	_ ^			Short Form	-			ОМВ	No 1545-1150
For	. 9 9	0-EZ	Return of Organi	zation Exempt	From	Income ⁻	Гах	6	
1 011	" -		Under section 501(c), 527, or 4947(3016
			' }		.,				to Dublic
		(C 3		urity numbers on this forn	n as it ma	y be made gu	blic.		n to Public
Dep	artment o	of the Treasury -	✓ Information about Form	990 E7 and its instruction	ne ie at wa	ens ire apylia	magnut	Ins	spection
						0_			00 17
_			ar year, or tax year beginning C Name of organization	October 1	, 2016,	and ending		ember 30	, 20 17
	Check If ap		•	ilmaana Kamaaa Citu Sa	nti nu			er identificati	ion number
-	Address c Name cha		American Society of Civil Eng Number and street (or P O box, if mail is			Room/suite		7381281 one number	
	Initial retui	-	1801 Alexander Bell Drive	not delivered to street address,	,	- 100mg same		- 295-610	na
_		rn/terminated	City or town, state or province, country, a	and ZIP or foreign postal code				Exemption	
_	Amended	return on pending	Reston, VA 20191				Numb		2676
		ting Method	☑ Cash ☐ Accrual Other (sp	ecify) >					ganization is not
	Vebsite	J	The original of the control (of					attach Sch	
			eck only one) — 🗹 501(c)(3) 🗌 501(c	c) () ◀ (insert no) ☐ 49	947(a)(1) o	r	•	, 990-EZ, or	
		organization				Unincorpor	ated Ass	ociation	
			7b to line 9 to determine gross receip						
(Pa	rt II, coli	umn (B) belov	v) are \$500,000 or more, file Form 990	nstead of Form 990-EZ			•	\$	86,328
P	art I	Revenu	e, Expenses, and Changes in	n Net Assets or Fund	Balanc	es (see the	ınstructı	ons for Pa	art I)
		Check if	the organization used Schedule	O to respond to any o	question	in this Part I	· · ·		🗷
	1	Contributio	ons, gifts, grants, and similar amo	unts received				1	22,149
	2	Program se	ervice revenue including governm	ent fees and contracts				2	45,227
	3		ip dues and assessments.		•	•	├	3	11,528
	4	Investment						4	14
	5a		unt from sale of assets other than	•	5a_			-	
	b		or other basis and sales expense		5b		;	_	
	C	•	ss) from sale of assets other than	inventory (Subtract line	ob trom i	ine sa)		5c	
	6	-	d fundraising events ome from gaming (attach Sch	adula C if areator the	an				
<u>e</u>	a	\$15,000) .	- ·	edule G II greater the	6a	1	ží.	. 🖓	
Revenue	ь	•	me from fundraising events (not i	ncludina \$		f contribution		3	
ě			aising events reported on line 1)			CONTIDUCT			
Œ			th gross income and contributions	•	6b	1	7,410		
	c		t expenses from gaming and fund		6c		9.152		
	d		e or (loss) from gaming and fund		es 6a and	d 6b and sul	otract		
		lıne 6c)						6d	(1,742)
	7a	Gross sales	s of inventory, less returns and al	owances	7a				
	b	Less: cost	of goods sold		7b			A	
	C	Gross profi	t or (loss) from sales of inventory	(Subtract line 7b from line)	ne 7a)		7	7c	
	8		nue (describe in Schedule O)				<u> </u>	8	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7		:	_ 		9	77,176
	10		similar amounts paid (list in Sche			····	⊢	10	32,733
	11		ud to or for members	i i	<u> </u>	<u> 본</u> .	-	11	
Expenses	12		ther compensation, and employee	L	\\ · · ·	[= '-	 	12	
eus	13		al fees and other payments to ind	ependent contractors	2018		⊢	13	
ж	14	-	r, rent, utilities, and maintenance	· · · · · · · · · · · · · · · · · · ·	į. Sig	. 5.		14	440
ш	15		iblications, postage, and shipping		ने छ	ويكي	—	15 16	33,470
	16 17		nses (describe in Schedule O) nses. Add lines 10 through 16) . ≔			17	66,643
	18		deficit) for the year (Subtract line	1	 -	To rest		18	10,533
Net Assets	19		or fund balances at beginning of			(must agree	L	-	10,555
\SS			r figure reported on prior year's re				I .	19	88,797
et /	20	-	ges in net assets or fund balance)) 3	冯 (.	<u> </u>	20	i
ž	21		or fund balances at end of year.		<u>/</u>		—	21	99,330
For	Paperv		ion Act Notice, see the separate ins			No 10642I		Form	990-EZ (2016)

