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# **Return of Organization Exempt From Income Tax**

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493136049300 OMB No. 1545-0047

> Open to Public Inspection

Form 99(
Department of th

Treasury

Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization D Employer identification number B Check if applicable: THE AMERIČAN SOCIETY OF MECHANICAL ☐ Address change **ENGINEERS** 13-1623899 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite TWO PARK AVENUE ☐ Amended return ☐ Application pending (212) 591-7000 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10016 G Gross receipts \$ 159,203,307 Name and address of principal officer: H(a) Is this a group return for THOMAS COSTABILE □Yes ☑No subordinates? TWO PARK AVENUE H(b) Are all subordinates NEW YORK, NY 10016 ☐ Yes ☐No included? **✓** 501(c)(3) 4947(a)(1) or 501(c) ( ) **◀** (insert no.) If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.ASME.ORG L Year of formation: 1880 M State of legal domicile: NY **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleSummary 1 Briefly describe the organization's mission or most significant activities: TO ADVANCE ENGINEERING FOR THE BENEFIT OF HUMANITY. Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 12 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 403 6 64,342 Total number of volunteers (estimate if necessary) . . . . Total unrelated business revenue from Part VIII, column (C), line 12 **7**a 1,726,843 **b** Net unrelated business taxable income from Form 990-T, line 34 267,229 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 659,878 472,025 Ravenue 59,900,335 59,413,645 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,348,515 10,663,209 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 37,083,513 38,761,343 100,992,241 109,310,222 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,105,637 700,000 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 50,381,291 55,771,667 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 44,892,730 48,005,966 99,379,658 104,477,633 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . 1,612,583 4,832,589 Net Assets or Fund Balances **Beginning of Current Year** End of Year 180,151,616 164,266,030 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 71,730,494 60,172,176 108,421,122 104,093,854 22 Net assets or fund balances. Subtract line 21 from line 20 . Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here WILLIAM GAROFALO CHIEF FINANCIAL OFFICER Type or print name and title Print/Type preparer's name Preparer's signature Check | if 2020-05-14 P01365953 Paid self-employed Firm's name ► DELOITTE TAX LLP Firm's EIN ► 86-1065772 Preparer Use Only Firm's address ► 30 ROCKEFELLER PLAZA Phone no. (212) 492-4000

NEW YORK, NY 101120015

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

	990 (2018)					Page <b>2</b>			
Pa	rt III Statement	of Program Servi	ce Accomplis	hments					
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹			
1	Briefly describe the o	organization's mission:		•					
THE	MISSION OF THE AME	RICAN SOCIETY OF ME	CHANICAL ENGI	NEERS ("ASME") IS TO	ADVANCE ENGINEERING FOR	THE BENEFIT OF HUMANITY.			
2	Did the organization	undertake any signific	ant program serv	vices during the year w	hich were not listed on				
	the prior Form 990 o	☐ Yes 🗹 No							
	If "Yes," describe the								
3	Did the organization	cease conducting, or r	nake significant o	changes in how it condu	ucts, any program				
	services?								
	If "Yes," describe the	ese changes on Schedu	ıle O.						
4	Section 501(c)(3) an		ons are required	to report the amount of	largest program services, as n of grants and allocations to oth				
4a	(Code:								
	(Code:	) (Expenses \$	18,827,996	including grants of \$	700,000 ) (Revenue \$	9,607,610 )			
<del>4</del> a	See Additional Data	) (Expenses \$	18,827,996	including grants of \$	700,000 ) (Revenue \$	9,607,610 )			
4b	•	) (Expenses \$ ) (Expenses \$	18,827,996 15,176,234	including grants of \$ including grants of \$	700,000 ) (Revenue \$ ) (Revenue \$	9,607,610 ) 2,042,425 )			
	See Additional Data								
	See Additional Data (Code:								
4b	See Additional Data  (Code: See Additional Data	) (Expenses \$	15,176,234	including grants of \$	) (Revenue \$	2,042,425 )			
4b	See Additional Data  (Code: See Additional Data  (Code:	) (Expenses \$ ) (Expenses \$	15,176,234	including grants of \$	) (Revenue \$	2,042,425 )			
4b	See Additional Data  (Code: See Additional Data  (Code: See Additional Data	) (Expenses \$ ) (Expenses \$	15,176,234 9,785,413	including grants of \$	) (Revenue \$	2,042,425 )			
4b 4c	See Additional Data  (Code: See Additional Data  (Code: See Additional Data	) (Expenses \$ ) (Expenses \$	15,176,234 9,785,413	including grants of \$ including grants of \$	) (Revenue \$ ) (Revenue \$	2,042,425 )			

Par	tiV Checklist of Required Schedules			rage 3
Fai	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part    2	4	Yes	
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?	5		No
6	If "Yes," complete Schedule C, Part III	-		
U	to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
	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		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
	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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No

Pa	t IV Checklist of Required Schedules (continued)					
			Yes	No		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b				
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	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		No		
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		No		
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		No		
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		No		
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):					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No		
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	Yes			
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	Yes			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No		
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				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No		
37						
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes			
Pa	statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 390					
b	Enter the number of Forms W-2G included in line 1a.Enter -0- if not applicable . 1b 0			1		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

**b** If "Yes," enter the name of the foreign country: ▶CH, IN, UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Nο Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Nο 5h If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . . . . 5c

6a Nο solicit any contributions that were not tax deductible as charitable contributions? . . . . If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 6h Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a No

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file **7**c No **d** If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8

**9a** Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders . . . . . . . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b 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 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a

Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans . . . . 13c

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . 14a No **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . Nο

Form 990 (2018)

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

orm	990 (2018)			Page
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines <b>V</b>
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	If there are material differences in voting rights among members of the governing			
	body, or if the governing body delegated broad authority to an executive committee or			
	similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
5	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
_	the following: The governing body?	8a	Yes	
a h	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		163	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>Cod</u> €		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
La	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
1	Did the organization have a written document retention and destruction policy?	14	Yes	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15a	162	No
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	135		NO
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
_	taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
	<u> </u>	16b		
<u>Se</u> 7	ction C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶			
,	CA , NJ , NY			
8	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website  Another's website  Upon request  Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
)	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	▶THOMAS MEEHAN CONTROLLER 150 CLOVER ROAD 6TH FLOOR LITTLE FALLS, NJ 07424 (973) 244-2255	<u>_</u>	orm <b>99</b>	0 /20:
			orm 99	1 / (

Form 990 (2	2018)										Page <b>7</b>
Part VII	Compensation of Officers and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	e in t	his	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees,	, an	d F	lighe	st C	Compensated En	nployees	
<b>1a</b> Completo year.	e this table for all persons require	ed to be listed.	Report	comp	ensa	ition	for th	е са	lendar year ending	with or within the o	rganization's tax
	of the organization's <b>current</b> off ation. Enter -0- in columns (D), (							als	or organizations), re	gardless of amount	
	of the organization's <b>current</b> key										
who receive	organization's five <b>current</b> higher d reportable compensation (Box and any related organizations.										1
of reportable	of the organization's <b>former</b> office e compensation from the organiz	ation and any r	elated o	rgani	izatio	ons.					
organization	of the organization's <b>former dire</b> , more than \$10,000 of reportab	le compensatio	n from t	he or	ʻgani	izati	on and	any	y related organization	ons.	e
	in the following order: individua d employees; and former such p		ectors;	instit	utior	nal t	rustee	s; of	ficers; key employe	es; highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, un off tor/t	t che inles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Addition	al Data Table										

