Fолт	99	n l	Return of Organization Exempt From Ir	come Tax	(OMB No. 1545-0047				
		~~~	Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (ex	cept private four	ndations)	2019				
	-	Do not enter encial excurity numbers on this form as it may be made public.								
	extment of the mai Revenue	Open to Public Inspection								
Ā	For the 2	019 calend	► Go to www.irs.gov/Form990 for instructions and the lates dar year, or tax year beginning Jul 1 , 2019, and endir		n 30	, 20 2 0				
В	Check if ap	plicable:	C Name of organization AMERICAN COUNCIL OF ENGINEERING	COMPANIES	D Employ	er identification number				
	Address c	nange	Doing business as		52-074	45115				
	Name char	nge	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telepho	ne number				
	initial retun	n	1015 15TH STREET, NW, 8TH FLOOR		(202)	347-7474				
	Final return	/terminated	City or town, state or province, country, and ZIP or foreign postal code							
=	Amended i		WASHINGTON, DC 20005			scelpts \$16,855,534.				
Ц	Application		F Name and address of principal officer:	1	-	subordinates? Yes No				
	Tax-exemp		LINDA BAUER DARR, 1015 15th Street, NW, 8th Ploor, Washington, DC 29  ☐ 501(c)(3) S01(c) (6) ◀ (Insert no.) ☐ 4947(e)(1) or ☐ (527)			included?   Yes   No . (see instructions)				
_			cec.org	H(o) Group e		•				
			Corporation ☐ Trust ☐ Association ☐ Other ►			f legal domicile: DC				
	art I	Summa								
	1 B	riefly des	cribe the organization's mission or most significant activities: THE V	DICE OF AMERI	CA'S ENG	SINBERING INDUSTRY.				
8										
nan			**************************************							
Ž	2 0	heck this	box ► ☐ if the organization discontinued its operations or disposed	of more than	1 1	ts net assets.				
Ĝ	3 N	lumber of	voting members of the governing body (Part Vi-line 1a)	D	3	61				
SS.			independent voting members of the governing body (Part VI line 1)	)=\ <u>S</u>	4	61				
Attie			per of Individuals employed in calendar year 2019 (Part V, line 2a)	ioi '	6	53				
Activities & Governance	i .		per of volunteers (estimate if necessary)	ازی ای	7a	4,400				
4			ted business taxable income from Form 990-T, line 39		7b	<u>260,599.</u> 0.				
	<u> </u>	et unicia	OGDEN,	Prior Year		Current Year				
	8 0	Contributio	ons and grants (Part VIII, line 1h)		776.	434,790.				
Revenue			ervice revenue (Part Vill, line 2g)	536.	14,759,097.					
e e		-	t income (Part VIII, column (A), lines 3, 4, and 7d)	713.	464,836.					
Œ	11 C	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	115,	376.	425,107.				
	12 T	otal reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,642,	401.	16,083,830.				
	ľ		d similar amounts paid (Part IX, column (A), lines 1-3)	625,	926.	983,500.				
			aid to or for members (Part IX, column (A), line 4)			<del></del>				
8	1		ther compensation, employee benefits (Part IX, column (A), lines 5–10)	7,522,	122.	7,721,920.				
Expenses	1		al fundralsing fees (Part IX, column (A), line 11e)							
3			raising expenses (Part IX, column (D), line 25) ►enses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,708,	BU3	6,875,370.				
			nses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,856,		15,580,790.				
			ess expenses. Subtract line 18 from line 12		551.	503,040.				
5 %				Beginning of Curr		End of Year				
Net Assets or Fund Balances	20 T	otal asset	ts (Part X, line 16)	12,703,	624.	13,135,016.				
A A	21 T		ties (Part X, line 26)	2,365,	002.	2,515,008.				
<u> 25</u>	22 N		or fund balances. Subtract line 21 from line 20	10,338,	622.	10,620,008.				