	22 (20.0)					· ugo =
Pa	Balance Sheets (see the instructions	for Part II)				
	Check if the organization used Schedul	e O to respond to a	ny question in this	Part II		🗆
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			88,797	22	99,330
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25	Total assets			88,797	-	99,330
26	Total liabilities (describe in Schedule O)			0		0
27	Net assets or fund balances (line 27 of colum			88,797	27	99,330
Par					 	F
	Check if the organization used Schedul	e O to respond to a	ny question in this	Part III	(Do	Expenses quired for section
Wha	is the organization's primary exempt purpose?	Advance science 8	k civil engineering	profession		(c)(3) and 501(c)(4)
Desc	ribe the organization's program service accomp	lishments for each o	f its three largest p	rogram services,		anizations, optional for
as m	easured by expenses. In a clear and concise in	nanner, describe the			oth	ers)
	ns benefited, and other relevant information for e					_ _*
28	Educational Seminars to enhance abilities of				ł	
	National Conferences, Monthly Tech Presenta					
	PE Rev Course, Steel Bridge Competition, Fu	ture City Comp, EW	В			
		t includes foreign gra		<u> ▶ □</u>	288	32,005
29	Community Service activities and fundraisers	for local charitable	organizations:			
	Make-A-Wish golf tournament					
	Habitat for Humanity, Adopt-A-Highway, Chris					
		t includes foreign gra		▶ □	298	32,733
30	Educational Outreach to inform the general p	ublic about civil eng	gineering issues:			
	ASB informational Kiosk				ŀ	
	GPR (Gov Pub Rel) activities				ĺ	
		t includes foreign gra	ants, check here .	. <u>.</u> • 🗀	30a	1.400
31	Other program services (describe in Schedule O)				ł	
		t includes foreign gra	ants, check here .	<u></u>	316	3
32	Total program service expenses (add lines 28a	through 31a) .	<u> </u>	<u>.</u> <u></u>	32	66,138
Par					nstru	ctions for Part IV)
	Check if the organization used Schedul	e O to respond to a			<u> </u>	
		(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employ	ee (e	Stimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC	benefit plans, and		other compensation
		dovoted to position	(if not paid, enter -0-)	deferred compensation	n	
	ael Winckler	4 hrs/wk				
Pres	dent				0	0
Osw	aldo Bravo	2 hrs/wk			1	
Pres	dent-Elect				0	0
Moh	amad Ibrawish	4 hrs/wk				
	President/Treasurer				0	0
Seve	riano Longoria	_ 2 hr/wk				
Secr	etary				0	0
Cha	Johnson	2 hr/wk				
Dire		<u> </u>	<u></u>		0	0
Mea	an Malloy	2 hr/wk				
Dire	tor				0	0
Step	nen Stinger	2 hr/wk		1	ļ	
Dire	tor		0		0	0
					- 1	
			j.	1 _	- 1	

Form 990-EZ (2016)

OGCBA Page 3

Part	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			П		
	instructions for hart vy check if the organization used Schedule O to respond to any question in this	Tart	Yes	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		√		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)					
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business					
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b		√		
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c				
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0					
b	Did the organization file Form 1120-POL for this year?	37b		✓		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b					
39	Section 501(c)(7) organizations Enter					
a b	Initiation fees and capital contributions included on line 9					
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under. section 4911 ▶ 0 ; section 4912 ▶ 0 , section 4955 ▶ 0					
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1		
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	,				
d	504(-)(0) 504(-)(4)					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		✓		
41	List the states with which a copy of this return is filed					
42a	The organization's books are in care of ▶ Mohamad Ibrawish, PE Located at ▶ 5055 Antioch Rd, Overland Park, KS Telephone no. ▶ 913	- 4. 662	38-19	00		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1		
	If "Yes," enter the name of the foreign country: ▶	-				
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country: ▶	42c		_√_		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		ا	▶ □		
• •	mil ii		Yes	No		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1		
С	Did the organization receive any payments for indoor tanning services during the year?	44c		✓		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d				
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓		
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1		