	1 990 (2018)													Page <b>8</b>
Par	rt VII Section A. Officers, Direct		s, Key	Empl			and	High		nsate	d Employees (	(conti	inued)	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	one bo	oox, u an off ctor/ti	ot che unles fficer truste	<del></del>	rson a	(D)  Reportab  compensat  from the  organization  2/1099-MI	tion e n (W-	(E) Reportable compensatior from related organizations (\) 2/1099-MISC	w-	Estima amount o compens from i organizati	ated of other sation the
		organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2,200		<i>L</i> , <b>1</b>		relati organiza	ed
See	Additional Data Table	<u> </u>	_	-	-	<del> </del>	-	+-	<del> </del>			+		
		<u> </u>	<del>                                     </del>	+-	+	+	$\vdash$	+-	<del>                                     </del>			+		
		+	<del>                                     </del>	$\vdash$	$\vdash$	$\vdash$		+				+		
		+				$\vdash$	$\vdash$	+-						
		+				$\vdash$		+-						
		+		+-	+	$\vdash$	$\vdash$	+-				+		
		+		+	+	$\vdash$	$\vdash$	+				+		
		+		+	+	$\vdash$	$\vdash$	+-				$\top$		
		+		<del>     </del>		$\vdash$		+-						
		+		+		$\vdash$		+-				+		
1b \$	Sub-Total		<del></del>	<del></del>	ب.	<u>.                                    </u>	<u> </u>	<u></u>				$\perp$		
c T	Total from continuation sheets to Pa Total (add lines 1b and 1c)	art VII <b>, Section</b> .	Α				<b>▶</b>	_	4,726,6	78		0		939,483
2	Total number of individuals (including	g but not limited	d to thos					ာ rec				<u>~ı</u>		
	of reportable compensation from the	organization -	164											
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule 3</i>						oyee,	or hi	ghest compen	sated	employee on	3	Yes Yes	No
4	For any individual listed on line 1a, is organization and related organization individual										ı the			
5	Did any person listed on line 1a recei	ive or accrue co	mnensa	· ·tion f	from	• ∍nv	· · ·	· ·	organization (	• or indi	vidual for	4	Yes	
<b>.</b>	services rendered to the organization										· · ·	5		No
	ection B. Independent Contract			<u> </u>		<u> </u>								
1	Complete this table for your five high from the organization. Report comper											npens	sation 	
	Name	(A) and business addre	ess			_				Descr	(B) ription of services		(C Compen	
	ERSON BELKNAP WEBB & TYLER LLP					_			LEGA	L SERV	·			624,757
NEW Y	AVE OF THE AMERICAS YORK, NY 100366710													
	NOWLEDGE DIGITAL MARKETING LLC	<del>-</del>		_	_	_	_	_	MARK	KETING				444,007
NEW Y	GRAND STREET 5S YORK, NY 10013													
	STAR DIRECT MARKETING LLC  OX 720								MAKK	KETING				380,990
FREDE	OX 720 ERICK, MD 21705 IERHALE								I EGA	L SERV	TOES	$\dashv$		303,567
РО ВО	OX 7247-8760									L J	ICES			300,00.
PHILA DANIE	ADELPHIA, PA 191708760 EL E CHEETHAM,								CONS	SULTAN	T- CA			240,814
	NW 38TH PL CORAL, FL 339939311													
1 2 7	Total number of independent contractor	rs (including but	t not lim	nited '	to th	iose	listed	abo	ve) who receiv	/ed mo	ore than \$100.00	00 of		

Contributions, and Other Sin	f All other contributions, and similar amounts no above	ot included 1f	374,025					
n tri	g Noncash contributio in lines 1a - 1f:\$							
Cont	h Total. Add lines 1a-	1f	•	472,025				
9			Business (		640.000	20.640.020		
nue	2a CONFORMITY ASSESSME			511430	176 594	30,649,830		
Rev	<b>b</b> TECH. EVENTS & CONTE			611430	.,176,584 3,809,797	11,176,584 8,809,797		
vice	c CONSTITUENT ENGAGEN			511130	5,339,670	6,339,670		
Ser	d LEARNING & DEVELOPMI	EN I		511130	473,451	473,451		
Program Service Revenue	e CODES & STANDARDS			511120	.,964,313	395,339	1,568,974	
¥og	<b>f</b> All other program ser	rvice revenue.	E0.41	l 13,645	.,904,313	393,339	1,300,974	
	<b>gTotal.</b> Add lines 2a-2	f	<b>&gt;</b>	13,645				
	3 Investment income (in similar amounts)		terest, and other	2,309,	903			2,309,903
	4 Income from investme		nd proceeds					
	<b>5</b> Royalties		▶	27,624,	239			27,624,239
	<b>6a</b> Gross rents	(i) Real	(ii) Personal					
	<b>Va</b> Gross rents							
	<b>b</b> Less: rental expenses							
	<b>c</b> Rental income or (loss)							
	d Net rental income or	(loss)	· · •					
		(i) Securities	(ii) Other					
	7a Gross amount from sales of assets other than inventory	38,414,345						
	<b>b</b> Less: cost or other basis and sales expenses	30,061,039						
	C Gain or (loss) d Net gain or (loss)	8,353,306		8,353,	306			8,353,306
Other Revenue	8a Gross income from fu (not including \$ contributions reporte See Part IV, line 18	undraising events of d on line 1c).	•	0,533,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			6,333,300
Rev	<b>b</b> Less: direct expenses	_						
erl	<b>c</b> Net income or (loss)	from fundraising eve	nts 🕨					
Oth	<b>9a</b> Gross income from gas See Part IV, line 19							
	200 / 0,	a						
	<b>b</b> Less: direct expenses	<u> </u>						
	<ul><li>c Net income or (loss)</li><li>10aGross sales of invento</li></ul>		es <b>&gt;</b>		-			
	returns and allowance							
		a	30,649,114					
	<b>b</b> Less: cost of goods s	<u>L</u>	19,832,046	10,817,	068	10,817,068		
	Net income or (loss)  Miscellaneous		ry ▶ Business Code	, ,		, ,		
	11ajob Board Revenu	JE	900001	153,	395		153,895	
	b GRE&E INCOME		900001	30,	500			30,500
	CAR RENTAL REVENU	JΕ	532111	3,	974		3,974	
	<b>d</b> All other revenue .			131,	567			131,667
	e Total. Add lines 11a-	<u> </u>	•	220	126			
	12 Total revenue. See	Instructions		320,		60.661.736	1 726 242	20.440.615
			•	109,310,	222	68,661,739	1,726,843	38,449,615

orr	m 990 (2018)				Page <b>10</b>
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns. All other orga	nizations must comp	elete column (A).	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	700,000	700,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,767,838	2,588,155	1,179,683	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	39,991,507	27,470,455	12,521,052	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,502,402	2,405,825	1,096,577	
9	Other employee benefits	5,644,138	3,876,999	1,767,139	
10	Payroll taxes	2,865,782	1,968,527	897,255	
11	Fees for services (non-employees):				
ā	a Management				
ı	b Legal	1,332,626	581,046	751,580	
•	c Accounting	244,240	3,360	240,880	
	d Lobbying	369,503	369,503		
	e Professional fundraising services. See Part IV, line 17	222.424			
	f Investment management fees	269,421	5 1 10 001	269,421	
9	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	6,448,630	5,140,801	1,307,829	
12	Advertising and promotion	3,236,602	3,236,602		
13	Office expenses	1,776,646	1,322,260	454,386	
14	Information technology	3,677,136	1,387,281	2,289,855	
15	Royalties				
16	Occupancy	6,301,322	216,795	6,084,527	
17	Travel	5,827,303	5,165,340	661,963	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	10,938,761	10,681,138	257,623	
20	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	3,292,768	648,143	2,644,625	
	Insurance	392,882	26,030	366,852	
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.)				
	a AWARDS & HONORARIUMS	1,337,842	1,337,842		
	b PROFESSIONAL SUPPORT	1,199,323	1,076,040	123,283	
	c PROGRAM SERVICE	842,923	842,923		
	d COMMISSION	351,920	351,920		
	e All other expenses	166,118	26,326	139,792	
	Total functional expenses. Add lines 1 through 24e	104,477,633	71,423,311	33,054,322	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2018)

۰					
		Check if Schedule O contains a response or note to any line in this Part IX			🗆
			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	7,941,850	1	5,672,653
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	15,856,239	4	14,323,028
	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			

Page **11** 

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108,421,122

180,151,616

104,093,854

164,266,030 Form **990** (2018)

_	

	2	Savings and temporary cash investments .				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			15,856,239	4	14,323,028
	5	Loans and other receivables from current and for trustees, key employees, and highest compensations and the second	ated en	nployees. Complete		5	
ssets	7	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organization voluntary employees' beneficiary organizations Part II of Schedule L	n 4958 ations o (see in	(c)(3)(B), and of section 501(c)(9)		6	
sse	8	Inventories for sale or use		_	656.976	8	612.815
Ä	9	Prepaid expenses and deferred charges		3,108,329	9	2,983,388	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	72,207,393	<u> </u>		
	Ь	Less: accumulated depreciation	10b	49,981,385	19,540,458	10c	22,226,008
	11	Investments—publicly traded securities .		133,047,764	11	118,448,138	
	12	Investments—other securities. See Part IV, line			12		
	13	Investments—program-related. See Part IV, line			13		
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets.Add lines 1 through 15 (must equ	ıal line	34)	180,151,616	16	164,266,030
	17	Accounts payable and accrued expenses			27,597,276	17	24,526,617
	18	Grants payable				18	
	19	Deferred revenue			44,069,854	19	35,203,055
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee					
jak		persons. Complete Part II of Schedule L				22	
1	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, p. and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D	63,364	25	442,504		
	26	Total liabilities. Add lines 17 through 25	ı		71,730,494	26	60,172,176
Balances	27	Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33 Unrestricted net assets			107,922,335	27	103,644,413
3a k	28	Temporarily restricted net assets			362,220	28	327,599
nd E	29	Permanently restricted net assets			136,567	29	121,842
		,			<u> </u>		

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Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

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

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds . .

Total net assets or fund balances

Total liabilities and net assets/fund balances

3a

3h

Nο

Form 990 (2018)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

Audit Act and OMB Circular A-133?

#### **Additional Data**

Software ID: Software Version:

**EIN:** 13-1623899

Name: THE AMERICAN SOCIETY OF MECHANICAL ENGINEERS

Form 990 (2018)

Form 990, Part III, Line 4a:

TECHNICAL EVENTS & CONTENT AND INSTITUTES- ASME ANNUALLY PERFORMS RESEARCH ON TECHNICAL MECHANICAL ENGINEERING ISSUES, AND HOLDS TECHNICAL

MEETINGS AND CONFERENCES FOR MECHANICAL ENGINEERS ON A VARITY OF MECHANICAL ENGINEERING TOPICS AND SUBJECTS.

