part				
Nam	e of organization AMERICAN COUNCIL OF				tification number
	COMPANIES OF PENNSY			23-72934	
<u>Pa</u>	rt I-A Complete if the organization is exe			<u>ction 527 organi</u>	zation.
1	Provide a description of the organization's direct and ind	irect political campaign activit	ies in Part IV		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	rt I-B Complete if the organization is exe	mpt under section 501	(c)(3).		
1	Enter the amount of any excise tax incurred by the organ		<u> </u>	▶ \$	
2	Enter the amount of any excise tax incurred by organizar		4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file				Yes No
	Was a correction made?	, , , , , , , ,			Yes No
	If "Yes." describe in Part IV				
Pa	rt I-C Complete if the organization is exe	mpt under section 501	(c), except se	ection 501(c)(3).	
1	Enter the amount directly expended by the filing organization			,	
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contril	buted to other organizations fo	or section		
	527 exempt function activities	·		▶ \$	
3	Total exempt function expenditures Add lines 1 and 2. E	Enter here and on Form 1120-	POL,		
	line 17b			▶\$	
4	Did the filing organization file Form 1120-POL for this ye	ear?			Yes No
5	Enter the names, addresses and employer identification		27 political organi	zations to which the f	ilına
	organization made payments For each organization liste	, ,			•
	the amount of political contributions received that were p				
	as a separate segregated fund or a political action comm		•	-	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(2) 1.50	(5)/155.555	(0, 2	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization. If
				!	none, enter -0-
1)				-	
,					
2)					
3)					
4)					
5)					
_					
6)					

Sch	edule C (Form 990 or 990-EZ) 2015 AME	RICAN COUNC	IL OF ENGI	NEERING	: :	23-7293484	1 Page 2
_	art II-A Complete if the orga						
_	section 501(h)). Check ▶ ☐ if the filing organiz	estion holonge to a	n offiliated arou	n (and list in	Dort I	V soch offiliator	d group mombor's
^	name, address, E						a group members
В	Check ► ☐ if the filing organiz						
_		obbying Expendi			1	(a) Filing	(b) Affiliated
	(The term "expenditures)	orga	anization's totals	group totals
1:	a Total lobbying expenditures to influence						
1	b Total lobbying expenditures to influence	ce a legislative body (c	lirect lobbying)				
(c Total lobbying expenditures (add lines	1a and 1b)					
(d Other exempt purpose expenditures						
	 Total exempt purpose expenditures (a 	•					
	f Lobbying nontaxable amount Enter the columns	e amount from the foll	owing table in both				
	If the amount on line 1e, column (a) or (b) is: The lobbying no	ntaxable amount is:				
	Not over \$500,000	20% of the amou	nt on line 1 <u>e</u>				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	% of the excess over	500,000		ł	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	% of the excess over	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$	1,500,000			
	Over \$17,000,000	\$1,000,000					
	g Grassroots nontaxable amount (enter	•					_ _
	h Subtract line 1g from line 1a If zero or				ļ		····
	 Subtract line 1f from line 1c If zero or If there is an amount other than zero or 	•	1. did the organizat	tion file Form 4			
	reporting section 4911 tax for this year		ii, did the organiza	uon ille Form 4	120		Yes No
	reporting section 4011 tax for this year		ng Period Under	section 501/	h)		1100 1100
	(Some organizations that ma	_	•			l of the five colu	ımns helow
	<u> </u>	See the separate in			•	TOT CHO HAVE GOIL	Jimis Below.
_		obbying Expenditu	res During 4-Yea	ar Averaging	Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 201	4	(d) 2015	(e) Total
2	a Lobbying nontaxable amount						
	b Lobbying ceiling amount (150% of line 2a, column(e))						
_	c Total lobbying expenditures						
	d Grassroots nontaxable amount						
_	e Grassroots ceiling amount (150% of line 2d, column (e))						
	f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015

	23-729				Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and have clearly complete if the organization is exempt under section 501(c)(3) and have clearly complete if the organization is exempt under section 501(c)(3).	as NOT f	iled F	Form 5768	}	
	(6	a)	(b)	
For each "Yes," response on lines 1a through 1ı below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?					
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? 					
Publications, or published or broadcast statements?f Grants to other organizations for lobbying purposes?					
 g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? 					
j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), o	or section		
501(c)(6).				T.,	r
1 Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	X X
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 			3	х	^
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			r section Part III-A,	line	
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of 		1	3.	35,	047
political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year		2a 2b		17,	683
c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2c 3		17, 22,	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		5		-5,	067

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2015 AMERICAN COUNCIL OF ENGINEERING