orm 99	0-EZ (2016)						age 4
46	Did the organization engage, directly or i	ndirectly in political (campaign activities on	behalf of or in opposit	tion —	Yes	No
	to candidates for public office? If "Yes,"				46		1
Part	All section 501(c)(3) organization 50 and 51.	ns must answer que			e tables f	or line	es
	Check if the organization used So	hedule O to respon	d to any question in the	nis Part VI	<u> </u>		
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pa		section 501(h) electio	-	tax 47	Yes	No
48	Is the organization a school as described				. 48		1
49a	Did the organization make any transfers		· ·		. 49a		1
50	If "Yes," was the related organization as Complete this table for the organization's employees) who each received more that	s five highest comper	sated employees (oth	er than officers, directonization If there is non			
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other con		
NONE							
		-	<u> </u>		<u> </u>		
51	Total number of other employees paid of Complete this table for the organization \$100,000 of compensation from the organization	's five highest comp	ensated independent	contractors who each	received	more	than
	(a) Name and business address of each indepen	dent contractor	(b) Type of serv	ice (c	Compensat	ion	
NONE			-				
			-				
			-				
			-				
·							
52	Total number of other independent contr Did the organization complete Sched completed Schedule A	-		nizations must attach	n a . ▶	. 🗆 1	No _
	enalties of perjury, I declare that I have examined this rect, and complete Declaration of preparer (other tha				nowledge and	d belief,	ıt ıs
	\						
Sign	Signature of officer			Date			
lere	Mohamad Ibrawish, Treasurer	• —————					

Preparer's signature

Print/Type preparer's name

Firm's address ►

May the IRS discuss this return with the preparer shown above? See instructions

Firm's name

Paid

Preparer Use Only Date

PTIN

Check if self-employed

Firm's EIN ▶

Phone no

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

20**16**

Department of the Treasury

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

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection | Employer identification number

American Society of Civil Engineers - Kansas City Section - 7381281 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 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. An organization that normally receives. (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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 b 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) d 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 III, 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 (iv) is the organization (v) Amount of monetary (vi) Amount of (ii) EIN (iii) Type of organization listed in your governing other support (see (described on lines 1-10 support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

Schedu	ile A (Form 990 or 990-EZ) 2016				_		Page 2
Part	I Support Schedule for Organization	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	
	(Complete only if you checked to						
	Part III. If the organization fails to						,
Secti	on A. Public Support				1		
	idar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and	1,7,	1-7	(4) - 4 - 1	__\	12/23/2	
	membership fees received (Do not				1 [<u> </u>	
	include any "unusual grants.")	ļ				į į	
2	Tax revenues levied for the						
_	organization's benefit and either paid	İ					
	to or expended on its behalf		ĺ		1 //		
3	The value of services or facilities				 //		
·	furnished by a governmental unit to the				\ //		
	organization without charge	}			//		
	Total. Add lines 1 through 3				 	ļ	
4	Y				 	ļ	
5	The portion of total contributions by	1			1]	
	each person (other than a				V		1
	governmental unit or publicly	1		· /	1		
	supported organization) included on	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	· ·				l
	line 1 that exceeds 2% of the amount					,	
_	shown on line 11, column (f).	*	244			, ,	
6	Public support. Subtract line 5 from line 4	1 × 1 ×	* . ¹ / ₂		- 1965 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865 - 1865		
	on B. Total Support				T		
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c),2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	\		#			·····
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources		4				
9	Net income from unrelated business					ļ	
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or					ļ	
	loss from the sale of capital assets						
	(Explain in Part VI.)		X				
11	Total support. Add lines 7 through 10	1 11 1		` <u> </u>	1 2 %		
12	Gross receipts from related activities, etc	•	//-			12	
13	First five years. If the Form 990 is for the	-	າ'ຮ໌ first, secວີຄຸ	d, third, fourth	ı, or fıfth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he		<u> </u>	<u> </u>	<u> </u>		· <u> </u>
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2016 (line	6, column (ƒ) [*] dı	vided by line 1	1, column (f))	•	14	%
15	Public support percentage from 2015 Sch			\		15	%
16a	331/3% support test—2016. If the organ				nd line 14 is 33	31/3% or more,	check this
	box and stop here. The organization qua			-		•	▶ 🗆
þ	331/3% support test - 2015. If the organi					ıs 331/3% or m	ore, check
	this box and stop here. The organization	qualifies as a p	publicly suppo	rted organızati	ίδη		. 🕨 🗆
17a	10%-facts-and-circumstances test -2						
	10% or more, and if the organization me	gets the "facts-	-and-circumsta	ances" test, ch	neck this box a	and stop here.	Explain in
	Part VI how the organization meets the	facts-and-circi	umstances" te	st The organi	zation qualifies	s as a publicly	supported
	organization				\ .		. ▶ 🗆
b	10%-facts-and-circumstances test 2	015. If the ora	anization did n	ot check a bo	x on line 13.1	6a, 16b, or 17	a. and line
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization r						
	supported organization					. 1	· . ▶ □
18	Private foundation. If the organization di	d not check a l	box on line 13.	16a, 16b, 17a	, or 17b, chec	k this box and	see
	instructions					\	▶ □
		· · · · · · · · · · · · · · · · · · ·			Sch	edule A (Form 990) or 990-EZ) 2016