_	art II		re Block			<del></del>				
Uni	der penaltie e, correct, a	es of perjury, and complete	, I declare that I have examined this return, including accompanying schedules and stat a. Declaration of preparer (other than officer) is based on all information of which prepar	ements, and to the er has any knowled	best of my lge.	knowledge and belief, it is				
			& Man Pour		3/	30/2021				
Sig	ın 📗	Signati	ure of officer	Date	511.	7				
He	re	LIM	DA BAUER DARR, PRESIDENT/CEO		<u> </u>	0/000				
		<del>'</del>	r print name and title		/					
Pa	id	PdnVType Michael	110 A \ 1 V	Date	Check	] If PTIN P00895728				
	eparer	ļ	CLASSION ADDONAL BY ALL	10 20 20	self-emplo	lyeu				
	e Only	Firm's nen	ne CLIFTONLARSONALLEN LLP  fress > 901 North Glebe Road, Ste 200, Arlington, VA 22203			L-0746749				
		Firm's add	this return with the preparer shown above? (see Instructions)	Phone	no. 5/1					
			Inis return with the preparer shown above r (see instructions)	<del></del>	<del></del>	. XYes No				
- UI	· ahs (A)	ur ueanci	inii Vor itonosi soe nie sebatare ilianinerione:			1 0000 000 (2015)				

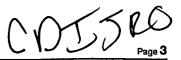
3-35

3

Part III	
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	THE BUSINESS ASSOCIATION AND VOICE OF AMERICA'S ENGINEERING INDUSTRY, REPRESENTING
	THOUSANDS OF INDEPENDENT U.S. ENGINEERING COMPANIES ENGAGED IN THE DEVELOPMENT
<u>C</u>	OF TRANSPORTATION, WATER, AND OTHER PUBLIC AND COMMERCIAL FACILITIES.
F	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	f "Yes," describe these new services on Schedule O.
s	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
e	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a (	(Code:) (Expenses \$Including grants of \$) (Revenue \$)
	GOVERNMENT ADVOCACY
7	THE COUNCIL UNDERTAKES A WIDE RANGE OF PUBLIC POLICY AND ADVOCACY
	ACTIVITIES. IT LOBBIES CONGRESS AND FEDERAL AGENCIES FOR PASSAGE OF
	LEGISLATION, POLICIES, AND PROCEDURES THAT PROMOTE AND PROTECT THE ENGINEERING INDUSTRY.
-	
-	
-	
_	
_	
	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$)
	BUSINESS RESOURCES AND EDUCATION
	THE COUNCIL SERVES AS A PRIMARY BUSINESS RESOURCE FOR THE ENGINEERING INDUSTRY, PROVIDING A WIDE RANGE OF BUSINESS EDUCATION PRODUCTS AND
_	SERVICES INCLUDING MAJOR CONVENTIONS AND SEMINARS, PUBLICATIONS,
_	CONTRACT DOCUMENTS, AND BUSINESS FORUMS.
-	
_	
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-	
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-	
4c (	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	COMMUNICATIONS
3	THE COUNCIL COMMUNICATES WITH ITS MEMBERS AND INTERESTED OUTSIDE
-	PARTIES THROUGH A WEEKLY NEWSLETTER, BI-MONTHLY MAGAZINE, WEBSITE
-	AND SOCIAL MEDIA. IT ALSO CONDUCTS AN ENGINEERING EXCELLENCE AWARDS
F	PROGRAM AND OTHER RECOGNITION ACTIVITIES.
-	
-	
-	
-	
-	Other was a series (Donathe on Schodule C.)
	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

Form 980 (2019)

Page 2



Part	Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2		×
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		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
c	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		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
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	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	×	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
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		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	×	

<b>Part</b>	V Checklist of Required Schedules (continued)			
			Yes	No
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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	ļ
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		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
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):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u>×</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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	<u></u>	×
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, Ilne 1	34	×	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	×	<u> </u>
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
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	×	
Part				
	Check If Schedule O contains a response or note to any line in this Part V	<u></u>	Yes	No.
