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Return of Organization Exempt From Income Tax

OMB No 1545 0047

Department of the Treasury

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.

Open to Public

inte	nal Reven	ue Service	Information ab	out Form 990 and its inst	ructions is at	www.irs.	gov/form990.		msp	ection
A	For the	2015 cale	ndar year, or tax year beginr	ning October 1	, 2015, a	nd ending	<u>Septem</u>	ber 30	, 20 16	
В	Check if	applicable	C Name of organization Ameri	can Society of Civil En	gineers Sac	ramento		Employe	ridentificatio	on number
	Address	-	Doing business as					94	- 60971	55
	Name ch		Number and street (or P.O. box	il mail is not delivered to stree	l audress)	Room/sui	te (Telephone	a number	
ñ	Initial refi	· ·	1801 Alexander Bell Driv	ve			1	703	- 295-6	109
		rr/term.nated	City or town, state or province,		tal code	·				
H		1	Reston, VA 20191-4382	• • • • • • • • • • • • • • • • • • • •	, m. 00-40		1,	Gross rec	2 010.0	328,738
\vdash	Amended			كالأوارة فيبهم فللمباري المشمرات فيستان المستوي المتافقة			_			
1	Abblican	on pending	F Name and address of principal	officer;			1			Yes A No
<u> </u>				·		-	H(b) Are all sa			
필		npt status	√ 501(c)(3) 50	(c) () ◀ (insert no.) l_	4947(a)(1) or	527			ist (see instr	
~ <u>1</u>	Wobsite		v.asce-sacto.org				H(c) Group o			2676
		organization (Corporation Trust 🕡 Ass	sociation 🔲 Othe: 🕨	L Yea	ir of formati	on 1921	M State o	l legal domic	ile CA
P	art i	Summa	ary							
5	1	Briefly de:	scribe the organization's n	nission or most significa	nt activities:					
Governance	}	Advance	Science and Promote C	ivil Engineering Profes	ssion.	********		• • • • • • • • • • • • • • • • • • • •		
					**************			*********		
	2	Check the	s box ▶ if the organizat	on discontinued its ope	rations ondi	sposed o	f-more than	25% offit	s net asse	ets
Jave Jave Jave	3	Numbero	s box ▶ ☐ if the organization of the g	overning body (Pad VI	ine ta)		GEIVE	J 3		4
2 3 6	1 -		of independent voting mem	212 222) (. 3,1 1.)						4
≪ Sa							@ e 964°	\$20.5		
Q §			ber of individuals employed		r (Fart V, ille	Fay Jul	_ 2.5 .2017			0
SCALLY Activities &			ber of volunteers (estimate	• •		`L	<u> </u>	一定		45
∢	1		elated business revenue fro	. , , , , , , , , , , , , , , , , , , ,		·OG	DEN.U	7a		0
	b	Net unrela	ated business taxable inco	me from Form 990-1, lit	ne 34 L			-7b-		0_
						_	Prior Yea)r	Curro	nt Year
စ္	8	Contributi	ions and grants (Part VIII, I	ine 1h)			1	38,473		128,296
Revenue	9	Program s	service revenue (Part VIII, I	ine 2g)		[_		69,906		198,835
Š	10	Investmen	nt income (Part VIII, colum-	n (A), lines 3, 4, and 7d)		. 1		119		1,607
Œ.	11	Other revi	enue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c,	and 11e)	. 「		0		0
	12	Total reve	nue-add lines 8 through 1	1 (must equal Part VIII, o	olumn (A), lir	ne 12)	2	08,498		328,738
			d similar amounts paid (Pa					81,759		89,849
			paid to or for members (Pa		-,			0		0
ιΔ.			ther compensation, employ		mn (A) lines (5-101		0		0
Expenses	1		nal fundraising fees (Part I.	· ·	(. 1),	· · · · · -				0
Гe			Iraising expenses (Part IX,			0	701 X 11 12 13 13	- J	The same	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
ă						<u>.</u>				
			enses (Part IX, column (A)			. · · -		88,670		185,759
			enses. Add lines 13-17 (m) <u> </u>		70,429		275,608
		Revenue I	ess expenses. Subtract lir	ne 18 trom line 12	. <u></u>	<u> </u>		1,931)		53,130
ets or lances						E	leginning of Cur		End o	of Year
sets	20	Total asse	ets (Part X, line 16)			· · L	4	27,108		480,238
Net Asse Fund Balt	21	Total liabil	lities (Part X, line 26) .		•	L		0		0_
žž	22	Net assets	s or fund balances. Subtra	ct line 21 from line 20		[4	27,108		480,238
Pa	art II	Signati	ure Block							
Un	der penal	ties of periun	y, I declare that I have examined	this return, including accompa	nvina schedules	and states	nents, and to the	e best of m	v knowledge	and belief, it is
			le Occlaration of preparer (other							
		l l	111 7 01							
Sig	ın İ	Signa	pre of officer				Date	, ,)	
He		l '	ar Faghih - Section Trea	CHECE			5.,,,	7/	12/7	017
			or print name and title	5urer					3/2	01/
		L		ID-anica a secondario		16	la .	,	TOTAL.	
Pa	id	Entrop	o preparer's name	Preparer s signature		Da	ıe	Check [
Pre	eparei	r						self-empl	oyed	
	e Only	f	me 🕨				Firm'	s EIN >		
_		Firm's ad	dress >				Phon	e no	•	
Ma	y the IR	S discuss	this return with the prepai	er shown above? (see i	nstructions)			•		Yes No
For	Dannau	ork Doduc	tion Act Notice see the con	acata instructions		C-1. N	11202V		C.	vm 990 (2015)