PartilVe* Supplemental Information (continued) 23-7293484

Page 4

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

Openito Public

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990 Name of the organization Employer Identification number AMERICAN COUNCIL OF ENGINEERING COMPANIES OF PENNSYLVANIA 23-7293484 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year leld at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

Sche	edule D (Form 990) 2015 AMERICA	N COUNCIL C	F ENGINEER	RING	23-72	93484	Page 2
Pa	art III Organizations Maintair	ning Collections	of Art, Historica	al Treasure	es, or Otl	her Similar	Assets (continued)
3	Using the organization's acquisition, according to the collection items (check all that apply)	ession, and other rec	ords, check any of th	e following th	at are a sig	nificant use of	fits
а	Public exhibition	d 🗌	Loan or exchange p	rograms			
b	Scholarly research	e	Other	•			
c	Preservation for future generations						
4	Provide a description of the organization XIII.	's collections and exp	plain how they further	the organiza	tion's exem	pt purpose in	Part
5	During the year, did the organization sol	icit or receive donatio	ns of art, historical tr	easures or of	her sımılar		
Ū	assets to be sold to raise funds rather th						Yes No
Pa	irt IV Escrow and Custodial		part or the organia				
122	Complete if the organiza 990, Part X, line 21.		es" on Form 990), Part IV, li	ne 9, or r	eported an	amount on Form
1a	Is the organization an agent, trustee, cu	stodian or other intern	nediary for contribution	ons or other a	ssets not		□ Vaa □ Na
L	included on Form 990, Part X?	VIII and complete the	fallauma tabla				Yes No
D	If "Yes," explain the arrangement in Part	XIII and complete the	e tollowing table				Amount
_	Decrees halones					1	Amount
	Beginning balance					1c	
	Additions during the year					1d	
_	Distributions during the year					1e	
f	Ending balance	5 000 D 1V	. 64 6		41-61	1f	
	Did the organization include an amount					ty /	∐ Yes No
	If "Yes," explain the arrangement in Part art V Endowment Funds.	XIII Check here if the	e explanation has be	en provided d	n Part XIII		
Į FC	art V Endowment Funds. Complete if the organiza	tion answered "V	oe" on Form 990	Dort IV to	no 10		
	Complete if the organiza	(a) Current year	(b) Pnor year	(c) Two yea		(d) Three years b	ack (e) Four years back
4.	Paging of year balance	(a) Current year	(b) Filor year	(c) I wo yea	13 Dack	(u) Three years o	ack (e) Four years back
	Beginning of year balance Contributions		- 	 			
				 			
C	Net investment earnings, gains, and			ľ			
	losses	- ··		 			
	Grants or scholarships Other expenditures for facilities and			 			
е	•				Ì		
	programs			 			
	Administrative expenses					_	
g	•	ourrent year and hale	anno (luno 10, column	(a)) hold on			
2	Provide the estimated percentage of the Board designated or quasi-endowment I	•	ance (line 19, columi	i (a)) lielu as			
a		/o					
b	Temporarily restricted endowment	%					
C	The percentages on lines 2a, 2b, and 2c						
20	Are there endowment funds not in the per		numetion that are hold	and administ	arad for the		
Ja	organization by.	ossession of the organ	nization that are neith	and administ	erea for the	;	Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
h	If "Yes" on line 3a(ii), are the related org	anizations listed as re	aurad on Schadula	P2			3b
4	Describe in Part XIII the intended uses of		•	N'			30
P	art VI Land, Buildings, and E		ildowinient julius				
1	Complete if the organiza		es" on Form 990	Part IV li	na 11a S	See Form 9	00 Part Y line 10
	Description of property	(a) Cost or other		other basis		cumulated	(d) Book value
	2000 spaces of property	(investment)		her)	• •	eciation	12, 2001 10100
10	Land	,	· · · · ·				<u> </u>
	Buildings						
	Leasehold improvements						
	Equipment		1	55,575	1	118,297	37,278
	Other			, <u>,</u>		<u>,,</u>	37,270
	I. Add lines 1a through 1e. (Column (d) m	uist equal Form 990 I	Part X column (R) li	ne 10c)			37,278
. J.la		auc oquai i oiiii aao, i	arry, widnin (D), II				37,270

DAA

Schedule D (Form 990) 2015 AMERICAN COUNCIL OF Investments—Other Securities.	ENGINEERING	23-7293484 Page
Part VII	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11h See Form 990 Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation
•	(including name of security)	(b) book value	Cost or end-of-year market value
(1) Financial			<u> </u>
	eld equity interests		
(3) Other	eid equity interests		
(A)			
(A) (B)			
			