### Form 990, Part III, Line 4b:

CODES & STANDARDS- ASME ESTABLISHES AND PUBLISHES PUBLIC SAFETY RELATED INDUSTRIAL AND MANUFACTURING CODES AND STANDARDS FOR THE DESIGN, MANUFACTURING, AND INSTALLATION OF MECHANICAL DEVICES. THE PRINCIPAL PRODUCT AFFECTING REVENUE AND EXPENSES IS THE SOCIETY'S BOILER AND

PRESSURE VESSEL CODE (THE BOILER CODE).

#### Form 990, Part III, Line 4c: PUBLICATIONS- ASME PRODUCES AND PREPARES THE TECHNICAL CONTENT OF THE SOCIETY FOR PUBLIC DISTRIBUTION AND SALE IN THE FORM OF JOURNALS, CONFERENCE PROCEEDINGS AND BOOKS, BOTH IN PRINT AND ELECTRONIC MEDIA.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

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

others, the total expenses, and revenue, if any, for each program service reported. (Code: ) (Expenses \$ 9,541,535 including grants of \$ (Revenue \$ 30,649,830 )

CONFORMITY ASSESSMENT- ASME HOSTS PROGRAMS UNDER WHICH A COMPANY OR AN INDIVIDUAL IS ASSESSED AND CERTIFIED BASED ON

DEMONSTRATED ABILITY TO MEET THE REQUIREMENTS OF AN ASME STANDARD. THESE CONFORMITY ASSESSMENTS CONTINUE TO PROVIDE A SERVICE VITAL TO THE ENHANCEMENT OF PUBLIC SAFETY AND FACILITATION OF INTERNATIONAL COMMERCE.

(Code: ) (Expenses \$ 6,592,958 including grants of \$ (Revenue \$ 6,339,670

LEARNING & DEVELOPMENT- ASME PROVIDES CONTINUING EDUCATION COURSES FOR ENGINEERING AND THE TECHNICAL WORKFORCE.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

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

DISCOUNTS ON ASME PUBLICATIONS. CONTINUING EDUCATION AND CONFERENCE REGISTRATIONS.

others, the total expenses, and revenue, if any, for each program service reported. (Code: ) (Expenses \$ 5,864,909 including grants of \$ ) (Revenue \$ 324,036)

PROGRAMS- ASME HOSTS CONFERENCES AND WORKSHOPS TO HELP IDENTIFY EMERGING ISSUES OF INTEREST TO MEMBERS AND THE ENGINEERING PROFESSION AT LARGE.

(Code: 5.634,266 including grants of \$ ) (Revenue \$ ) (Expenses \$ 8,809,798 )

CONSTITUENT ENGAGEMENT- ASME OFFERS PROFESSIONAL AND STUDENT MECHANICAL ENGINEERING SOCIETY MEMBERSHIPS. IN EXCHANGE

FOR DUES PAYMENTS. THE MEMBER RECEIVES SEVERAL MEMBERSHIP BENEFITS INCLUDING, BUT NOT LIMITED TO, MONTHLY SUBSCRIPTION TO

MECHANICAL ENGINEER' MAGAZINE, FREE ACCESS TO ON-LINE REFERENCE TOOLS, FREE SUBSCRIPTION TO DAILY E-NEWSLETTER, AND

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	· ·						organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CHARLA K WISE	4.00	Х		х				0	0	0
PAST PRESIDENT	1.00									
JOE R FOWLER	4.00	Х						0	0	0
MEMBER-AT-LARGE	1.00							0		
KAREN A THOLE	4.00	X						0	0	0
MEMBER-AT-LARGE	1.00								0	
KAREN J OHLAND END 060419	4.00	V								0
MEMBER-AT-LARGE	1.00	Х							0	0
LAURA HITCHCOCK FROM 060419	4.00	Х						0	0	0
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RAKEN J ORLAND END 000419
MEMBER-AT-LARGE
LAURA HITCHCOCK FROM 060419
MEMBER-AT-LARGE
MAHANTESH HIREMATH END 060419

MEMBER-AT-LARGE

MARY LYNN REALFF

MEMBER-AT-LARGE

MICHAEL F MOLNAR

MEMBER-AT-LARGE

PRESIDENT ELECT

ROBERT E GRIMES

MEMBER-AT-LARGE

RICHARD T LAUDENAT

.........

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list compensation from the from related any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

MEMBER-AT-LARGE

SECRETARY-TREASURER

JOHN DELLI VENNERI .......

GENERAL COUNSEL

THOMAS COSTABILE

WILLIAM GAROFALO

ELENA GERSTMANN

DEPUTY, EXECUTIVE OP

EXECUTIVE DIRECTOR/CEO

CHIEF FINANCIAL OFFICER

BRYAN ERLER

	famous laboral			(14/ 2/1000						
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
SAID JAHANMIR	4.00			,,						
PRESIDENT	1.00	X		X				0	U	0
STUART W CAMERON MEMBER-AT-LARGE	4.00 1.00	Х						0	0	0
THOMAS KURFESS FROM 060419 MEMBER-AT-LARGE	4.00 1.00	Х						0	0	0
TODD ALLEN FROM 060419	4.00	Х						0	0	0

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63,439

35,916

21,276

20,532

362,124

341,175

387,800

485,210

MEMBER-AT-LARGE	1.00	Λ				
THOMAS KURFESS FROM 060419	4.00				_	
MEMBER-AT-LARGE	1.00	Х			0	
TODD ALLEN FROM 060419	4.00	×			0	
MEMBER-AT-LARGE	1.00					
WILLIAM J WEPFER END 060419	4.00					

1.00 4.00

1.00 40.00

1.00 40.00

2.50 40.00

2.50 40.00

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Average Reportable Estimated than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

ELPIDIO LABRADOR

JOHN KOEHR

MANAGING DIRECTOR

MANAGING DIRECTOR

JOSH HEITSENRETHER

MANAGING DIRECTOR

MANAGING DIRECTOR

EXECUTIVE DIRECTOR

THOMAS LOUGHLIN THRU 112017

......

PHILIP DIVIETRO

	any nours	and	ı a dır	ecto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JEFFERY PATTERSON CHIEF OPERATING OFFICER	40.00				×			433,323	0	50,420
LAUREL RASO ASSOCIATE EXECUTIVE DIRECTOR	40.00				х			360,810	0	211,377
LUIS RODRIGUEZ	40.00									

CHIEF OPERATING OFFICER	0.00						l
LAUREL RASO	40.00		V		360.010	0	
ASSOCIATE EXECUTIVE DIRECTOR	0.00		X		360,810	0	
LUIS RODRIGUEZ	40.00		×		315.394	0	
ASSOCIATE EXECUTIVE DIRECTOR	0.00		_^		313,334		

40.00

0.00 40.00

0.00 40.00

0.00 40.00

0.00 40.00

2.50

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ASSOCIATE EXECUTIVE DIRECTOR	0.00						
LUIS RODRIGUEZ	40.00				245 224		40.252
ASSOCIATE EXECUTIVE DIRECTOR	0.00		Х		315,394	315,394 0 262,155 0	49,252
DENNIS KILLIAN	40.00			v	262 155	0	51,948
MANAGING DIRECTOR	0.00			^	202,133	0	31,540

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254,025

337,128

259,540

274,687

653,307

0

0

0

0

0

121,092

53,744

41,589

166,393

52,505

ASSOCIATE EXECUTIVE DIRECTOR	0.00						
LUIS RODRIGUEZ	40.00		~		315.394	0	49,252
ASSOCIATE EXECUTIVE DIRECTOR	0.00		^		313,394	0	49,232
DENNIS KILLIAN	40.00			×	262,155	0	51,948
MANACING DIRECTOR				l ^	202,133	ĭ	31,340