Part	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	To advance the knowledge and practice of engineering in the public interest.		ieties with
	reliable information that affects the engineering profession. To provide a foru		
	societies to exchange views on common interest. Conduct engineering progr		member
2	organizations individually could not accomplish that enhance and serve the p Did the organization undertake any significant program services during the year whi		
~	prior Form 990 or 990-EZ?	ich were not listed on the	☐ Yes ☑ No
	If "Yes," describe these new services on Schedule O		Lies Millo
3	Did the organization cease conducting, or make significant changes in how it	conducts any program	า
	services?	conducte, any program	☐ Yes ☑ No
	If "Yes,' describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three	largest program service	s. as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the a		
	the total expenses, and revenue, if any, for each program service reported	J	
4a	(Code) (Expenses \$ 178,717 including grants of \$	0) (Revenue \$	197,326)
	Technical Meetings/Seminars/Presentations:	***************************************	
	The Sacramento Section and its affiliates host numerous technical seminars a	and presentations the y	ear.
	The technical meetings are held to inform the profession about the civil engin	eering issues and to in	spire
	civil engineers to continually learn and grow throughout their careers. Educa	tional programs presen	ted
	are geared to enhance engineering abilities. All member dinners are held to en	ncourage individuals le	arn more
	about their discipline and explore into different areas of expertise.		
4b	(Code:) (Expenses \$ 84,448 including grants of \$	0) (Revenue \$	88,811)
	Awards & Younger Member Group Activities:		
	The Sacramento Section and its affiliates are designed to enhance public awa		
	profession through scholarship awards program. The awards program honor	rs the achievements and	d increase
	public awareness. Includes honor and award ceremonies, science fair, etc.		
			.,,

4c	(Code) (Expenses \$ 3,297 including grants of \$	0) (Revenue \$	1,509)
	Newletter / Website		
	Newsletter and website is geared to inform general public of current issues in	the civil engineering in	ndustry.
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 9,145 including grants of \$ 98,070) (Revenue \$	41,092)	
40			

Part	W Chacklist of Paguired Schadules		P	age 3
ell,	Checklist of Required Schedules		Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1	√	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	1	/
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space. the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III .	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
	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		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e		√
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States? .	14a		1
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		1
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		/
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? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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		1
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		1