4.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	144	162	NO
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	100		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	1c	MARKET BE	1000000

Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements. Statements on the calendar year and the great statement of the comparison of the calendar year and a statement of the calendar year, and the calendar year, and the calendar year, as filed a Form 990-T for this year? If "Yos" to filed 3b, provide an explanation on Schadule O 3 db X a filed and the filed and the origin country (such as a bank account, securities account, or other financial accountry?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry?  5a Was the organization aperty to a prohibited tax shelter transaction at any time during the tax year?  5b Was the organization aperty to a prohibited tax shelter transaction at any time during the tax year.  5c Did any quantities of the organization that it was or is a party to a prohibited tax shelter transaction?  6b If "Yes" to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Drasmactions shall not be good and services provided to the payor?  6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization statement or the value of the goods or services provided?  6c Did the organization statement or the year year of the value of the goods or services provided?  6c Did the organization statement or the yea	Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Statements, field for the calendar year ending with or within the year covered by this return   2a   53   28   ×    Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see Instructione)   3b   ×    Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see Instructione)   3b   ×    If Yes, has it filed a Form 990-7 for this year? If *No* for file 3b, provide an explanation on Schedule O   3b   ×    4a At any time during the calendar year, did the organization have an Interest in, or a signature or other authority over, a financial account in a foreign country lesuch as a bank account, scourties account, or other financial accounts   5b   ×    5b   *Yes,* the sit filed a Form 990-7 for this year? If *No* for file 3b, provide an explanation on Schedule O   3b   ×    4a At any time during the calendar year, did the organization have an Interest in, or a signature or other authority over, a financial account in a foreign country lesuch country   5c   10c   10				Yes	No
b If at least one is reported on line 2a, did the organization file all required rederal employment tax returns? Note if the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  If "Yee," has it filed a Form 990-T for this year? If "No" to fine 3b, provide an explenation on Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country   which is a bank account, scourtles account, or other financial accountly?  If "Yee," there the name of the foreign country   which is a bank account, scourtles account, or other financial accountly?  If "Yee is there the name of the foreign country   which is a bank account, scourtles account, or other financial accountly?  If "Yee is there the name of the foreign country   which is a party to a prohibited tax shelter transaction at any time during the tax shelter transaction?  If "Yee is line Sa or 5b, did the organization file form 8886-T?  But any time during the account is file organization as party to a prohibited tax shelter transaction?  If "Yee," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions and express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  If "Yes," did the organization notify the donor of the value of the goods or services provided?  Organizations that may receive deductible contributions under section 170(c).  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the year, pay remriting, directly or indirectly, on a personal benefit contract?  If "Yes," the file did the provide the provided the or	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions)  3		Statements, filed for the calendar year ending with or within the year covered by this return 2a 53			
3a   X   1   1   1   1   1   1   1   1   1	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	L
b If "Yes," has it flied a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the celendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions from 114 foreign Celebration 114 foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions from 114 foreign Celebration file form 8886-17  Do bid organization review a contribution that it was represented the organization and services provided to the payor?  b if "Yes," did the organization notity the donor of the value of the goods or services provided?  c Did the organization seel account filing for foreign benefit contract?  b if "Yes," did the organization notity the donor of the value of the goods or services provided?  c Did the organization receive any premiums, diversity or indirectly, to pay premiums on a personal benefit contract?  b if "Yes," indicate the number of Forms 8282 filed during the year  c Did the organization received a contribution of qualified intellectual property, did the organization file a Form 8592 is required?  b if the organization received a contribution of undiffed intellectual property, did the organization file a Form 8592 is required for the organization file and promition file and promition		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a At any time during the calender year, did the organization have an interest in, or a signature or other authority over, a financial account in a rotegin country [wash as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country №  See instructions for filing requirements for FIRCEN Form 114, Report of Foreign Bank and Financial accounts FBAR).  Was the organization a parry to a prohibited tax shelter transaction at any time during the tax year?  b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line Sa or 5b, did the organization file Form 8986-17?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization lindude with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible accountibutions under section 170(c).  b If "Yes," did the organization notify the donor of the value of the goods or services provided for the payor?  C Id the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  b If "Yes," findicate the number of Forms 8282 filed during the year  c If "Yes," indicate the number of Forms 8282 filed during the year  c If the organization received a contribution of qualified intellectual property, did the organization file a Form 1686-07 for gradient intellectual property, did the organization file a Form 1686-07 for gradiation received a contribution of qualified intellectual property, did the organization file a Form 1686-07 for gradiation received a contribution of qualified intellectual property, did the organization file a Form 1686-07 for gradiation received a contribution of qualified intellectual property, did the organization	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	X	L