(C)			
(D) (E)			
(F)			
(i / (G)			
(H)			
	on (h) must equal Form 990, Part Y, col. (R) line 12.)		
Part VIII	nn (b) must equal Form 990, Part X, col. (B) line 12) ► Investments—Program Related.		<u> </u>
i air A iil	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
	(a) Description of threstitient	(b) book value	Cost or end-of-year market value
-(4)			Total St. Grad of year married value
_(1)		 	
_(2)			
_(3)		+	
_(4)			
_(5) ,		 	
<u>(6)</u>		 	
		<u> </u>	
_(8)		. 	
(9)			
Part IX	on (b) must equal Form 990, Part X, col (B) line 13) ► Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV	
	(a) Description		(b) Book value
<u>(1)</u>			
_(2)		<u> </u>	
_(3)			
_(4)			
_(5)			
_(6)			
_(7)			
_ <u>(8)</u>			
_(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 15.)		>
Part X	Other Liabilities. Complete if the organization answered "Yes" line 25.	on Form 990, Part IV	, line 11e or 11f See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	
	income taxes	†	1
(2)		†	1
(3)		 	1
(4)		1	1
(5)		 	1
(6)		1	1
(7)		 	1
		 	1
(8)		 	1
(9)	on (h) must equal Form 000. Bort V. cal. (B) line 25) h	 - · 	1
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	factoria to the essentiation	n's financial statements that reports the
	r uncertain tax positions. In Part XIII, provide the text of the sliability for uncertain tax positions under FIN 48 (ASC 740)		
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740)	i. Check here if the text of	the loothole has been provided in Fall Alli

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 AMERICAN COUNCIL OF EN	GINEERING	23-729348	4	Page 4
Part XI Reconciliation of Revenue per Audited Finance			Return	
Complete if the organization answered "Yes" on		ine 12a		402 654
1 Total revenue, gains, and other support per audited financial statemen	nts	-	1	403,654
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	11			
a Net unrealized gains (losses) on investments	2a		ŀ	
b Donated services and use of facilities	2b			
c Recoveries of prior year grants	2c		- 1	
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d		-	2e	400 654
3 Subtract line 2e from line 1	1 1	-	3	403,654
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		İ	- 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII)	4b	261,482		
c Add lines 4a and 4b		<u> </u>	4c	261,482
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I,		. <u></u>	5	665,136
Part XII Reconciliation of Expenses per Audited Final			er Retu	rn.
Complete if the organization answered "Yes" on	Form 990, Part IV, I	ine 12a		
1 Total expenses and losses per audited financial statements		1	1	480,811
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	•		ŀ	
a Donated services and use of facilities	2a		ľ	
b Prior year adjustments	2b		1	
c Other losses	2c			
d Other (Describe in Part XIII.)	2d		- l	
e Add lines 2a through 2d		L	2e	
3 Subtract line 2e from line 1			3	480,811
4 Amounts included on Form 990, Part IX, line 25, but not on line 1				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		ļ	
b Other (Describe in Part XIII.)	4b	261,482		
c Add lines 4a and 4b			4c	261,482
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part	l, line 18)	Γ	5	742,293
Part XIII Supplemental Information.		-	•	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1	a and 4; Part IV, lines 1b	and 2b, Part V, line	4. Part X	. line
2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this				
PART XI, LINE 4B - REVENUE AMOUNTS I			HER	
EVENT REVENUES NETTED W/ EXPENSE AT	F/S		\$	261,482
	-,-		4	
PART XII, LINE 4B - EXPENSE AMOUNTS	INCLUDED ON	RETURN - O	THER	
IIII MII, DING ID EMILINDE MICONID				
FURNT DEURNIES NETTED W/ FYDENSE AT	ㅠ/q		Ċ	261 482

Schedule D (Form 990) 2015 AMERICAN COUNCIL OF ENGINEERING Part XIII Supplemental Information (continued) 23-7293484

q = (1 - 3) - 1

Page 5

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Employer identification number

AMERICAN COUNCIL OF ENGINEERING Name of the organization COMPANIES OF PENNSYLVANIA 23-7293484 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (III) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) custody or (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization control of ontributions col (I) Yes No 10

Total

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Schedule G (Form 990 or 990-EZ) 2015 AMERICAN COUNCIL OF ENGINEERING 23-7293484 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events GOLF TOURNAMENT (add col (a) through NONE col (c)) (event type) (event type) (total number) 29,353 29,353 1 Gross receipts 2 Less Contributions 3 Gross income (line 1 minus 29,353 29,353 line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 12,754 12,754 9 Other direct expenses 12,754 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue Direct Expenses 2 Cash prizes 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: Yes No a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Yes No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain