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	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 19 If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	:	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	25		Y
_ TG	\$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		/ _
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3), 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	ļ	1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior]	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		-√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	See Ma		1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	<u> </u>	- Y
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M .	20		
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30	 	√
	Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		1	1
	complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	-	†	+
	or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		†	1
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-31	+	-
	19? Note. All Form 990 filers are required to complete Schedule O	38		1

Form **990** (2015)

Part				Γ
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No.
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	\longrightarrow		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 1b		- 1	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	- 1	1	
·	reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			<u> </u>
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	1	- 1	
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	1
ь	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
За		3a	-)	~ '
	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	3b		
b 4a	At any time during the calendar year, did the organization have an interest in or a signature or other authority	30		
44	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		Í	
	account)?	4a	Ì	1
ь		va	 -	<u> </u>
U	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		l	
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		-
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	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	-00		
ou.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	į	✓
b	If "Yes.' did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	J.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	} }		i
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
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 contract?	7e		7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
ĥ	If the organization received a contribution of cars, boats airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12]	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders . 11a]		ļ
b	Gross income from other sources (Do not net amounts due or paid to other sources			j
	against amounts due or received from them)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	L	
	Note. See the instructions for additional information the organization must report on Schedule O	}		,
þ	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
	the organization is licensed to issue qualified health plans] `	}.	}
С	Enter the amount of reserves on hand . 13c		L	1_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	1	}

Section	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management				<u>Z</u>
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 4			
	If there are material differences in voting rights among members of the governing body, or			1	
	If the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O	45 4			
b	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director trustee, or key employee have a family relationship or a business	relationship with			
2	any other officer, director, trustee, or key employee?	relationship with	2		1
3	Did the organization delegate control over management duties customarily performed by or	under the direct	_		
•	supervision of officers, directors, or trustees, or key employees to a management company or oth		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization		5		√
6	Did the organization have members or stockholders?		6	✓	
7a	Did the organization have members stockholders, or other persons who had the power to	elect or appoint			
	one or more members of the governing body?		7a_	✓	ļ
b	Are any governance decisions of the organization reserved to (or subject to approve	al by) members,		,	1
	stockholders, or persons other than the governing body?	adortakon during	7b	₹	-
8	Did the organization contemporaneously document the meetings held or written actions up the year by the following	idertaken during			
_	The governing body?		8a	7	
a b	Each committee with authority to act on behalf of the governing body?		8b		-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be supported in the governing season.	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		1
Secti	on B. Policies (This Section B requests information about policies not required by the	ne Internal Reven	ue C	ode)	\
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	e for a la l	10a	✓	
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exer		406	,	
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of t		10b 11a	✓	V'
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		110	,	 * ;
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	,	1
b	Were officers directors or trustees, and key employees required to disclose annually interests that could gi	ve rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the				
	describe in Schedule O how this was done	-	12c		
13	Did the organization have a written whistleblower policy?	•	13		 √
14	Did the organization have a written document retention and destruction policy? .		14	. ¢a.	1
15	Did the process for determining compensation of the following persons include a review			- C1	Ĩ., -
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	n and decision?	in de	٠_ــــــــــــــــــــــــــــــــــــ	نوشه
a	The organization's CEO, Executive Director, or top management official		15a 15b		1
b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		130	1-43-4	V . 3 . 3 . 3 . 3
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sin	nilar arrangement		1	X T.E.
	with a taxable entity during the year?	3	16a	. Spitter	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	on to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps				
	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filled California	and 000 T (Coatio	- E01	(a)(2)	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, available for public inspection. Indicate how you made these available. Check all that apply	and 990-1 (Sectio	11 00 1	(0)(3)	s only
		chadula (1)			
19	Own website Another's website Upon request Other (explain in Society of Society). Describe in Schedule O whether (and if so, how) the organization made its governing documents.	-	terest	polic	v. and
.5	financial statements available to the public during the tax year			٥٥	ى, سى، د
20	State the name, address, and telephone number of the person who possesses the organizat	ion's books and re	cords	s: >	
	Jafar A. Faghih - P.O. BOX 2402 Granite Bay, CA 95746 - 916-679-8864				