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

(Complete only if you checked the box on line 10 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			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·
Caler	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	25,445	30,309	32,352	35,870	33,677	157,653
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	44,777	69,462	75,750	40,026	43,485	273,500
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		2,400	737			3,137
4	Tax revenues levied for the						
	organization's benefit and either paid	1					
	to or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge	ļ					0
6	Total. Add lines 1 through 5	70,222	102,171	108,839	75,896	77,162	434,290
<i>1</i> a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	· · ·	ļ					0
ь	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000				İ		
	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		A 49 7					<u>_</u>
	line 6.)		35 X K				434.290
Secti	on B. Total Support						10 115 5
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	70,222	102,171	108,839	75,896	77,162	434,290
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .	66	158	33	15	14	286
b	Unrelated business taxable income (less	İ			İ		
	section 511 taxes) from businesses						
	acquired after June 30, 1975					_ .	0
C	Add lines 10a and 10b	66	158	33	15	14	286
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						_
40							0
12	Other income. Do not include gain or loss from the sale of capital assets	[
	(Explain in Part VI)						Λ
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	70,288	102,329	108,872	75,911	77,176	434,576
14	First five years. If the Form 990 is for th	ne organization	's first, second	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8	3, column (f) div	rided by line 1:	3, column (f))		15	99.93 %
16	Public support percentage from 2015 Sch					16	99.91 %
	on D. Computation of Investment Inc						
17	Investment income percentage for 2016 (-	y line 13, colum	nn (f))	17	0 %
18	Investment income percentage from 2015					18	0 %
19a	331/3% support tests—2016. If the organi						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2015. If the organize line 18 is not more than 331/3%, check this be						
20	Private foundation. If the organization di					-	
	Iounguion, II (IIC Oluginzalion di	G HOLOHOUR A L	/U// UII III III II II II II II II II II II	136. UL 130. U	ロロンス いける ひけんき	311U 366 HISHIII.	IIVIIO P I I

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. A	All Supporting C	Organizations

- 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
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **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.
- c 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)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c 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.
- 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).
- 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).
- 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**.
- **b** 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**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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		Yes	140
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Part	IV 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		L
	A family member of a person described in (a) above?	11b		
<u> </u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	<u> </u>
Secti	on B. Type I Supporting Organizations			
1	Did the divertory trustees or membership of one as more supported assessment to the second		Yes	No
•	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			Ì
	controlled the organization's activities If the organization had more than one supported organization,	,		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		ĺ
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	1		
	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			T = 2
٠	Allows a managed of the constraint of the constr		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	<i>a</i> '	
Secti	on D. All Type III Supporting Organizations	<u> </u>		l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1	,*)	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1 3	,	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	.0	j.	\$
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		,	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)		۰	, X
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2	3	
•	significant voice in the organization's investment policies and in directing the use of the organization's	.	1	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		, '
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s)
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	struct	ions)
2	Activities Test. Answer (a) and (b) below.	1	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	7	. 63	
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	,		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	_	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	* *		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	· *		
	reasons for the organization's position that its supported organization(s) would have engaged in these	. 43	*^	.
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			,
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	«		1
_	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	.* 2h	٠.	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	g tru niza	ist on Nov. 20, 1970 (expl tions must complete Sect	ain in Part VI) See ions A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
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		
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).	100	3 25 2 3 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	*
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		
e Discount claimed for blockage or other factors (explain in detail in Part VI).	,,		, \$3.00 \$3.00
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
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		
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	11'A. 1. 2. 12	
2 Enter 85% of line 1	2	11 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	· · · *	<u> </u>
4 Enter greater of line 2 or line 3.	4	ALS: C	
5 Income tax imposed in prior year	5	1170 31 44 1	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions.	y in	tegrated Type III supporti	ng organization (see