Sche	edule G (Form 990 or 990-EZ) 2015 AMERICAN COUNCIL OF ENGINEERING 23-7293484 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
13	formed to administer charitable gaming? Indicate the percentage of gaming activity conducted in:
а	The organization's facility 13a %
b	An outside facility 13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records
	Name ▶
	Address ▶
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization) and the
	amount of gaming revenue retained by the third party ▶\$
С	If "Yes," enter name and address of the third party
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year
Par	t IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Septiment of the septim

SCH	SCHEDULEI		Grants 6	ind Oth	ier Assistanc	Grants and Other Assistance to Organizations,	tions,		OMB No 1545-0047	1
(For	(Form 990)		Governme	ents, ar	nd Individuals	ments, and Individuals in the United States	l States		2015	
			Complete if the c	rganizatio	n answered "Yes" on Fo ► Attach to Form 990.	e organization answered "Yes" on Form 990, Part IV, line ∠1 or ∠2. ▶ Attach to Form 990.	, line 21 or 22.		Open to Public	
Departru	Department of the Treasury Internal Revenue Service	- Infe	ormation about S	chedule I ((Form 990) and its i	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	w.irs.gov/form99	0.	inspection.	ال کی
Name o	Name of the organization	AMERICAN COUNCIL OF ENGINEERING COMPANIES OF PENNSYLVANIA	ICIL OF ENGINE! PENNSYLVANTA	RING				Empl	Employer identification number 23 – 7293484	
Part		ou G	d Assistance							, ,
-	Does the organizate selection critering	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	the amount of the tance?	grants or	assistance, the grant	ees' eligibility for the	grants or assistand	æ, and	X Yes	_
7	+ II Crant	In Part IV the organization's procedures for monitoring the use of grant forms and Domestic Governments. Complete if the organization answered "Yes"	Composition Ords	nization	s and Domestic	Governments.	Complete of the	organization	answered "Yes" on Form	ı
Ē	990. F	990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	nt that receive	d more th	ian \$5,000. Part	Il can be duplicat	ed if additional	space is need	led.	ı
-	(a) Name an	(a) Name and address of organization or government	(a)	(c) IRC section	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Ξ										1
(3)										I
<u>(6)</u>										
€										
(2)										
(9)										
E										
(8)										
6)										I
7 m	Enter total numb Enter total numb	Enter total number of section 501(c)(3) and government organization Enter total number of other organizations listed in the line 1 table	tion	sted in the l	s listed in the line 1 table	į			A A	1

Schedule I (Form 990) (2015)

Schedule 1 (Form 990) (2015) AMERICAN COUNCIL OF ENGINEERING	UNCIL OF ENGI		23-7293484		Page 2
Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	to Domestic Individ	luals. Complete if the	ne organization ansv	vered "Yes" on Form 990,	
	litional space is need	pe.	:		•
(a) Type of grant or assistance	(b) Number of	۳	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
	recipients	cash grant	Hori-Cash assistance	riviv, appiaisa, ouici)	
1 SCHOLARSHIPS	2	10,000			
2					
t					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	rovide the information	required in Part I, I	ine 2, Part III, colun	in (b), and any other addit	tional information.

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2

CANDIDATES MUST MEET SPECIFIC APPLICATION AND EDUCATION CRITERIA AND MUST

PROVIDE AN OFFICIAL COPY OF THEIR ACADEMIC TRANSCRIPTS, ESSAY AND

RECOMMENDATION LETTERS.

AN INDEPENDENT SELECTION COMMITTEE EVALUATES THE APPLICATIONS AND SELECTS

THE WINNERS.

SCHOLARSHIP CHECKS ARE ISSUED DIRECTLY TO THE RECIPIENTS' COLLEGE AFTER

VERIFICATION OF FULL-TIME ENROLLMENT.

SCHEDULE J (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.