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, 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

	1	l		(6	C)			1	1		
(A)	(B)	(do o	ot of		ition	a than a	200	(O)	(E)	(F)	
Name and Title	Average	ours per officer and a director/trustee)						Reportable	Reportable	Estimated	
	hours per week (list any						_	compensation from	compensation from related	amount of other	
	hours for related organizations below dotted line)		Institutional trustee Individual trustee		Key employee	Former Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
		-	ee -	-	-	ated	-	-			
(1) Louay Owaidat	8.0							O	o	;	
President	2.0	1	<u> </u>	1		ļ	ļ	 	ļ		
(2) Marie Silveira Senior Director	1.0	,		/	}		}	O	0	(
(3) Benjamin Fell	4.0	V	}	1	-	 -	┼-	ļ	 		
Secretary	.0	1		1	1			0	0	1	
(4) Jafar Faghih	4.0	-	╁	+	+-		+-	 	 		
Treasurer	.0	1		1	1	ľ		0	0	(
(5)	.0	 ` 	+-	Ť	_	 -			 		
	.0	1				ĺ					
(6)	.0										
	.0										
(7)	.0		Ţ				-				
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(8)	.0	1				1					
	.0	<u> </u>	<u> </u>	 		 	┼-	ļ			
(9)	.0	1	1			ł	1	ł		}	
(40)	.0	-	-	-	┼		+-	 			
(10)	.0	1									
(11)	.0	+	+	+-	╁╌	 -	+	+	 		
<u> </u>	.0	1					1				
(12)	0.0	+	+	†	1	+	1	1			
Sf	.0	1						1			
(13)	.0	\top	1	†	1		1				
	.0	1						<u> </u>			
(14)	.0		1								
	.0	1	1	1	1	j	1			1	

Fait	Section A. Officers, Directors, Trust	lees, ney E	inproj	yees) C)	ngnes		Unipensated E	inployees (CC	THE TOTAL	<i></i>
	(4)	(7)			•	ر) ition			(0)	/C)		(F)
	(A) Name and title	(B) Average) ''		neck	more	than o		(D) Reportable	(E) Reportable		(F) Estimated
	Name and the	hours per					ıs both or/trust		compensation	compensation f	rom	amount of
		week (list any hours for	일),	阜	X _e y	3 %	5	from the	related organization	s	other compensation
		related	Individual trustee or director	Institutional trustee	Officer	y er	ghes	Former	organization	(W-2/1099-MIS		from the
		organizations below dotted	ctor	none		employee	00 1	~	(W-2/1099-MISC)		1	organization and related
		line)	rust	177.	Ì	yee	mpe		ł			organizations
			ee	stee	{		Highest compensated cmployed		1			
			ļ		ļ	<u> </u>	a a	_	 			
(15)		0.0	1]				
(16)		.0		-	-	-	-	-	 		-+	
(16)		.0	1	}	ł	ł	ł	}			}	
(17)		.0		+-	-	1		_	 			
31		.0	1			1	ł	ĺ			ŀ	
(18)		.0										
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(20)		.0	-		ł	}					}	
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15:7		1.0	1		1		-					
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		0.	1				<u> </u>					
(23)		0.										
		.0	-	<u> </u>	1_		ļ	_	ļ	 		
(24)		.0			ļ			1				
(05)		0.0	 	-	┼	-	 -		 			
(25)		.0	-								ľ	
1b	Sub-total Sub-total	1.0	<u> </u>				i	—	0		0	0
C	Total from continuation sheets to Part	VII. Section	on A					•	0		0	0
d	Total (add lines 1b and 1c)	·						>	0		0	0
2	Total number of individuals (including bu	t not limited	d to ti	hose	e lis	ted	abov	e) v	vho received m	ore than \$10	0,000	of
	reportable compensation from the organ	ization ►	0						 			
•	D.1.11	,,										Yes No
3	Did the organization list any former or employee on line 1a? If "Yes," complete							emp	ployee, or high	iest comper	sated	-27.20.00 - COPPET - 20. 37842 - 47
4	For any individual listed on line 1a, is the							າກ ເ	and other com	oneation fro	m the	3 √
7	organization and related organizations											
	individual , , , ,	,	,		,			-,				4
5	Did any person listed on line 1a receive of	or accrue c	ompe	ensa	itior	n fro	m an	y ur	nrelated organi	zation or indi	vidua	
	for services rendered to the organization	? If "Yes,"	comp	lete	Sc	hea	ule J	for .	such person			5 ✓
Section	on B. Independent Contractors											
1	Complete this table for your five highest											
	compensation from the organization Re year	port compe	ensati	on i	or t	ne e	calend	Jar	year ending wi	in or within t	ne or	ganization's tax
									(D)			(0)
	(A) Name and business add	dress							(B) Description of s	services		(C) Compensation
								+				
					_			+				
		,					 		 	<u>_</u>		
2	Total number of independent contractor								nose listed ab	ove) who		
	received more than \$100 000 of compens	sauon irom	nie o	yai	ıııZd	uon	- (,			die Sol	14 mg 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