FEIL		Supporting Organ	izations (continued)	
	tion D - Distributions		-	Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers ex-			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	anizations	
4	Amounts paid to acquire exempt-use assets	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	ch the organization is re-	sponsive	
	(provide details in Part VI). See instructions	-		·····
9	Distributable amount for 2016 from Section C, line 6		··	
10	Line 8 amount divided by Line 9 amount	1 - **		
s	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	10 .22	. *	
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3	Excess distributions carryover, if any, to 2016	****		
a			3 34.	* * 6 5
b		7 %, 1 ,	NA CARA	, **
С	From 2013	\$ *** \c		
d	From 2014	N		
е	From 2015			
f	Total of lines 3a through e	3 80 2 3		*
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount		\$ 36 Long 1	
i	Carryover from 2011 not applied (see instructions)	13 3 7 8 8 8 7	V MONTH & Rails	\$ 82.7
j	Remainder Subtract lines 3g, 3h, and 3i from 3f.		`	· 5 1:
4	Distributions for 2016 from Section D, line 7 \$			* .
а	Applied to underdistributions of prior years	7.7 (8)		k v.
b	Applied to 2016 distributable amount	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	·	
C	Remainder. Subtract lines 4a and 4b from 4		** ** *	. < * : *
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h	2 2 4 4	* * * * * * * * * * * * * * * * * * * *	
	and 4b from line 1 For result greater than zero, explain in Part VI. See instructions.		*	
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			, ,
8	Breakdown of line 7:			У
а	Service Control of th	3. 基本 1. 数多次多层类	*)	
b	Excess from 2013	, Å; &* ` ` ` ` ` `	λ	
С	Excess from 2014	≱ √ 5/1 ()	1 1 1.18	
d	Excess from 2015 .	13 1 18 x 2 2 x 13	7. ***	in a second
е	Excess from 2016 .	*		. 3

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

Open to Public Inspection

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.

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

Tax) (s	ee separate instructions), ti	hen			
• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name	of organization		******	Employer iden	tification number
Ameri	can Society of Civil Enginee				23-7381281
Part		e organization is exempt unde			
1		f the organization's direct and inc	direct political ca	mpaign activities in Part	IV. (see instructions for
	definition of "political car	mpaign activities")		_	
2		y expenditures (see instructions) .		. ▶ \$	
3		cal campaign activities (see instruc			
Part		e organization is exempt unde			
1	•	excise tax incurred by the organiza		_	
2		excise tax incurred by organization			
3	_	ed a section 4955 tax, did it file For	m 4/20 for this ye	ear?	Yes No
4a	Was a correction made?		•		∐ Yes ☐ No
b	If "Yes," describe in Part	□ v e organization is exempt unde	r costion E01/	a) execut section 501	(0)(3)
Part 1		ly expended by the filing organiz			(0)(0).
•	activities				
2	- ·	filing organization's funds contrib		٠,	
_		vities		> \$	
3	•	expenditures Add lines 1 and 2	Enter here and	on Form 1120-POL.	
•	·				
4	Did the filing organization	n file Form 1120-POL for this year?	, , , , ,	· · · · · · · ·	. Yes No
5		ses and employer identification nur			zations to which the filing
	organization made payme	ents. For each organization listed,	enter the amount	paid from the filing organi	zation's funds. Also enter
	the amount of political co	ontributions received that were pro-	nptly and directly	delivered to a separate p	olitical organization, such
	as a separate segregated	fund or a political action committee	e (PAC). If addition	nal space is needed, provi	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(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-
					Hone, erker -o-
(1)		 			
(2)					
(3)					
(4)					
(5)		ļ			
(6)					