efile	GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493136049300					
SCH	łED	ULE A	Public	Charity Statu	e and Bul	hlic Sunn	ort	OMB No. 1545-0047					
	n 990			rganization is a sect 4947(a)(1) nonexe Attach to Form	tion 501(c)(3) empt charitable	organization or trust.	1	2018					
		the Treasury	► Go to	www.irs.gov/Form	990 for the late	est information	•	Open to Public Inspection					
Name	of th	ne organiza	tion FMECHANICAL				Employer identific	ation number					
Pai	_	Reason	for Public Charity Stat	us (All organization	s must comple	ete this part.) S	13-1623899 See instructions						
			a private foundation because				yee mediationer						
1		A church, c	onvention of churches, or as	ssociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).						
2		A school de	scribed in section 170(b)(	1)(A)(ii). (Attach Scl	hedule E (Form 9	990 or 990-EZ).)							
3	$\Box$	A hospital o	or a cooperative hospital ser	vice organization desc	ribed in <b>section</b>	170(b)(1)(A)(	iii).						
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state:											
5		(b)(1)(A)	ation operated for the benef (iv). (Complete Part II.)	_				bed in <b>section 170</b>					
6		A federal, s	tate, or local government of	governmental unit de	escribed in <b>sectio</b>	on 170(b)(1)( <i>f</i>	()(v).						
7		section 17	ation that normally receives $(0(b)(1)(A)(vi)$ . (Complete	e Part II.)		_	init or from the gener	al public described in					
8	Ш		ty trust described in <b>sectio</b>		` '	,							
9			ural research organization d rant college of agriculture. S					ege or university or a					
.0	<b>✓</b>	from activition	ation that normally receives dies related to its exempt fur income and unrelated busin See <b>section 509(a)(2).</b> (Co	nctions—subject to cer ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross					
l1		An organiza	ation organized and operate	d exclusively to test fo	r public safety. S	See section 509	(a)(4).						
12		more public	ation organized and operate cly supported organizations othrough 12d that describes	described in <b>section 5</b>	<b>09(a)(1)</b> or se	ction 509(a)(2	). See section 509(a						
а		<b>Type I.</b> A so	supporting organization oper n(s) the power to regularly Part IV, Sections A and B	rated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by						
b		manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	ation vested in the sar									
c			unctionally integrated. A					ited with, its					
d		Type III n	organization(s) (see instruct on-functionally integrate ontegrated. The organization on must complete Pa	d. A supporting organ n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported organ						
e		Check this	box if the organization recei or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally					
f	Enter		of supported organizations		_		<u> </u>						
g			ing information about the s	<del>' '                                  </del>	Υ'								
	(i) N	lame of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
			<u>'</u>										
Total		uoult Dadii -	tion Act Notice, see the I	notructions for	Cat. No. 11285	<u> </u>	 Schedule A (Form 9	00 000 F7\ 2016					

Page 2

(b)(1)(A)(ix) (Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part											
III. If the organization fails to qualify under the tests listed below, please complete Part III.)											
Section A. Public Support											
Calendar year (or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total					

S	ection A. Public Support										
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(6) 2016	(u) 2017	(e) 2018	(I) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grant.")										
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	<b>Total.</b> Add lines 1 through 3										
5	The portion of total contributions by										
•	each person (other than a										
	governmental unit or publicly										
	supported organization) included on										
	line 1 that exceeds 2% of the amount										
	shown on line 11, column (f).										
6	Public support. Subtract line 5 from										
0	line 4.										
_	ection B. Total Support				l		L				
	Calendar year					1	1				
	(or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d)2017	<b>(e)</b> 2018	(f)Total				
7	Amounts from line 4										
8	Gross income from interest,										
0	dividends, payments received on										
	securities loans, rents, royalties and										
	income from similar sources.										
9	Net income from unrelated business										
9	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain or										
10	loss from the sale of capital assets										
	(Explain in Part VI.).										
11	<b>Total support.</b> Add lines 7 through										
	10										
12	Gross receipts from related activities, e	tc. (see instruction	ons)			12	- L				
	First five years. If the Form 990 is for										
13		_			•	. , , ,	-				
	check this box and <b>stop here</b>					<u> ▶</u>					
	ection C. Computation of Public										
14	Public support percentage for 2018 (line	e 6, column (f) di	vided by line 11, c	olumn (f))		14					
15	Public support percentage for 2017 Sch	edule A, Part II, l	ine 14			15					
16:	33 1/3% support test—2018. If the	organization did r	not check the box	on line 13, and lin	e 14 is 33 1/3% o	r more, check thi	s box				
	and <b>stop here.</b> The organization qualif										
L											
L	<b>b</b> 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this										
	box and <b>stop here.</b> The organization qualifies as a publicly supported organization										
17a											
	is 10% or more, and if the organization										
	in Part VI how the organization meets t	ne racts-and-circ	cumstances test.	ine organization (	quanties as a publ	iciy supported	_				
	organization						▶ 📙				
b	10%-facts-and-circumstances test										
	15 is 10% or more, and if the organiza										
	Explain in Part VI how the organization	n meets the "facts	s-and-circumstanc	es" test. The orga	nization qualifies	as a publicly	_				

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

20

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

	ection A. Public Support  Calendar year	Т	Т	Т		Т	
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	<b>(f)</b> ⊤otal
1	Gifts, grants, contributions, and membership fees received. (Do not	1,678,293	863,017	848,739	659,878	472,025	4,521,952
2	include any "unusual grants.") . 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	87,928,338	89,318,276	83,584,091	87,537,441	88,493,785	436,861,931
	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	89,606,631	90,181,293	84,432,830	88,197,319	88,965,810	441,383,883
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						(
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.	1,622,678	15,747,489	1,926,920	17,427,527	1,890,005	38,614,619
С	Add lines 7a and 7b	1,622,678	15,747,489	1,926,920	17,427,527	1,890,005	38,614,619
8	<b>Public support.</b> (Subtract line 7c from line 6.)						402,769,264
Se	ection B. Total Support		'	•		•	
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	(or fiscal year beginning in) ► Amounts from line 6	89,606,631	90,181,293	84,432,830	88,197,319	88,965,810	441,383,883
10a	_ <b>-</b>	24,821,076	25,214,025	24,737,034	29,753,367	29,934,142	134,459,644
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.	162,262	212,634	177,663	416,397	211,111	1,180,067
c	<b>-</b>	24,983,338	25,426,659	24,914,697	30,169,764	30,145,253	135,639,711
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					162,167	162,167
13		114,589,969	115,607,952	109,347,527	118,367,083	119,273,230	577,185,761
14	First five years. If the Form 990 is 1	for the organization	n's first, second, th	ird, fourth, or fifth	n tax year as a se	ction 501(c)(3) org	janization,
	check this box and <b>stop here</b>						▶ □
	ection C. Computation of Public			1 (6))		T .= T	
15	Public support percentage for 2018 (I					15	69.780 %
16	Public support percentage from 2017					16	69.290 %
	ection D. Computation of Inves Investment income percentage for 20			ine 13 column (f)	)	17	22 500 9/
17 18	Investment income percentage from		.,	, , ,	•	18	23.500 % 21.990 %
19a	331/3% support tests-2018. If the	e organization did i	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box and						
b	33 1/3% support tests—2017. If t	<del>-</del>					
	not more than 33 1/3%, check this bo	ox and <b>stop here.</b>	The organization of	qualifies as a publi	cly supported org	anızatıon	▶□

**Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶ □

(Complete only if you checked a box on line 12 of 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. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

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. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (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 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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

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. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations.

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 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 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5c 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

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in 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). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a 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.

9b

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. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings). 10b

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 of 990-E2) 2016		- 1	age 3
Pē	Supporting Organizations (continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>
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?			<u> </u>
	governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
С	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		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.	_ '		
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	Section D. All Type III Supporting Organizations		<u> </u>	
			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?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
5	Section 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 instruct	ions):		
_	a  The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	b  The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. <b>Answer (a) and (b) below.</b>	I	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>			
	<b>a</b> 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? <i>Provide details in Part VI</i> .	3a		
	<b>b</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 <b>Part VI.</b> the role played by the organization in this regard.	3h		_

instructions)

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting 0	Organi	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> 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		
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		
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	<b>Distributable Amount.</b> 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-functionally-in	ntegrat	ed Type III supporting or	ganization (see

c Remainder. Subtract lines 4a and 4b from 4.

5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.

6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2019. Add lines 3j and 4c.

8 Breakdown of line 7: a Excess from 2014. . . . . . **b** Excess from 2015. . . . . c Excess from 2016. . . . .

Schedule A (Form 990 or 990-EZ)	Page :
Section A, lines 1, 2, Part IV, Section D, lir	mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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; les 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 and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See
	Facts And Circumstances Test
990 Schedule A, Supplemer	etal Information
Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME:	AWARDS AND OTHER INCOME - 2018 AMOUNT: \$ 162,167.

## **Political Campaign and Lobbying Activities**

▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

DLN: 93493136049300

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

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

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 • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** THE AMERICAN SOCIETY OF MECHANICAL **ENGINEERS** 13-1623899 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) ...... 2 3 Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ..... 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No Was a correction made? ..... ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1				
2				
3				
4				
5				
5				
or Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	. Cat.	No. 50084S Schedule C (	Form 990 or 990-EZ) 2018

Lobbying ceiling amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

expenses, and share of excess lobbying expenditures).