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d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization ceieve any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  10 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a Gross Income from members or shareholders  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12 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.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  13 If Yes, "has i	C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  ff the organization received a contribution of qualified intellectual property, did the organization file Form 1098-07  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization maintaining donor advised funds.  9 Sponsoring organization make eary taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  10 Initiation fees and capital contributions included on Part VIII, line 12  11 Gross income from members or shareholders  12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 501(c)(1/2) organizations. Enter:  13 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13 Section 501(c)(2) qualified nonprofit health insurance issuers.  14 In the instructions for additional information the organization must report on Schedule O.  14 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  15 If "Yes," has it filed a Form 720 to report these payments? if "No," provide an explanation on Schedule O.  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payments (s) fe		required to file Form 8282?			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7g h fit the organization received a contribution of cars, boats, airplenes, or other vehicles, did the organization file Form 8899 as required?  7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make early taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  8 Section 501(c)(7) organizations. Enter:  10 Initiation fees and capital contributions included on Part VIII, line 12  10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Gross income from members or shareholders  11 Section 501(c)(12) organizations. Enter:  a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  13 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.  5 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  13b I did the organization receive any payments for indoor tanning services during the tax year?  14a Views, "has it filed a Form 720 to report these payments? if "No," provide an explanation on Schedule O.  14b I sthe organization an educational institution subject to the section 4968 excise tax on net invest	d	If "Yes," Indicate the number of Forms 8282 filed during the year			
fithe organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organization make any taxable distributions under section 49667  Bya bid the sponsoring organization make any taxable distributions under section 49667  Bya bid the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a initiation fees and capital contributions included on Part VIII, line 12  Bya cross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from members or shareholders  Bya cross income from other sources (Do not net amounts due or pald to other sources against amounts due or received from them.)  Section 501(c)(12) organizations the received or accrued during the year  Bya cross income from other sources (Do not net amounts due or pald to other sources against amounts due or received from them.)  Section 501(c)(29) qualifled nonprofit health insurance Issuers.  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.  Enter the amount of reserves on hand  Bya cross income from 720 to report these payments? If "No," provide an explanation on Schedule O.  Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			<u> </u>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Bab Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Is the organization licensed to issue qualified health plans in more than one state?  Section 501(c)(29) qualified nonprofit health insurance Issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Did the organization is licensed to issue qualified health plans in more than one state?  Did the organization receive any payments for indoor tanning services during the tax year?  Ital X  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section	f				L
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sponsoring organization have excess business holdings at any time during the year?	h	-		525,000	120.50
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 49667 . 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 . 10a 10b 11 Section 501(c)(12) organizations. Enter: a Gross recelpts, 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 11b 11b 11b 11b 11c 11b 11c 11b 11c 11c	8				
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12	9				
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross Income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 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.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 15 is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	_	,		<u> </u>	├
a Initiation fees and capital contributions included on Part VIII, line 12			9b	1222	With the last
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10b  Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  13 Section 501(c)(29) qualifled nonprofit health insurance Issuers.  Is the organization licensed to issue qualifled health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  Did the organization receive any payments for Indoor tanning services during the tax year?  If "Yes," has it filled a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  14b  If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
11 Section 501(c)(12) organizations. Enter: a Gross Income from members or shareholders	_				
a Gross Income from members or shareholders	-				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		1 1			
against amounts due or received from them.)	a				
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Þ	and the second s			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	40-		420		
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.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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 parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			128		1
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.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  15 is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.  is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.  is the organization an educational institution subject to the section 4968 excise tax on net investment income?		• • • • • • • • • • • • • • • • • • • •	120	1-325-5500	ERESES
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	a	· · · · · · · · · · · · · · · · · · ·			2855
the organization is licensed to issue qualified health plans	_	· · · · · · · · · · · · · · · · · · ·			
c Enter the amount of reserves on hand	D				
Did the organization receive any payments for indoor tanning services during the tax year?	c	· · · · · · · · · · · · · · · · · · ·			
b if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  15 is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  16 if "Yes," see instructions and file Form 4720, Schedule N.  18 is the organization an educational institution subject to the section 4968 excise tax on net investment income?			142	TERRITOR'S	×
<ul> <li>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?</li> <li>If "Yes," see instructions and file Form 4720, Schedule N.</li> <li>Is the organization an educational institution subject to the section 4968 excise tax on net investment income?</li> <li>16</li> </ul>	_				<del>  ``</del>
excess parachute payment(s) during the year?					<del>                                     </del>
If "Yes," see instructions and file Form 4720, Schedule N.  16 is the organization an educational institution subject to the section 4968 excise tax on net investment income?  16			15		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
CONTRACT OF THE PARTY OF THE PA	16		16		0.00
		If "Yes," complete Form 4720, Schedule O.			

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 to response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change.	hroug s on S	ih 7b below, Schedule O.	, and See in	for a struct	"No" tions.
						$\blacksquare$
Section	on A. Governing Body and Management					
		ـ م ا	دم ا		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	<u>1a</u>	61			
	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 on Schedule O.					