OMB No 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. AMERICAN COUNCIL OF ENGINEERING COMPANIES OF PENNSYLVANIA

Employer identification number 23-7293484

rt I Questions Regarding Compensation			
		Yes	No
Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	ļ	1	
First-class or charter travel Housing allowance or residence for personal use	ſ		1
Travel for companions Payments for business use of personal residence			
	- 1		
Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
· · · · · · · · · · · · · · · · · · ·			_
or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
explain	1b	X	├
Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all		-	-
directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			1
1a?	_2_	X	
Indicate which, if any, of the following the filing organization used to establish the compensation of the			
organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a]
related organization to establish compensation of the CEO/Executive Director, but explain in Part III]
Compensation committee X Written employment contract		l	1
Independent compensation consultant Compensation survey or study		1	l
Form 990 of other organizations X Approval by the board or compensation committee			
During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
organization or a related organization:			
Receive a severance payment or change-of-control payment?	_4a		X
Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
Participate in, or receive payment from, an equity-based compensation arrangement?	4c	<u> </u>	X
If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
compensation contingent on the revenues of			
The organization?	_5a		<u> </u>
Any related organization?	5b	<u> </u>	<u> </u>
If "Yes" to line 5a or 5b, describe in Part III			
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
compensation contingent on the net earnings of	_	~	
•	_6a		<u> </u>
•	_6b	<u> </u>	↓
If "Yes" on line 6a or 6b, describe in Part III			
For persons listed on Form 990, Part VII. Section A line 1a, did the organization provide any non-fixed	-	1	-
	7	ŀ	ļ
			1
			1
in Part III	8_	<u> </u>	ļ
If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
Regulations section 53.4958-6(c)?	9		
	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these lems First-class or charter travel Travel for companions Travel for co	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these tiems First-class or charter travel Housing allowance or residence for personal use Fravel for companions Part III to provide any relevant information regarding these tiems Housing allowance or residence for personal use Part III to provide any relevant information regarding these tiems Housing allowance or residence for personal use Part III to strict the mitted of the companion of the companion of the companion of the companion of the companion of the companion of the following the filling organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described shove? If "No," complete Part III to explain 1b	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items First-class or charler travel First-class or charler tra

Regulations section 53.4958-6(c)?

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Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. AMERICAN COUNCIL OF ENGINEERING 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

	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(r) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits		in column (B) reported as deferred on pnor Form 990
	161,00	0 0	0.0	2,600	4,178	167,778	0 0
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Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 AMERICAN COUNCIL OF ENGINEERING

23627

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 Supplemental Information for any additional information.

PART I, LINE 1A - FRINGE OR EXPENSE EXPLANATION

THE ORGANIZATION PAYS THE COUNTRY CLUB DUES OF THE EXECUTIVE VICE PRESIDENT

FOR THE SOLE PURPOSE OF HAVING THE FACILITIES AVAILABLE FOR MEETINGS OF THE

ORGANIZATION.

Schedule J (Form 990) 2015

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2015

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

AMERICAN COUNCIL OF ENGINEERING COMPANIES OF PENNSYLVANIA

Employer identification number

23-7293484

FORM 990 - ORGANIZATION'S MISSION

TO PROMOTE THE PUBLIC WELFARE AND ENHANCE THE REPUTATION OF THE CONSULTING ENGINEER BY ENCOURAGING THE MAINTENANCE OF THE HIGHEST STANDARDS OF PROFESSIONAL ETHICS AND PRACTICE; TO ENCOURAGE THE INTELLECTUAL AND SCIENTIFIC ADVANCEMENT AND DEVELOPMENT OF THE MEMBERS IN ORDER TO ENHANCE THEIR PROFESSIONAL AND ECONOMIC WELFARE; TO FOSTER HARMONY, COOPERATION AND MUTUAL UNDERSTANDING THROUGHOUT THE ENGINEERING AND ALLIED PROFESSIONS; AND TO ACT ON ON BEHALF OF THE MEMBERS IN CONNNECTION WITH PROPOSALS OF GOVERNMENT OR OTHER BODIES CONCERNING THEM.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
THE COUNCIL IS COMPRISED OF MEMBER FIRMS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE ORGANIZATION'S MEMBER FIRMS HAVE THE ABILITY TO ELECT MEMBERS OF THE

EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 EACH MEMBER OF THE BOARD IS PROVIDED A COPY OF FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

PERIODIC REVIEWS WILL BE CONDUCTED TO ENSURE THE ORGANIZATION OPERATES IN

A MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN

ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS. THE REVIEWS WILL

INCLUDE BUT ARE NOT LIMITED TO: WHETHER COMPENSATION ARRANGEMENTS AND

Schedule O (Form 990 or 990-EZ) (2015)

Page 2
Employer identification number

Name of the organization

AMERICAN COUNCIL OF ENGINEERING

23-7293484

BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION AND THE RESULT OF ARMS LENGTH BARGAINING; WHETHER PARTNERSHIPS, JOINT VENTURES AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE
AVAILABLE UPON REQUEST

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

EVENT REVENUES NETTED W/ EXPENSE AT F/S \$ -261,482

EVENT REVENUES NETTED W/ EXPENSE AT F/S \$ 261,482