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Pai	t II-A Complete if the organizat 'section 501(h)).	ion is exempt u	ınder section 50	01(c)(3) and file	d Form 5768 (ele	
A	Check ► ☐ if the filing organization name, address, EIN, exp					up member's
В	Check 🕨 🗌 if the filing organization of	checked box A	and "limited cont	rol" provisions a	apply.	
		bbying Expendit		<u>.</u>	(a) Filing	(b) Affiliated
	(The term "expenditures"	means amounts	paid or incurred.)	organization's totals	group totals
18	Total lobbying expenditures to influen	ce public opinion	(grass roots lobby	ng)		
ı	Total lobbying expenditures to influen	ce a legislative bo	dy (direct lobbying	g)		
(Total lobbying expenditures (add lines	1a and 1b) .				
(Other exempt purpose expenditures					
•	Total exempt purpose expenditures (a	add lines 1c and 1	d)			
1	Lobbying nontaxable amount. Ente columns	r the amount fr	om the following	table in both		
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the an	nount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
ç	Grassroots nontaxable amount (enter	25% of line 1f)				
ŀ	 Subtract line 1g from line 1a If zero o 	r less, enter -0-				
i	Subtract line 1f from line 1c If zero or	*				
j	If there is an amount other than ze		1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year					∐ Yes ∐ No
	(Some organizations that made a s See t	section 501(h) ele he separate instr	uctions for lines	e to complete all 2a through 2f.)	of the five column	s below.
	Lobbyi	ng Expenditures	During 4-Year Av	eraging Period	r- · · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
28	Lobbying nontaxable amount					
t	Lobbying ceiling amount (150% of line 2a, column (e))	* *,		(23 2 3 2		
	Total lobbying expenditures					
C						
· •	Grassroots ceiling amount (150% of line 2d, column (e))		~ *	5 G		
f	Grassroots lobbying expenditures					

For a	'(election under section 501(h)). each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)
desc	ription of the lobbying activity.	Yes	No	,	Amount
1	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.				
а	Volunteers?	1		}	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		✓	Ì	
С	Media advertisements?		1		
d	Mailings to members, legislators, or the public?		1		
e	Publications, or published or broadcast statements?	<u> </u>	1		
f	Grants to other organizations for lobbying purposes?	<u> </u>	1		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	1	ļ.,		1
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		/		
l :	Other activities?	-	/		
j	Total. Add lines 1c through 1i			,	1
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912	<u> </u>	✓	~	
b	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	İ			
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c))(5),	or se	ction	
	501(c)(6).				TVT
	Mars substantially all (000/, or mars) dusa recovered pendeductible by marshare?			1	Yes
1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	2	+
3	Did the organization make only in-nouse lobbying expenditures of \$2,000 or less?		voor?		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	,		
а	Current year		2a		
b	Carryover from last year	•	2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?		ا مد		
5	and political expenditure next year?		5		
Pari		<u> </u>	5		
	the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro	up lis	t); Par	t II-A,	lines 1 a
	instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART	II-B, LINE 1, LOBBYING ACTIVITIES:	·			
TO AD	VANCE ITS POLICY MISSION, ASCE IDENTIFIES LEGISLATION TO IMPROVE				
THE N	ATIONIC INEDACTRICTURE AND ADVANCE THE DROFESSION OF ENGINEERING				
.,	ATION S INFRASTRUCTURE, AND ADVANCE THE PROFESSION OF ENGINEERING.				
					

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, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047
2016
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

variie v	or the organization					Employer Identific	auon number
AMER	ICAN SOCIETY OF CIVIL ENGINEE	RS KANSAS CIT	Y SECTION			23-	7381281
Par				ation ansv	vered "Yes" on I	orm 990, Part IV,	line 17.
	Form 990-EZ filers are i					, ,	
1	Indicate whether the organization				owing activities. C	heck all that apply	
а	Mail solicitations				on of non-govern		
	☐ Internet and email solicitation		. .		_	_	
b		nis	' '_		on of government	-	
C	☐ Phone solicitations		g L		fundraising events	3	
d	In-person solicitations						
2a	Did the organization have a wri						
	or key employees listed in Form		-		•	•	
b	If "Yes," list the 10 highest paid			draisers) pi	ursuant to agreem	ents under which th	e fundraiser is to be
	compensated at least \$5,000 by	y the organization	n				
		T	T			(v) Amount paid to	Τ
	(i) Name and address of individual	(II) Activity	(III) Did tun	draiser have or control of	(iv) Gross receipts	(or retained by)	(vi) Amount paid to (or retained by)
	or entity (fundraiser)	(, , , , , , , , , , , , , , , , , , ,		outions?	from activity	fundraiser listed in col (i)	organization
			Yes	No	 		
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Γotal				_	1		
	List all states in which the orga	nization is regis	tered or lice	enced to c	olicit contributions	e or has been notifie	d it is evernot from
3	registration or licensing	inization is regis	itered or he	chaca to a	Official Contributions	or has been notine	d it is exempt from
	registration of licensing						