	Limits on Lobb  (The term "expenditures" m	ying Expe	enditures			(a) Filing (b) Affiliated organization's group totals totals	
1a	Total lobbying expenditures to influence public	opinion (gras	ss roots lobbying)				
b	Total lobbying expenditures to influence a legis	lative body (	direct lobbying)			369,503	
c	Total lobbying expenditures (add lines 1a and :	1b)				369,503	
d	Other exempt purpose expenditures					104,108,130	
е	Total exempt purpose expenditures (add lines	1c and 1d)				104,477,633	
f	Lobbying nontaxable amount. Enter the amoun columns.	t from the fo	llowing table in bo	oth		1,000,000	
	If the amount on line 1e, column (a) or (b	) is: The lo	bbying nontaxa	ble amount is:			
	Not over \$500,000	20% of	the amount on line 1	.e.			
	Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the e	xcess over \$500,000	D.		
	Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the ex	xcess over \$1,000,0	00.		
	Over \$1,500,000 but not over \$17,000,000	\$225,00	00 plus 5% of the exc	cess over \$1,500,00	0.		
	Over \$17,000,000	\$1,000,	000.				
h	Grassroots nontaxable amount (enter 25% of I Subtract line 1g from line 1a. If zero or less, en Subtract line 1f from line 1c. If zero or less, en	nter -0				250,000 0 0	
j	If there is an amount other than zero on either section 4911 tax for this year?						☐ Yes ☐ No
	4-Ye (Some organizations that mad columns below. S	de a sectio		tion do not ha	ive to comp		five
	Lobbying	Expenditu	res During 4-	Year Averagin	g Period	_	
	Calendar year (or fiscal year beginning in)		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount	_	1,000,000	1,000,000	1,000,0	00 1,000,00	0 4,000,000

368,204

250,000

402,636

250,000

361,877

250,000

369,503

250,000

Schedule C (Form 990 or 990-EZ) 2018

6,000,000

1,502,220

1,000,000

	ich "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	)	(b)	
ctivi	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amour	nt
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?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r sectio	n	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), 0	r sectio	n	
	501(c)(6).			Yes	N
	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?			Yes	N
L 2	501(c)(6).  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?			Yes	N
1 2 3	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	Yes	No
l <u>e</u>	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o	3	Yes 2 2 3 3 501(c)	
l 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o	3	Yes 2 2 3 3 501(c)	
ar	Were substantially all (90% or more) dues received nondeductible by members?	(5), o	3	Yes 2 2 3 3 501(c)	
art	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	(5), o III-A	3	Yes 2 2 3 3 501(c)	
art	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization make only in-house lobbying and political expenditures answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o III-A	3	Yes 2 2 3 3 501(c)	
art	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	(5), o III-A,  1 2a 2b 2c	3	Yes 2 2 3 3 501(c)	
l 2 3 Part l 2 a b	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A	3	Yes 2 2 3 3 501(c)	
1 2 3 Part 1 2 a b c	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o III-A, land 2a 2b 2c 3	3	Yes 2 2 3 3 501(c)	
1 2 3 2 a b	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?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A,  1 2a 2b 2c	3	Yes 2 2 3 3 501(c)	

Explanation

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference

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# Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, ► Attach to Form 990.

OMB No. 1545-0047

DLN: 93493136049300

Internal Revenue Service

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Open to Public Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** THE AMERICAN SOCIETY OF MECHANICAL **ENGINEERS** 13-1623899 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year . . . . . . . . 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Number of conservation easements on a certified historic structure included in (a) . . . . . 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . . . . . . . . . ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 

Par	t III	Organizations Ma	aintaining Col	lections of Art,	, Histori	ical Tı	eas	ures, or	Other :	Similar As	sets (co	ontinued)
3		the organization's acq (check all that apply):		n, and other record	ds, check	any of	the fo	ollowing th	nat are a	significant u	se of its	collection
а		Public exhibition			d		Loar	n or excha	nge prog	rams		
b		Scholarly research			е		Othe	∍r				
С		Preservation for future	e generations									
4	Provid Part >	de a description of the	organization's col	lections and explai	in how the	ey furth	er th	ne organiza	ation's ex	empt purpos	se in	
5	Durin	g the year, did the orga s to be sold to raise fur									☐ Yes	□ No
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			orm 990	), Part	IV, I	ine 9, or	reporte	d an amou		
1a		e organization an agent ded on Form 990, Part )									☐ Yes	□ No
b	If "Ye	es," explain the arrange	ement in Part XIII	and complete the	following	table:		Γ		Ar	nount	
c	Begin	ning balance							1c			
d	Additi	ions during the year .						[	1d			
е	Distri	butions during the year	r					[	1e			
f	Endin	g balance						[	1f			
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X, lin	ne 21, for	escrow	or c	ustodial ad	count lia	bility?	☐ Yes	□ No
b		s," explain the arrange									_	
	rt V	Endowment Fund										
				(a)Current year		rior yea		(c)Two ye		(d)Three year		(e)Four years back
<b>1</b> a	Beginn	ing of year balance .		498,78	_		,378		489,501		26,769	577,238
b	Contrib	outions										-
С	Net inv	estment earnings, gair	ns, and losses	9,53	7	30	,884		51,773		-2,652	-8,048
d	Grants	or scholarships	•									
е		expenditures for facilitie	es	58,88	3	35	,475		37,896		34,616	42,421
f	Admini	strative expenses .										
g	End of	year balance		449,44	1	498	,787		503,378	4	89,501	526,769
2	Provid	de the estimated perce	ntage of the curre	ent year end balan	ce (line 1	g, colu	mn (a	a)) held as	s:			
а	Board	d designated or quasi-e	ndowment 🟲									
b	Perma	anent endowment ►	27.110 %									
c	Temp	orarily restricted endov	wment ▶ 72.8	390 %								
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100%.								
3а	organ	nere endowment funds nization by:	·	sion of the organiz	zation tha	t are h	eld ar	nd adminis	stered for	the		Yes No
	٠,	nrelated organizations				•					3a(	
b		elated organizations . s" on 3a(ii), are the rel			 d on Sche	 edule R	? .	: :			3a( 3l	
4	Descr	ibe in Part XIII the inte	ended uses of the	organization's end	dowment	funds.						
Pa	rt VI	Land, Buildings,										
	Descri	Complete if the org ption of property	ganization answ (a) Cost or oth (investme	ner basis (b) Co	orm 990 ost or other					m 990, Par		) Book value
<b>1</b> a	Land											
		gs										
		old improvements				22,53	3,957	,		9,254,067		13,279,890
		nent					9,000	+		39,854,966		8,944,034
	Other						4,436			872,352		2,084
		lines 12 through 10 /C	olumn (d) must o	gual Form 990 Pa	rt V colu					,		2,001

Part VII Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	anization	answered "Yes" or	n Form 990, Par	t IV, line 11b.
(a) Description of security or category (including name of security)	(i Bo va	ok Cos	(c) Method of va t or end-of-year r	
(1) Financial derivatives	: _			
(A)	_			
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII  Investments—Program Related.  Complete if the organization answered 'Yes' on Form 9	•  990. Part 1	V. line 11c. See F	orm 990. Part X	. line 13.
	(b) Book v	alue	(c) Method of va	luation:
(1)		Cos	t or end-of-year r	Harket value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)				
Part IX Other Assets. Complete if the organization answered 'Yes'	on Form 99	0, Part IV, line 11d.	See Form 990, Pa	
(a) Description				(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•	
<b>Part X Other Liabilities.</b> Complete if the organization answer See Form 990, Part X, line 25.		n Form 990, Part	IV, line 11e or 1	.1f.
1. (a) Description of liability (1) Federal income taxes		<b>b)</b> Book value		
DUE TO RELATED PARTY (2)		442,504		
(3)				
(4)			1	
(5)				
(6)				
(7)				
(8)				
(9)				
		440 =0.		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo	ootnote to t	442,504 he organization's fin	] ancial statements	that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740). C				

Net unrealized gains (losses) on investments . . . .

Subtract line **2e** from line **1** . . . . . . . .

Page 4

Donated services and use of facilities . . . . . 2b b 2c Recoveries of prior year grants . . . . . . d Other (Describe in Part XIII.) 2d 16.341.338 e 2e

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> 10,977,388 3 109,040,801

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . b Add lines **4a** and **4b** . . . . . . . . C

Total expenses and losses per audited financial statements . . . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Subtract line 2e from line 1 . . . . . . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

4a 269,421 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

-5,363,950

2a

2a 2b

2c

2d

4a

4b

4c 269,421 5 109,310,222 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. 124,303,584

20,095,372

104,208,212

269,421

Add lines **4a** and **4b** . . . . . . . . . . . . 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . . Part XIII Supplemental Information

Schedule D (Form 990) 2018

а

3

5

1

2

C

d

е 3

b

4

Part XII

4c 5 104.477.633

20,095,372

269.421

2e

3

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference Explanation

See Additional Data Table

Page <b>5</b>	le D (Form 990) 2018						
	ormation (continued)	Part XIII Supplemental Info					
	Explanation	Return Reference					

Schedule D (Form 990) 2018

### **Additional Data**

Software ID:

Software Version: **EIN:** 13-1623899

Name: THE AMERICAN SOCIETY OF MECHANICAL

**ENGINEERS** 

Supplemental Information			

Return Reference Explanation ENDOWMENT FUNDS ARE USED FOR MECHANICAL ENGINEERING AWARDS AND MEDALS.

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THERE ARE CERTAIN TRANSACTIONS THAT COULD BE DEEMED UNRELATED BUSINESS INCOME AND WOULD RE SULT IN A TAX LIABILITY. MANAGEMENT REVIEWS TRANSACTIONS TO ESTIMATE POTENTIAL TAX LIABILI TIES USING A THRESHOLD OF MORE LIKELY THAN NOT. IT IS MANAGEMENT'S ESTIMATION THAT THERE A RE NO MATERIAL INCOME TAX LIABILITIES THAT NEED TO BE RECORDED AT JUNE 30, 2019 OR 2018.