L	Enter the number of voting members included on line 1a, above, who are independent .	1b	61			
_						
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?			2		×
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or o	ther p	erson?.	3		×
4	Did the organization make any significant changes to its governing documents since the prior For	m 990	) was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's a	issets? .	5	<u> </u>	×
6	Did the organization have members or stockholders?	• •		6	×	<b>_</b>
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?			7a	×	
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?	l by) 	members,	7b		×
8	Did the organization contemporaneously document the meetings held or written actions ur					
	the year by the following:					
а	The governing body?			8a	×	
Ь	Each committee with authority to act on behalf of the governing body?			8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann the organization's mailing address? If "Yes," provide the names and addresses on Schedule	<u>o</u> .		9	<u>L</u>	×
Secti	on B. Policies (This Section B requests information about policies not required by the	e Int	ernal Rever	ue C		
				40	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	<del>                                     </del>	<u>×</u>
Ь	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exen	npt pu	ırposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef		ng the form?	11a	220226	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	٠. ٠		12a	×	<b>├</b> ─
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy	/? If "Yes,"	12c	×	
13	Did the organization have a written whistleblower policy?			13	×	
14	Did the organization have a written document retention and destruction policy?			14	X	S. 10.000
15	Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the deliberation.					
	The organization's CEO, Executive Director, or top management official			15a	×	L
b	Other officers or key employees of the organization			15b	×	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?	ilar a	rrangement	16a		×
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization					
•	participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to sa	feguard the	16b		
Secti	on C. Disclosure			1		
17	List the states with which a copy of this Form 990 is required to be filed ▶			<u> </u>		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable	e), 99	30, and 990-			
	(3)s only) available for public inspection. Indicate how you made these available. Check all the	chedi	ıle O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing doc and financial statements available to the public during the tax year.					olicy
20	State the name, address, and telephone number of the person who possesses the organization barry DOYLE, VP FINANCE, 1015 15TH STREET, NW, 8TH FL, WASHINGTON					7474

Part VII	Compensation of Officers, Directors	, Trustees, Key Employees	, Highest Compensated	<b>Employees, and</b>
	Independent Contractors			

# Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

Check this box if neither the organization not any related organization compensated any current officer, director, or trustee

☐ Check this box if neither the organization no	any relate	d orga	aniz			ompe	nsa	ted any current	officer, director,	or trustee.
		(C)								
(A)	(B)	ا			ition	than o		(0)	(E)	(F)
Name and title	Average					is both		Reportable	Reportable	Estimated amount
	hours	office	er and	dad	irect	or/trust		compensation	compensation	of other
	per week (list any	요골	ā	Q	Key employee	Highest oc employee	2	from the organization	from related organizations	compensation from the
	hours for	쿭	ŧ	8	yer	8 8	Forme	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related organizations	용률	ğ.	] `	뤛	8 8	"			related organizations
	below	्रह्म	문		ye.	ð				
	dotted line)	Individual trustee or director	Institutional trustee			compensated se				
			ă			曹	1			
(1) LINDA BAUER DARR	40.00								<u> </u>	
PRESIDENT & CEO	0.10			×		L		640,230.	0.	48,797.
(2) STEVEN HALL	40.00									
SENIOR VP, ADVOCACY				×				273,190.	0.	79,380.
(3) DAPHNE BRYANT	30.00									
SENIOR VP, MEMBERSHIP & MO SERVICES	10.00			×				283,308.	0.	44,130.
(4) LAURA O'NEILL KAUMO	40.00									
C00			匚	×				279,170.	0.	24,920.
(5) GREGORY KNOPP	40.00			i						
VP AIR & MO SERVICES		ļ		_		×	×	243,240.	0.	46,011.
(6) MICHAEL PRAMSTALLER	40.00					ł				
SENIOR VP, MEETINGS EXHIBITS & AWARDS			_	×		ļ	_	185,513.	0.	43,114.
(7) MARIE TERNIEDEN	40.00									
SENIOR VP, BRE			Ц.	×	L_	ļ	L	196,861.	0.	30,812.
(8) KATHARINE MOTTLEY	40.00									
VP TAX & REGULATORY AFFAIRS			<u> </u>	_	<u> </u>	×		195,259.	0.	31,020.
(9) MATTHEW REIFFER	40.00		ľ	ļ						
VP TRANSPORTATION PROGRAM	ļ			<u> </u>		×		185,277.	0.	37,142.
(10) CHARLES KIM	40.00			l						
GENERAL COUNSEL & CORPORATE SECRETARY				×	_			180,788.	0.	38,077.