Part	, VIII	Check if Schedule O		esponse or note to	any line in this	Part VIII		П
		Oneok ii coneddic o c		osponos or note a	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts rts	1a	Federated campaigns	1	a				
irar	b	Membership dues		b 39,485		}	ł	
S, G	С	Fundraising events		С		ł		
ar a	d	Related organizations		d		ŀ		
IS, (е	Government grants (contr	ributions)	le		į		
tror sr S	f	All other contributions, gift				Ì		
혈		and similar amounts not inclu	ided above	1f 88,811		Ì		
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include	d in lines 1a-1f	\$				
	h	Total. Add lines 1a-1f	. <u></u>	<u> </u>	128,296			
an l				Business Code			-	
ye.	2 a	Technical Meetings		900099	58,000	58,000		
8	b	Annual Tec Meeting		900099	72,925	72,925		
AIC	С	Seminars/Presentation	ons	900099	59,117	59,117		
Ser	d	Newletter/Website		900099	8,793	8,793		
am	е							
Program Service Revenue	f	All other program servi	ice revenue	<u> </u>	400.005			
<u>-</u>	9	Total. Add lines 2a-2f			198,835			
	3	Investment income (i and other similar amou	•	videnas, interest.	4 607			1,607
			•	t beed seesed to	1,607			1,607
:	4	Income from investment	or tax-exemp	n bona proceeds				
	5	Royalties	(ı) Real	(ii) Personal				
- 1	6a	Gross rents	(1) 1 (04)	1,1,1,0,0,1,0,1	{		1	
I	i.	Less rental expenses			{			
	b	Rental income or (loss)			i i			
	d	Net rental income or (le	000			-		~
	7a	Gross amount from sales of	(i) Securities	(ii) Other	}			
	, "	assets other than inventory	(7 0000	(1)	1	j		
	ь	Less cost or other basis			}			
		and sales expenses			1			
	С	Gain or (loss)			-	ì		Н
	d	Net gain or (loss)					~	
	ŭ	rvet gain or (1033)			1			· · · · · · · · · · · · · · · · · · ·
ne	8a	Gross income from fur	ndraising			1		
/en		events (not including \$	Ü			1		
Other Revenue		of contributions reported	d on line 1c)		Ì			
er		See Part IV, line 18		a				
¥	b	Less direct expenses		b]			
O	С	Net income or (loss) fr	om fundrais	ing events]			
	9a	Gross income from gar	ming activitie	es				
		See Part IV, line 19		a]	j	,	
	b	Less direct expenses		b] !	-		
	С	Net income or (loss) fr		activities >				
	10a	Gross sales of inv	-	ss	1		,	
		returns and allowance	s .	a	1		1	, -
	b	Less cost of goods so		b			 	ļ <u>.</u>
	C	Net income or (loss) fr			ļ		i 	
	L	Miscellaneous Re	evenue	Business Code				
	11a				 			
	b							
	C	A.II	·-·					
	q	All other revenue		<u> </u>	 	 _		27
	e	Total. Add lines 11a-1		P	328,738	198.835	,	1.607
	1 12	LOTAL revenue. See in	PITUCHOUS	•	JED./30	136.633		i i.bu/