\_ \_ \_

upplemental Information							
Return Reference	Explanation						
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RECLASS OF COGS 19,832,046. PENSION ADJUSTMENTS -3,490,708.						

Supplemental Information							
Return Reference	Explanation						
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RECLASS OF COGS 19,832,046. ASME INDIA EXPENSES 263,326.						

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493136049300 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** THE AMERICAN SOCIETY OF MECHANICAL **ENGINEERS** 13-1623899 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments region and independent fundraising, program specific type of in region contractors in services, investments, grants service(s) in region region to recipients located in the region) See Add'l Data 11 1,264,409 3a Sub-total . b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 11 1,264,409

chedule F (Form 990) 2018							Page <b>3</b>
				ed States. Complete if	f the organization ar	nswered "Yes" to Form S	990, Part IV, line 16.
a) Type of grant or assistance	duplicated if addit (b) Region	(c) Number of recipients	eeded. (d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

dule F (Form 990) 2018		Page <b>4</b>
rt IV Foreign Forms		
Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>✓</b> Yes	□No
Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	<b>☑</b> No
Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	<b>✓</b> Yes	□No
Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	<b>☑</b> No
Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
• •	☐ Yes	<b>✓</b> No
Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	<b>⊻</b> Yes	□No
	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)

Schedule F (Form 990) 2018					
Provide amounts method) any addi	hental Information he information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting; and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide cional information (see instructions).  **Implemental Information**				
Return Reference	Explanation				
PART I, LINE 3:	THE EXPENDITURES IN PART I, LINE 3, COLUMN (F) ARE REPORTED ON AN ACCRUAL BASIS.				

### **Additional Data**

## Software ID: Software Version:

**EIN:** 13-1623899

Name: THE AMERICAN SOCIETY OF MECHANICAL

ENGINEERS

_								<b>-</b>
l Form	990	Schedule	e F Part	I - Activities	Outside	The	unitea	States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	1	3		ASME, THROUGH WHOLLY OWNED ASME PACIFIC LLC, PROMOTES UNDERSTANDING AND THE USE OF CODES AND STANDARDS PROGRAMS IN THE ASIA/PACIFIC MARKETS, SERVING AS AN INQUIRY POINT FOR INFORMATION REGARDING ASME EDUCATIONAL COURSES AND SEMINARS, AND FACILITATING NEW MEMBER RECRUITMENT AND CONFERENCE DEVELOPMENT.	610,941
EUROPE (INCLUDING ICELAND & GREENLAND)	1	5		ASME, THROUGH INDEPENDENT CONTRACTORS, PROMOTES DIALOG WITH LOCAL ENGINEERS, CORPORATIONS, EDUCATIONAL INSTITUTIONS, AND TECHNICAL ASSOCIATIONS AS WELL AS PROVIDE LOGISTICAL SUPPORT FOR ASME EVENTS SUCH AS CONTINUING EDUCATION AND WORKSHOPS.	348,269

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	1	3		ASME, THROUGH INDEPENDENT CONTRACTORS, ENGAGES IN THE MARKETING AND PROMOTION OF ASME STANDARDS, CONFORMITY ASSESSMENT PROGRAMS, TRAINING PROGRAMS, JOURNALS, CONFERENCE PROCEEDING, BOOKS AND OTHER PUBLICATION AND PROMOTES MEMBERSHIP IN ASME.	305,199

efile GRAPHIC print - DO I	NOT PROCESS	As Filed Data -					DLN	l: 9349313604	19300	
Note: To capture the full co	ontent of this de	ocument, please se	lect landscape mode	e (11" x 8.5") whe	n printing.					
Schedule I		Grants and C	thar Accietanc	o to Organiz	otions		10	4B No. 1545-0047	<u></u>	
(Form 990)			ther Assistanc	_				2018		
			and Individuals	<del>-</del>	<del>-</del>			<b>4</b> 010		
	Co	mplete if the organiza	tion answered "Yes," o  Attach to Form		, line 21 or 22.			Open to Public		
Department of the Treasury Internal Revenue Service			Inspection							
Name of the organization	LANICAL					Employ	er identifica	tion number		
THE AMERICAN SOCIETY OF MECH ENGINEERS	HANICAL					13-162	23899			
Part I General Informa	ation on Grants	and Assistance				•				
<ol> <li>Does the organization main the selection criteria used to</li> <li>Describe in Part IV the organization</li> </ol>	o award the grants	or assistance?				e, and		☐ Yes	☑ No	
		estic Organizations ar can be duplicated if add		<b>nts.</b> Complete if the o	ganization answered "Yes"	on Form 990, P	art IV, line 2	21, for any recipie	nt	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Descrip noncash <b>a</b> ss		(h) Purpose of or assistance	grant	
(1) THE ASME FOUNDATION INC TWO PARK AVENUE NEW YORK, NY 10016	13-3372934	501(C)(3)	700,000	0				SECTOR OPERAT	TONS	
2 Enter total number of section	on 501(c)(3) and go	overnment organizations	listed in the line 1 table .				<b>&gt;</b>		1	
3 Enter total number of other	organizations listed	d in the line 1 table					<b>•</b>		0	
For Paperwork Reduction Act Notice	e, see the Instruction	ns for Form 990.		Cat. No. 50055	;P		Sche	dule I (Form 990)	2018	

# (5)

(6)

(7)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV

**Return Reference** Explanation

SCHEDULE I, PART I, LINE 2 DURING THE YEAR ENDED JUNE 30, 2019, ASME DID NOT MAKE ANY GRANTS. THE AMOUNTS REPORTED ARE CONTRIBUTIONS TO A 501 (C) (3) ORGANIZATION FOR

USE IN THEIR EXEMPT PURPOSE. Schedule I (Form 990) 2018

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19313	36049	300
Schedule J		С	ompensat	ion Information	00	1B No.	1545-0	0047
(Forr	m 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.					
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.g</u>		instructions and the latest inform	mation.		to Pul ectio	
Nar	ne of the organiz				Employer identificat			
	AMERICAN SOCIET	Y OF MECHANICAL			13-1623899			
Pa	rt I Questi	ons Regarding Compens	ation		13 1023033			
							Yes	No
1a				f the following to or for a person liste ly relevant information regarding the				
		s or charter travel		Housing allowance or residence for	personal use			
		companions		Payments for business use of perso				
		nification and gross-up paymen	ts 🔽	Health or social club dues or initiation				1
	☐ Discretion	nary spending account	Ц	Personal services (e.g., maid, chauf	ffeur, chef)			
b		xes in line 1a are checked, did a all of the expenses described ab		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	<b>1</b> b	Yes	
2				or allowing expenses incurred by all	- 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/	executive Directo	r, regarding the items checked in line	elar			
3	organization's C	EO/Executive Director. Check a	all that apply. Do i	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain i				
	<b>✓</b> Compens	ation committee		Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-co	ntrol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a supp	lemental nonqual	lified retirement plan?		4b	Yes	
C				nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	plicable amounts for each item in Par	t III.			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.				
5	For persons liste		on A, line 1a, did	the organization pay or accrue any				
а	The organization	n?				5a		No
b						5b		No
	If "Yes," on line	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Secti ontingent on the net earnings o		the organization pay or accrue any				
а	The organization	n?				6a		No
b	, -					6b		No
	· ·	6a or 6b, describe in Part III.						
7	For persons liste payments not d	ed on Form 990, Part VII, Secti escribed in lines 5 and 6? If "Ye	on A, line 1a, did es," describe in Pa	the organization provide any nonfixe rt III	d 	7	Yes	
8	subject to the ir	nitial contract exception describ	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," documents of the contract of the contra		8		No
9				presumption procedure described in		9		1.5
For F	Paperwork Redu	iction Act Notice, see the In	structions for Fo	orm 990. Cat. No. 5	50053T Schedule J	(Forn	1 990)	2018

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990. Part VII.

instructions, on row (ii). Do not list any individuals that are not listed on Form 99 <b>Note.</b> The sum of columns (B)(i)-(iii) for each listed individual must equal the to	90, otal	, Part VII. I amount of For	m 990, Part VII, Se	ection A, line 1a, ar	oplicable column ([	)) and (E) amoun	ts for that indi	vidual.
(A) Name and Title			kdown of W-2 and/c compensation	or 1099-MISC	(C) Retirement and other		(E) Total of columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								
								_
	$\exists$							
	$\exists$							
	$\dashv$			<u> </u>				<u> </u>
	$\rfloor$							
	1							

Schedule J (Form 990) 2018	Page <b>3</b>
Part III Supplemental Inform	nation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Return Reference	Explanation
PART I, LINE 1A	CERTAIN BOARD MEMBERS RECEIVE TAXABLE BENEFITS FOR TRAVEL FOR COMPANIONS. ASME PAID FOR THE SOCIAL CLUB DUES FOR THE ASSISTANT

SECRETARY. THIS BENEFIT WAS NOT TAXABLE TO THE RECIPIENTS.