LG	ir t II	than \$15,000 of fundraising				
	•	gross receipts greater that		and gross moonie on	10m 550-L2, mes 1 d	and ob. List events with
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		i	Golf Tournament			(add col (a) through col (c))
Revenue	}		(event type)	(event type)	(total number)	
	1	Gross receipts	11,117			11,117
	2	Less ⁻ Contributions . Gross income (line 1 minus	3,707			3,707
		line 2)	7,410			7,410
	4	Cash prizes			,	
	5	Noncash prizes .	416			416
sesus	6	Rent/facility costs .	6,711			6,711
Direct Expenses	7	Food and beverages .	799			799
Direc	8	Entertainment				
	9	Other direct expenses	1,226			1,226
	10	Direct expense summary. Ad			•	9,152
Pa	11 rt	Net income summary. Subtra Gaming. Complete if the			00 Part IV line 19 or	reported more
		than \$15,000 on Form 99			50, 1 411 (11, 111, 10 10, 51	roportou moto
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other garning	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs .				
_	5	Other direct expenses .				
		· · · · · · · · · · · · · · · · · · ·	☐ Yes %	☐ Yes %	☐ Yes %	•
	6	Volunteer labor [□ No	□ No	☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in ci	olumn (d)	•	
	8	Net gaming income summary	v. Subtract line 7 from li	ne 1, column (d)		
9		ter the state(s) in which the org			s?	☐ Yes ☐ No
	b If"	'No," explain:				
10		ore any of the organization's	aming liconece royaled	L cupponded arter-in	atod during the toy year	⁷ . ☐ Yes ☐ No
10		ere any of the organization's ga 'Yes," explain'	arming incenses revoked	, suspended, or termin	ated during the tax year	· res _ No

ocnede	ate 4 (1 0111 350 01 350-12) 2010		Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	☐ Yes ☐	No
	formed to administer charitable gaming?	☐ Yes ☐] No
13	Indicate the percentage of gaming activity conducted in:		07
a b	The organization's facility		<u>%</u> %
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 ☐	7 No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	[] (C3 [] 110
	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 a	Mandatory distributions. 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 > \$		_
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) a Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional infor See instructions		
			

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.

2016

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 Employer identification number American Society of Civil Engineers Kansas City Section 23 - 7381281 Part I, Line 16 - Other expenses Meeting and conference expenses 22,056 Student and younger member outreach 10,906 Travel and other expenses 508 **Total for Line 16** \$ 33,470

Schedule O (Form 990 of 990-82) (2016)	Page 2
Name of the organization American Society of Civil Engineers Kansas City Section	Employer identification number 23 - 7381281
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Schedule O (Form 990 or 990-EZ) (2016)		Page 3
Name of the organization American Society of Civil Engineers Kansas City Section	Employer identification number 23 - 7381281	er
American oddiety of other Engineers Kansas Oity decitor	23 - 7301201	
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Schedule O (Form 990 or 990-EZ) (2016)			Page
Name of the organization		Employer identifi	
American Society of Civil Engineers Kansas City Section	· _	23 - 7381	
Part I, line 10 - Grants and Similar Amounts Paid	Total Cash	Property Other Than Cash	Relationship If
Grantee's Name and Address	Amount	(See Below)	Individual
Make-A-Wish® Missouri, Kansas City Regional Office	13,20)	
13523 Barrett Parkway Dr Suite 241		·	
Ballwin, MO 63021			
University of Missouri-Kansas City	13,37	5	
5115 Oak Street			
Kansas City, MO 64111			
			