Part IX Statement of Functional Expenses	
--	--

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			s must complete co	olumn (A)
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C)	(D)
	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	25,220	25,220		
2	Grants and other assistance to domestic individuals See Part IV, line 22	64,628	64,628		
3	Grants and other assistance to foreign organizations, foreign governments and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10 11	Payroll taxes				
a	Fees for services (non-employees) Management	4,697	4,697		
b	Legal	4,007	4,031		
c	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25 column (A) amount list line 11g expenses on Schedule O)				
12	Advertising and promotion			·	<u> </u>
13	Office expenses	4,679	4,679		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	143,492	143,492		
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Newsletter & Website	3,297	3,297		
b	Awards & YM Group Activities	29,594	29,594		
С					
d					
е	All other expenses	-			
25	Total functional expenses. Add lines 1 through 24e	275,608	275,608	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)				

. 0 555 (20 .	0,			
Part X	Balance Sheet	 		

		Check if Schedule O contains a response or note to any line in this Par	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	427,108	1	480,238
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		_3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees		_	
		Complete Part II of Schedule L		5	·
	6	Loans and other receivables from other disqualified persons (as defined under section		ł	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		6	
sets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a		ļ	
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
1	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	427,108	16	480,238
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
ļ	19 20	Deferred revenue		19 20	
	21	Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors,	<u> </u>		,
Liabilities	22	trustees, key employees, highest compensated employees, and		Ι,	,
ig		disqualified persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	1	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			- 100 m
lan	27	Unrestricted net assets	427,108	27	480,238
Ва	28	Temporarily restricted net assets .		28	
nd	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.		4	
ste	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
it A	32	Retained earnings, endowment, accumulated income, or other funds	10- 1-0	32	400 000
ž	33	Total net assets or fund balances .	427,108	33	480,238 480,238
	34	Total liabilities and net assets/fund balances	427,108	34	Form 990 (2015)

_	4	•
Page	- 1	4

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		328,7	38
2	Total expenses (must equal Part IX, column (A), line 25)	2		275,6	
3	Revenue less expenses Subtract line 2 from line 1	3		53,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		427,1	08
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	1 1			
	33, column (B))	10		480,2	238
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				للہ
				Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other		}		i '
	If the organization changed its method of accounting from a prior year or checked 'Other,' ex	plain in	1		:
	Schedule O				ا رحدا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		-
	If "Yes, check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both		İ		i
	Separate basis Consolidated basis Both consolidated and separate basis			!	الـــر ا
b	Were the organization's financial statements audited by an independent accountant?		2b		-
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	ļ		}
	separate basis, consolidated basis, or both		}		:
	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 o			}	
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to the second selection of the second selection selection selection of the second selection		2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, expended of	(piain in	1		
	Schedule O	forth in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	iOrtii I()	1		1
	· ·	orgo the	3a		+-
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	1	
	required addit of addits, explain why in ochequie o and describe any steps taken to undergo such a			, oor	(2015)
			rur	550	<i>(</i> 2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-E2.

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

0MB No 1545-0047 2015

Open to Public Inspection

Name of the organization Employer identification number American Society of Civil Engineers Sacramento Section - 6097155 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/s% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions), You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) is the organization (v) Amount of monetary (vii) Amount of (described on lines 1-9 listed in your governing support (see other support (see document? instructions) above (see instructions)) instructions) Yes (A) (B) (C) (D) (E) 42 Total