(11) LYNN SCHLOESSER	40.00									
DIR. ENVIRONMENTAL & ENERGY PROGRAMS			_	<u> </u>	<u> </u>	×		165,676.	0.	46,049.
(12) ERIN MCLAUGHLIN	40.00									
VP PRIVATE MARKET			_	_	L.	×		181,032.	0.	27,128.
(13) BARRY DOYLE	40.00			l.,						
VP FINANCE			L.,	×	ļ.,		$\Box$	158,877.	0.	39,210.
(14) MELISSA THOMPSON	40.00									_
CORPORATE SECRETARY	L			×	L_	لــــا	×	152,262.	0.	14,542.

riustees,	Veh I	zmį	DIO	yee	s, an	<u>a r</u>	ngnest Compe	nsated Em	bioi	rees (continued)
(B) Average hours per week	box, office	do not check more than one box, unless person is both an officer and a director/trustee)  Reportable compensation compens				compensation from related	d on	(F) Estimated amount of other compensation		
(list any hours for related organizations below dotted line)	ndrvidual trustee rr director	nstitutional trustee	Micer	(ey employee	lighest compensated imployee	ormer	organization (W-2/1099-MISC)			from the organization and related organizations
5.00	×		×				0.	2,45	51.	0.
5.00	×		×				0.		0.	0.
5.00	×		×				0.		0.	0.
5.00	×		×				0.		0.	0.
5.00	×		×				0.	62	25.	0.
5.00	×		×				0.		0.	0.
5.00	×		×				0.	7;	35.	0.
5.00	×		×				0.		0.	0.
1.00	×		×				0.		0.	0.
1.00	×		×				0.		0.	0.
5.00	×		×				0.		0.	0.
		•	•	•	•	<b>&gt;</b>		3,8		550,332.
		•	•	•	•			3 8	$\rightarrow$	<u>0.</u> 550,332.
t not limited				ted	above		<u> </u>			
officer, dire	for s	uch	ind	e, k ividi	key e ual	•				Yes No
e sum of re greater th	portal an \$	ble ( 150,	000	npei )? I	nsatio	on a s,"	nd other compe complete Sche	nsation from dule J for s	the such	4 ×
								tion or indivi	dual	5 ×
<del></del>										
hest compo ort compan	ensati sation	ed n for	inde r the	e ca	ndent lenda	co r ye	ontractors that in ar ending with or	eceived mo within the o	re ti rgani	han \$100,000 of zation's tax year.
dress							(B) Description of sen	vices	C	(C) Compensation
						_				414,158.
						-				192,933.
PL, BET	USan	A,	עויז	۷(	)OT /	PK	DAMAIT IMAGO	EMENT		104,167.
						th	nose listed abov	e) who		
	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00 5.00 5.00 5.00 5.00 1.00 5.00 1.00 1	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00  5.00  5.00  5.00  5.00  1.00  5.00  X  5.00  X  5.00  X  5.00  X  5.00  X  6.00  A  6.00	(8)  Average hours per week (list any hours for related organizations below dotted line)  5.00  5.00  5.00  5.00  5.00  5.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00  5.00  5.00  5.00  7.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8.00  8	(B) Average hours per week (list any hours for related organizations below dotted line)  5.00  5.00  5.00  5.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00  7.00 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Average hours per weak (glist any hours for related organizations below dotted line)    5.00

Part	VIII	Statement of Revenue Check if Schedule O contains a	reenon	se or note to ar	ny line in this Pa	rt VIII		🗖
		CHECK II SCHOOLIG O CORRAITS A	гезроп	Se of flote to al	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tex under sections 512–514
2 2	1a	Federated campaigns	1a				4 4 4 6 6	- 1 m = 1
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b			* *	h ~ ≠ 5 b	**************************************
교	C	Fundraising events	10					
₹ <u>₹</u>	d	Related organizations	1d					
हैं हैं।	<u> </u>	Government grants (contributions			- 1 made		- 7	
ž E		All other contributions, gifts, grants						
ig Si	'	and similar amounts not included above		434,790.				
日日	_	Noncash contributions included in	<del></del>	131,730.				
들의	9	lines 1a-1f	1g	ls.				F
Sel	h	Totai. Add lines 1a-1f		<u> </u>	434,790.			3 1 1 1 1 1 1 1
		Total: Add into 14 Tr	• •	Business Code			74.3.7	12.5
92	2a	MEMBERSHIP DUES		900099	11,931,835.	11,931,835.	0.	0.