PART I, LINES 4A-B  THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS DURING 2018 THAT ARE REPORTED ON SCHEDULE J, PART II, COLUMN (C): T LOUGHLIN, \$581,785 ELENA GERSTMANN, \$255,280 LUIS RODRIGUEZ, \$131, 123 JOHN KOEHR, \$131, 690 ASME MAINTAINS A SUPPLEMENTAL	
RETIREMENT PLAN FOR CERTAIN INDIVIDUALS. THE FOLLOWING INDIVIDUALS PARTICIPATED IN THE PLAN DURING 2018, WITH THE AMOUNTS SCHEDULE J, PART II, COLUMN (C): THOMAS COSTABILE, \$8,885.	NONQUALIFIED

Return Reference	Explanation
·	THE FOLLOWING INDIVIDUALS RECEIVED DISCRETIONARY, NON-FIXED PAYMENTS DURING 2018 THAT ARE REPORTED ON SCHEDULE J, PART II, COLUMN (B)(II): THOMAS LOUGHLIN, \$43,095 WILLIAM GAROFALO, \$49,991 JOHN DELLI VENNERI, \$49,153 JEFFERY PATTERSON, \$67,416 LAUREL RASO, \$61,864 LUIS RODRIGUEZ, \$34,877 PHILIP DIVIETRO, \$26,043 DENNIS KILLIAN, \$34570 JOSH HEITSENRETHER, \$24,476 ELPIDIO LABRADOR, \$24,823

I (Form 990) 2018

DENNIS KILLIAN

MANAGING DIRECTOR

ELPIDIO LABRADOR

JOHN KOEHR

MANAGING DIRECTOR

MANAGING DIRECTOR

JOSH HEITSENRETHER

MANAGING DIRECTOR

MANAGING DIRECTOR

EXECUTIVE DIRECTOR

THOMAS LOUGHLIN THRU

PHILIP DIVIETRO

112017

(i)

(ii)

(i)

(ii)

(ii)

(i)

(i)

224,227

205,247

200,227

234,542

221,572

28,427

#### **Software ID:**

**Software Version:** 

**EIN:** 13-1623899

Name: THE AMERICAN SOCIETY OF MECHANICAL

(C) Retirement and

other deferred

compensation

14,840

81,064

26,477

14,737

139,875

52,505

(D) Nontaxable

benefits

37,108

40,028

27,267

26,852

26,518

(E) Total of columns

(B)(i)-(D)

314,103

375,117

390,872

301,129

441,080

705,812

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

0

0

0

0

0

0

0

**ENGINEERS** 

(iii)

Other reportable

compensation

Form 990, Schedule J,	Part II - Officers, Directors,	Trustees, Key Employees, a	and Highest Compensated Employees	

34,570

24,823

24,476

26,043

43,095

JOHN DELLI VENNERI GENERAL COUNSEL	(i)	309,840	49,153	3,131	19,250	44,189	425,563	0
	(ii)	0	0	0	0	0	0	0
THOMAS COSTABILE EXECUTIVE DIRECTOR/CEO	(i)	317,751	0	23,424	19,885	16,031	377,091	0
	(ii)	0	0	0	0	0	0	0
WILLIAM GAROFALO CHIEF FINANCIAL OFFICER	(i)	317,592	49,991	20,217	19,250	2,026	409,076	0
	(ii)	0	0	0	0	0	0	0
ELENA GERSTMANN DEPUTY, EXECUTIVE OP	(i)	228,831	0	256,379	12,314	8,218	505,742	0
	(ii)	0	0	0	0	0	0	0
JEFFERY PATTERSON CHIEF OPERATING OFFICER	(i)	336,988	67,416	28,919	16,500	33,920	483,743	0
	(ii)	0	0	0	0	0	0	0
LAUREL RASO ASSOCIATE EXECUTIVE	(i)	277,506	61,864	21,440	178,105	33,272	572,187	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
LUIS RODRIGUEZ ASSOCIATE EXECUTIVE	(i)	146,640	34,877	133,877	16,500	32,752	364,646	0
DIRECTOR	(ii)	0	l	1	l	0	l	1

3,358

23,955

136,901

522

27,072

581,785

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) Bonus & incentive compensation

efile GRAPH	IC print - DO NOT PROCESS   As Filed Data -	DLN: 9349313604	19300
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responsible form 990 or 990-EZ or to provide any Attach to Form 990 or	ses to specific questions on additional information. 990-EZ. Open to Pu	8 ublic
ENGINEERS	amization CIETY OF MECHANICAL e O, Supplemental Information	Employer identification number 13-1623899	er
Return Reference	Explar	ation	
FORM 990, PART VI, SECTION A, LINE 6	ASME IS A MEMBERSHIP ORGANIZATION AND HAS NO STOC	KHOLDERS.	

Return Explanation
Reference

LINE 7A

FORM 990, ASME'S MEMBERS ELECT MEMBERS OF THE ASME BOARD OF GOVERNORS.
PART VI,
SECTION A,

Return Explanation

LINE 7B

FORM 990, DECISIONS BY THE GOVERNING BODY TO CHANGE THE ASME CONSTITUTION ARE SUBJECT TO APPROVAL BY MEMBERS.

SECTION A.

Return

Reference	Explanation
FORM 990,	THE ASME FORM 990 AND SUPPORTING SCHEDULES ARE PREPARED BY AN INDEPENDENT ACCOUNTING FIRM
PART VI,	AND SUBMITTED TO MANAGEMENT FOR REVIEW. ALL REVIEW NOTES ARE CLEARED, AND CHANGES ARE MADE
SECTION B,	. AT THE END OF THE REVIEW PERIOD, THE DRAFT 990 IS MADE AVAILABLE TO THE ASME BOARD OF GO
LINE 11B	VERNORS (BOG) ON THE BOG SECURE WEBSITE. WHEN THE BOG REVIEW PERIOD IS OVER, THE 990 IS PR
	OVIDED TO ASME'S INDEPENDENT ACCOUNTING FIRM FOR ELECTRONIC FILING BY THE DUE DATE

Explanation

Reference	
FORM 990,	ASME HAS ADOPTED A CONFLICT OF INTEREST POLICY WHICH APPLIES TO BOARD MEMBERS, OFFICERS, C
PART VI,	OMMITTEE MEMBERS AND KEY EMPLOYEES OF ASME. ON AN ANNUAL BASIS, INDIVIDUALS COVERED UNDER
SECTION B,	THE CONFLICT OF INTEREST POLICY ARE REQUIRED TO COMPLETE AND SIGN A STATEMENT THAT HE OR S
LINE 12C	HE IS IN COMPLIANCE WITH THE POLICY. IF A CONFLICT IS IDENTIFIED, THE INDIVIDUAL WITH SUCH
	CONFLICT IS PROHIBITED FROM PARTICIPATION IN THE DELIBERATIONS AND DECISIONS IN THE TRANS

**Explanation** 

CONFLICT IS PROHIBITED FROM PARTICIPATION IN THE DELIBERATIONS AND DECISIONS IN THE TRANS
ACTION. THE AUDIT COMMITTEE OVERSEES THE IMPLEMENTATION OF, AND COMPLIANCE WITH, THE CONFL
ICT OF INTEREST POLICY.

E DECISION AND THE RATIONALE OF THE DECISION.

Return

Reference	
FORM 990,	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE EXECUTIVE DIRECTOR INCLUDES A REVIEW B
PART VI,	Y AN INDEPENDENT COMPENSATION CONSULTANT OF COMPARABILITY DATA, INCLUDING COMPENSATION SUR
SECTION B,	VEYS AND FORM 990 DATA FROM SIMILAR ORGANIZATIONS. THIS DATA IS THEN PROVIDED TO THE EXECU
LINE 15A	TIVE DIRECTOR EVALUATION AND STAFF COMPENSATION COMMITTEE (EDESC), A COMMITTEE COMPRISED O
	F INDEPENDENT DIRECTORS, WHO EVALUATE THE DATA AND MAKE A SALARY RECOMMENDATION TO THE BOA
	RD OF GOVERNORS. THE FINAL SALARY DECISION, BASED ON THE RECOMMENDATION OF THE EDESC, IS A
	DDDOVED BY THE BOARD OF COVERNORS, ASME'S CORDORATE COLINSEL CONTEMPORANEOUSLY DOCUMENTS THE

Explanation

Return Explanation
Reference

FORM 990, THE ASME CONSTITUTION, BY-LAWS, SOCIETY POLICIES INCLUDING THE CONFLICT OF INTEREST POLICY PART VI, AND THE ASME ANNUAL REPORT CAN BE FOUND ON THE ASME WEBSITE.

SECTION C, LINE 19

Return Explanation Reference

FORM 990. ASME INDIA REVENUE -305.200. PENSION ADJUSTMENTS -3.490.707.