Part	Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	e box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qu	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3					<u> </u>	
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.						
	on B. Total Support						,
	dar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4		 		ļ	ļ	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	•			12	
13	First five years. If the Form 990 is for the						-
	organization, check this box and stop he				· · · ·	· · · · · · · · · · · · · · · · · · · 	· · · •
	on C. Computation of Public Suppor			44 (0)		744	0/
14	Public support percentage for 2015 (line 6					14	<u>%</u> %
15 16a	Public support percentage from 2014 Sch 331/3% support test—2015. If the organization qua	zation did not	check the box	on line 13, an	d line 14 is 33	1/3% or more,	check this
b		nization did n	ot check a bo	x on line 13 o	r 16a, and lin		
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization me Part VI how the organization meets the "f organization .	ets the "facts acts-and-circ	-and-circumsta umstances" te	ances" test, ch st. The organiz	eck this box a zation qualifies	and stop here. s as a publicly :	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organizate Explain in Part VI how the organization m	tion meets the	e "facts-and-c ts-and-circums	circumstances" stances" test.]	test, check t The organizati	this box and son qualifies as	top here.
18	supported organization	d not check a	box on line 10	3, 16a, 16b, 17	a, or 17b, che	ck this box and	

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	102,464	111,476	128,061	138,473	128,296	608,770
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	159,556	154,436	108,035	69,906	198,835	690,768
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 7a	Total. Add lines 1 through 5	262,020	265,912	236,096	208,379	327,131	1,299,538
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from line 6.)					· .	1,299,538
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	262,020	265,912	236,096	208,379	327,131	1,299,538
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	483	289	1,063	119	1,607	3,561
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c	Add lines 10a and 10b	483	289	1,063	119	1,607	3,561
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11, and 12.)	262,503	266,201	237,159	208,498	328,738	1,303,099
14	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization	's first, secon	d, third, fourth	, or fifth tax ye		n 501(c)(3)
Secti	on C. Computation of Public Suppor	t Percentage	 B				
15	Public support percentage for 2015 (line 8	3, column (f) di	vided by line 1	3, column (f))		15	99.73 %
16	Public support percentage from 2014 Sch			<u> </u>	<u></u>	16	99.76 %
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2015 (•		-		+	0 %
18 19a	Investment income percentage from 2014 331/3% support tests—2015. If the organ	zation did not	check the box	on line 14, ar	nd line 15 ıs m	ore than 331/39	
_	17 is not more than 331/x3%, check this box	=	-	· ·		_	
þ	331/3% support tests - 2014. If the organiz line 18 is not more than 331/3%, check this is	box and stop h e	ere. The organi	ization qualifies	as a publicly s	upported organ	ization 🕨 🗀
20	Private foundation. If the organization di	d not check a f	box on line 14	, 19a, or 19b, c	heck this box	and see instruc	ctions 🕨 🗌

Supporting Organizations

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

Section A.	All	Supporting	Organizations
------------	-----	------------	----------------------

ecti	on 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 Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	~	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	•	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
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).	4c		
b	designated in the organization's organizing document?	5b		
6 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	98	'	
	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI . Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9b		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . Was the organization subject to the excess business holdings rules of section 4943 because of section	9c		

4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

10a

Part	Supporting Organizations (continued)			
		,	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			,
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		_	
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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		,
Secti	on C. Type II Supporting Organizations			
			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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		-
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		25.
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):
a b c	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (
2	Activities Test. Answer (a) and (b) below.	r	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	28	では、	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3h		18

Type III Non-Functionally integrated 509(a)(3) Supporting Org	janiza	auons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must col	trust	on Nov. 20, 1970. See ir	structions. All
Section A - Adjusted Net Income	Tiplete	(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	-	
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	, , , , , , , , , , , , , , , , , , , ,	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6	- ()	0
7 Check here if the current year is the organization's first as a non-functional instructions).	ly-ınte	grated Type III supporting	g organization (see