اء څ	b	MEETINGS & SEMINARS		900099	2,339,341.	2,339,341.	0.	0.
ie ge	C	SPONSORSHIP REVENUE		900099	206,560.	0.	0.	206,560.
E ē	d	PUBLICATION SALES		900099	77,804.	77,804.	0.	0.
E &	e	ADVERTISING		541800	203,557.	0.	203,557.	0.
Program Service Revenue	4	All other program service revenue		341000	203,337.		203,337.	
٩	g	Total. Add lines 2a-2f		<b>•</b>	14 759 097	J. 19 4. 3	CONT. EX TONE	
$\rightarrow$	3	Investment income (including di		<del></del>		y . 2/2 3		
	3	•			344,806.	٥.	٥.	344,806.
	4	other similar amounts)						
j	5	Royalties	-		63,962.	0.	0.	63,962.
		( O R		(ii) Personal				اء و ا
	6а	Gross rents Ca						
	b	Less: rental expenses 6b			- ·		e	
	c	Rental income or (loss) 6c						O. S. rates . T. S. S.
	d	Net rental income or (loss)		🕨				
1	7a	Gross amount from 0 900	u itioa	(ii) Othor	14 th 11 th			3.0
-		sales of assets			<b>1</b>			
		other than inventory 7a 891	,734.		The state of the state of		the dual was said	المناس المناسبة
<u>o</u>	b	Less: cost or other basis				The same of	- 1 E 1	3 3 3
Ę		and sales expenses . 7b 771	,704.					Takan da San Jaka
Š	C	Gain or (loss) 7c 120	,030.	<u> </u>	4-6	2.3		F-10 A
Other Revenue	d	Net gain or (loss)		<u> ▶</u>	120,030.	0.	0.	120,030.
‡	8a	Gross income from fundraising	3				4	
Ü		events (not including \$	-		1 1 1 m	A THE CALL	3.0	
		of contributions reported on line			The second			- or retaining
		1c). See Part IV, line 18	83		The second secon		Paul Control	01.70 000
	b	Less, direct expenses	Ub	L	The same			A 100
	С	Net income or (loss) from fundrals		ents <b>&gt;</b>	The same and the same		The State of the S	15 to 150 150 150
	9a	Gross income from gaming	- 1					
	١.	activities. See Part IV, line 19 .	9a	<del>                                     </del>		4	1	
	Ь	Less: direct expenses	9b		1.5		40.00	
	C	Net income or (loss) from gaming		es <u>-</u>	1 THE 18 THE THE P.		e , a e	
	10a	Gross sales of inventory, les				-		
		returns and allowances	10a			1	1 Sty 2	San a la l
	Ь	Less; cost of goods sold Net income or (loss) from sales of			1 secusion " ( 1.2 " ; " 3"	to the the the the	1 Transport C 3	12 15 15 15 15 15 15 15 15 15 15 15 15 15
	С	Mer through or fines) trotti agies o	HIAGIN	Business Code	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,795.72	و المحادث المحادث	A PORT
Miscellaneous Revenue	44.	REIMBURSEMENT FEES		900099	55,734.	55,734.	0.	0.
ne Tue	11a b	POSTING FEES		900004	57,042.	0.	57,042.	ő.
scellaneo Revenue	C	LOUIZIO FEED			1 .,	1		1
S &	ď	All other revenue			248,369.	248,369.	0.	0.
Ξ̈́	A	Total. Add lines 11a-11d						
	12	Total revenue. See instructions				14,653,083.	260,599.	735,358.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses (D) Fundraising Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 983,500 2 Grants and other assistance to domestic Individuals. See Part IV, line 22 . . . . . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members . . . . Compensation of current officers, directors, trustees, and key employees . . . . . 3,248,084 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 . . . . . . 3,328,140. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 264,715. 9 Other employee benefits . . . . . . . 451,590. 10 429,391. 11 Fees for services (nonemployees): b Legal . . . . . . . . . . 102,538. Accounting . . . . . . . 67,888. Lobbylng . . . . . . . ALL TRANSPORTS OF THE STATE OF 8 Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . f 14,990. Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 733,500. 12 Office expenses . . . . . . . . . . 120,791. 13 538,528. 14 Information technology . . . . . . . 15 969,156. 16 17 881,998. Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,215,851. 20 21 22 Depreciation, depletion, and amortization . 95,192. 23 29,146. 24 Other expenses, Itomizo expenses not covered above (List miscellaneous expenses on line 24o. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 123,211. a BUSINESS RESOURCES AND EDUCATION 126,704. **b** SOFTWARE DEVELOPMENT COSTS 156,617. c ENGINEERING EXCELLENCE AWARDS d MAGAZINE 348,472. All other expenses 1,350,788. 15,580,790. Total functional expenses. Add lines 1 through 24e 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) . . .