PART XI. LINE 9:

**SCHEDULE R** 

(Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

NEW YORK, NY 10016 13-6128507

TWO PARK AVENUE

NEW YORK, NY 10016 13-3372934

(2)THE ASME FOUNDATION

## **Related Organizations and Unrelated Partnerships**

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

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

DLN: 93493136049300 OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

N/A

N/A

THE AMERICAN SOCIETY OF MECHANICAL ENGINEERS				13-1623899			
Part I Identification of Disregarded Entities Complete i	f the organization answ	ered "Yes" on Form	990, Part IV, line 3	33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
(1) ASME INNOVATIVE TECHNOLOGIES INST LLC 1828 L STREET NW SUITE 810 WASHINGTON, DC 200365104 20-1285874	CODE DEVL	NY	620		THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
(2) ASME STANDARDS TECHNOLOGY LLC TWO PARK AVENUE NEW YORK, NY 10016 20-1471292	CODE DEVL	NY	766,715		THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
(3) ASME ASIA PACIFIC LLC UNIT 07B TWIN TOWERS BEIJING, CHAOYANG CH 20-5946886	TRAINING	СН	610,941		THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
(4) ASME ENGINEERING FOR CHANGE LLC TWO PARK AVENUE NEW YORK, NY 10016 27-0287469	TRAINING	NY	410,511		THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
(5) ASME EAST ASIA HOLDING LLC TWO PARK AVENUE NEW YORK, NY 10016 11-1239908	TRAINING	NY	0	0	THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
(6) ASME PERSONNEL CERTIFICATION LLC TWO PARK AVENUE NEW YORK, NY 10016 47-4870610	TRAINING	NY	3,681		THE AMERICAN SOCIETY OF MECHANICAL ENGIN		
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ons Complete if the orga	anization answered '	"Yes" on Form 990	, Part IV, line 34	because it had one or	more	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3)		Section (13) co	g) n 512(b) ontrolled tity?
(1)ASME AUXILIARY	EDUC LOANS	NY	501(C)(3)	12B, II		Yes	No No
TWO PARK AVENUE							""

GRANTS

NY

501(C)(3)

12B, II

No

(a)		(b)	(c)	(d)	(e)	(f)	(g)	1	h)	l ø	1	(i)	1	(k)
(a) Name, address, and related organizat	EIN of ion	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predomini income(re unrelate excluded tax und sections 514)	nant Share elated, ed, from der 512-	of Share of	Disprop	ortionate ations?	(i) Code V-I amount in 20 of Schedule (Form 10	K-1 (65)	manag partne	ging ov	ercentaç wnershi
								Yes	No			Yes	No	
		C	T	t Cananlata	:6 440 0 0 00	!+!	manuagad IIVa		O	00 0-4	TV/ I	1:		
t IV Identification of Related Or because it had one or more re (a) Name, address, and EIN of related organization	rganizations Taxable as a a elated organizations treated a (b)  Primary activity	s a corporation ( Le dom (state o	on or tru c) gal nicile r foreign	st during th	if the org ne tax year (d) controlling entity	ganization a ar. (e) Type of entity (C corp, S corp or trust)	(f) Share of total	Share	(g) e of end- year assets	of- P	(h) ercent	tage	Secti	(i) ion 512 control entity?
because it had one or more re  (a)  Name, address, and EIN of related organization	lated organizations treated a	s a corporatio	on or tru c) gal nicile r foreign ntry)	Direct e	ne tax yea (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total , income	Share	(g) e of end- year assets	of- P	(h) ercent wners	tage ship	Secti (13) •	s No
because it had one or more re  (a)  Name, address, and EIN of related organization  SME INDIA PRIVATE LIMITED  ST FLOOR MAIN ROAD CHIRAGE	elated organizations treated a	s a corporation ( Le dom (state o	on or tru c) gal nicile r foreign ntry)	Direct e	(d) controlling entity  ERICAN Y OF	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) e of end- year	of- P	(h) ercent	tage ship	Secti (13)	control entity? s No
because it had one or more re  (a)  Name, address, and EIN of related organization  SME INDIA PRIVATE LIMITED  ST FLOOR MAIN ROAD CHIRAGE	lated organizations treated a	s a corporatio	on or tru c) gal nicile r foreign ntry)	Direct e  THE AM SOCIET MECHAI	(d) controlling entity  ERICAN Y OF	(e) Type of entity (C corp, S corp	(f) Share of total , income	Share	(g) e of end- year assets	of- P	(h) ercent wners	tage ship	Secti (13) •	controll entity? s No
because it had one or more re  (a)  Name, address, and EIN of related organization  ME INDIA PRIVATE LIMITED  ST FLOOR MAIN ROAD CHIRAGE	lated organizations treated a	s a corporatio	on or tru c) gal nicile r foreign ntry)	Direct e  THE AM SOCIET MECHAI	(d) controlling entity  ERICAN Y OF	(e) Type of entity (C corp, S corp	(f) Share of total , income	Share	(g) e of end- year assets	of- P	(h) ercent wners	tage ship	Secti (13) •	controllentity?
because it had one or more re  (a)  Name, address, and EIN of related organization  SME INDIA PRIVATE LIMITED  ST FLOOR MAIN ROAD CHIRAGE	lated organizations treated a	s a corporatio	on or tru c) gal nicile r foreign ntry)	Direct e  THE AM SOCIET MECHAI	(d) controlling entity  ERICAN Y OF	(e) Type of entity (C corp, S corp	(f) Share of total , income	Share	(g) e of end- year assets	of- P	(h) ercent wners	tage ship	Secti (13) •	controll entity? s No
because it had one or more re  (a)  Name, address, and EIN of related organization  SME INDIA PRIVATE LIMITED  ST FLOOR MAIN ROAD CHIRAGE	lated organizations treated a	s a corporatio	on or tru c) gal nicile r foreign ntry)	Direct e  THE AM SOCIET MECHAI	(d) controlling entity  ERICAN Y OF	(e) Type of entity (C corp, S corp	(f) Share of total , income	Share	(g) e of end- year assets	of- P	(h) ercent wners	tage ship	Secti (13) •	controll entity? s No
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Schedule R (Form 990) 2018					Pa	age <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answere	ed "Yes" on Form 990, Par	rt IV, line 34, 35b	, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more	related organizations listed ir	n Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> b	Yes	
c Gift, grant, or capital contribution from related organization(s)				1c	Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s)				<b>1</b> d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				<b>1</b> f		No
g Sale of assets to related organization(s)				<b>1</b> g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				<b>1</b> i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)				1m	Yes	T
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
$oldsymbol{o}$ Sharing of paid employees with related organization(s)				10	Yes	
p Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses				<b>1</b> q	Yes	
r Other transfer of cash or property to related organization(s)				1r	Yes	$\vdash$
${f s}$ Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including covered r	relationships and tra	nsaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a			
1)ASME INDIA PRIVATE LIMITED	M	305,199	FMV			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity		sections 512-		section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	?	<b>(k)</b> Percentage ownership
			514)	Yes	No		<u> </u>	Yes	No		Yes	No	ı
										Schedul	e R (Form	1 990	0) 2018

chedule R (Form 990) 2018							
Part VII	Supplemental Information						
	Provide additional infor	mation for responses to questions on Schedule R (see instructions).					
Return Reference		Explanation					

#### **Additional Data**

NEW YORK, NY 10016 47-4870610

#### Software ID: Software Version: **EIN:** 13-1623899 Name: THE AMERICAN SOCIETY OF MECHANICAL **ENGINEERS** Form 990, Schedule R, Part I - Identification of Disregarded Entities (c) (e) (a) (b) (d) (f) Legal Domicile End-of-year Name, address, and EIN (if applicable) of disregarded entity Total income Direct Controlling Primary Activity (State assets Entity or Foreign Country) (1) ASME INNOVATIVE TECHNOLOGIES INST LLC CODE DEVL NY 620 312,344 THE AMERICAN SOCIETY OF 1828 L STREET NW SUITE 810 MECHANICAL ENGIN WASHINGTON, DC 200365104 20-1285874 CODE DEVL 766,715 951,049 THE AMERICAN SOCIETY OF (1) ASME STANDARDS TECHNOLOGY LLC NY TWO PARK AVENUE MECHANICAL ENGIN NEW YORK, NY 10016 20-1471292 (2) ASME ASIA PACIFIC LLC TRAINING CH 610,941 42,410 THE AMERICAN SOCIETY OF **UNIT 07B TWIN TOWERS** MECHANICAL ENGIN BEIJING, CHAOYANG CH 20-5946886 **TRAINING** NY 942.221 THE AMERICAN SOCIETY OF (3) ASME ENGINEERING FOR CHANGE LLC 410,511 TWO PARK AVENUE MECHANICAL ENGIN NEW YORK, NY 10016 27-0287469 TRAINING 0 THE AMERICAN SOCIETY OF (4) ASME EAST ASIA HOLDING LLC NY 0 TWO PARK AVENUE MECHANICAL ENGIN NEW YORK, NY 10016 11-1239908 (5) ASME PERSONNEL CERTIFICATION LLC TRAINING NY 3,681 15,444 THE AMERICAN SOCIETY OF TWO PARK AVENUE MECHANICAL ENGIN