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organia	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Quairfied set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6.			0
8	Distributions to attentive supported organizations to which	n the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			0.000
		(1)	(ii)	(îii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	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 required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
þ				
Ç	1			
d	From 2013			
e	From 2014			
f	Total of lines 3a through e	0		
9	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4	Distributions for 2015 from Section			
•	D, line 7: \$			
a	Applied to underdistributions of prior years		··	
b	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.	0		
5	Remaining underdistributions for years prior to 2015, if		<u> </u>	
•	any. Subtract lines 3g and 4a from line 2 (if amount			'
	greater than zero, see instructions).		0	
6	Remaining underdistributions for 2015. Subtract lines 3h			
•	and 4b from line 1 (if amount greater than zero, see		_	
	instructions).			0
7	Excess distributions carryover to 2016. Add lines 3			
•	and 4c.	o		
8	Breakdown of line 7:	0		
	DIEBROOMII OI IIIIG 7.			
a b				
	Excess from 2013		<u> </u>	
<u>c</u>				
<u>d</u>	Excess from 2014 0			
е_	Excess from 2015 0	1	,	

Page	٤

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
*	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

% □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance √ Yes 94-6097155 Scholarships Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 5,400 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance American Society of Civil Engineers Sacramento Section 6800027351 (p) EIN (1) Make-A-Wish Northeastern Calif 1 (a) Name and address of organization 2800 Club Cntr Dr, Sacramento CA or government Part I Part II 8 N 4 N (3) 9 9 6 5 (12) 8

Schedule I (Form 990) (2015)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2015)

Part III Grants an

(a) Type of grant or assistance recipients	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
		64 620			
l college scholarships	17	070,450			
2 Contributions - Other Non-Profit Organizations	4	19,820			
3					
4					
5					
9					
r					
Part IV Supplemental Information. Provide the information		equired in Part I, lin	e 2, Part III, columr	required in Part I, line 2, Part III, column (b), and any other additional information.	onal information.
					Schedule I (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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

American Society of Civil Engineers Sacramento Section	94 - 6097155
FORM 990, PART VI, SECTION A, LINE 6: ASCE SACRAMENTO SECTION-RECOGNIZES TI	HE FOLLOWING MEMBERSHIP:
THE SUBSCRIBING MEMBERSHIP GRADES SHALL CONSIST OF THE SOCIETY-LEVEL M	EMBERSHIP GRADES OF
STUDENT MEMBER, AFFLIATE MEMBER, ASSOCIATE MEMBER, MEMBER, FELLOW AND	DISTINGUISHED MEMBER.
THE QUALIFICATIONS FOR SOCIETY-LEVEL MEMBERSHIP GRADES SHALL BE SET FOR	RTH BY THE AMERICAN
SOCIETY OF CIVIL ENGINEERS (SOCIETY)	
FORM 990, PART VI, SECTION A, LINE 7A	
SUBSCRIBING MEMBERS (VOTING) - ALL MEMBERS OF THE SOCIETY, OF ALL GRADES	, WHO SUBSCRIBE TO THE
CONSTITUTION AND BY LAWS OF THE SECTION. ONLY SUBSCRIBING MEMBERS WHO	MEET THE REQUIREMENTS
OF THE SOCIETY'S GOVERNING DOCUMENTS SHALL BE ELIGIBLE TO VOTE IN SECTIO	N ELECTIONS.
VOTING MEMBERS HAVE THE RIGHT TO ELECT OFFICERS OF THE BOARD OF DIRECTO	DRS AND TO APPROVE
CERTAIN SIGNIFICANT DECISIONS OF THE BOARD.	
FORM 990, PART VI, SECTION A LINE 7B:	
AMENDMENT TO THE SECTION CONSTITUTION AND BYLAWS	
A TWO-THIRDS (2/3) VOTE OF THE MEMBERS OF THE SECTION BOARD OF DIRECTORS	PRESENT AT DULY
CONSTITUTED BOARD MEETING, WHERE A QUORUM IS IN ATTENDANCE, PROVIDED T	HAT WRITTEN NOTICE
CONTAINING THE TEXT OF THE PROPOSED AMENDMENT IS PUBLISHED TO THE MEMI	BERSHIP AT LEAST THIRTY (30)
DAYS IN ADVANCE OF THE MEETING.	