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash-non-interest-bearing . . . . . . . 816,355. 1 567,570. 2 Savings and temporary cash investments . . . . 4,747,975. 2 4,598,000. 3 3 1,163,476 1,696,586 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 8 Inventories for sale or use . . . . . . Prepaid expenses and deferred charges . . 307,947. 9 404,966. Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . 10a 2,597,937. Less: accumulated depreciation . . . . . 10b 2,267,960. 425,169. 10c 329,977. b 4,940,435. 5,321,823. Investments -- publicly traded securities . . . . . 11 11 12 Investments—other securities. See Part IV, Ilne 11 . 12 Investments-program-related. See Part IV, line 11 . . . 13 13 14 Intangible assets . . . . . . . . . . . . . . . . 14 15 Other assets. See Part IV, line 11 . . . . . . . 302,267. 15 216,094. 16 Total assets. Add lines 1 through 15 (must equal line 33) . . . . 12,703,624. 16 13,135,016. 17 Accounts payable and accrued expenses . . . . . . . . . . 1,097,890. 17 835,055. 18 Grants payable . . . . . . . . . . . . . . . . . 18 Deferred revenue . . . . . . . . . . . . . . . . 19 222,013. 19 863,987. 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 Unsecured notes and loans payable to unrelated third parties . . . . 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 1,045,099 815,966. 26 Total liabilities. Add lines 17 through 25 . . . . . . 2,365,002. 2,515,008. Organizations that follow FASB ASC 958, check here ▶ 🗵 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions . . 27 8,404,616. 27 8,859,847. 28 1,934,006. 1,760,161 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds . . . . . . . . 30 Paid-in or capital surplus, or land, building, or equipment fund . . . . 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 32 10,338,622. 32 10,620,008. 12,703,624. 13,135,016.

m 99	0 (2019)		Pag	_{3e} 12
Part				П
1	Check if Schedule O contains a response or note to any line in this Part XI	16,0		<u> </u>
2	Total expenses (must equal Part IX, column (A), line 25)			
3	Revenue less expenses, Subtract line 2 from line 1	15,5		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		03,0	
5	Net unrealized gains (losses) on investments	10,3		
6	Donated services and use of facilities		21,6	<u> </u>
7		<del></del> -		
8	Investment expenses		-	
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
10	32, column (B))	10,6	20 0	nα
9art	XII Financial Statements and Reporting	10,0	20,0	<del> </del>
U	Check if Schedule O contains a response or note to any line in this Part XII			П
		<del></del>	Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other			
•	If the organization changed its method of accounting from a prior year or checked "Other," explain	in lies		
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	28	3.553.3213	X
	If "Yes." check a box below to indicate whether the financial statements for the year were compiled	775.77 X 4754.		1
	reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	×	<del>z -1649</del> 1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a		
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain of	on		
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	ne		
	Single Audit Act and OMB Circular A-133?	3a		×
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	ne		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b		

REV 08/02/20 PRO

Form **990** (2019)

# **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

and (West) on Form 100. Book N. Has 5 (Brown Toy) (see congrete instructions) or Form 990-F7. Book V. line 35c (Proyv.

Tax) (see separate instructions	), then	Taxy (300 30parate	, mod dobbling of Form out	
111111111111	organizations: Complete Part III.		· · · · · · · · · · · · · · · · · · ·	
Name of organization			, ,	tification number
	ENGINEERING COMPANIES		52-07451	
	the organization is exempt unde			
definition of "political of "political definition of "political campaign act	of the organization's direct and incompaign activities") ivity expenditures (see instructions) illtical campaign activities (see instruc			j
	the organization is exempt und			
1 Enter the amount of a 2 Enter the amount of a 3 If the organization income 4 Was a correction made 5 If "Yes," describe in P Part I-C Complete If 1 Enter the amount directivities 2 Enter the amount of 527 exempt function a 3 Total exempt function line 17b 4 Did the filing organization made particular organization made	ny excise tax incurred by the organization ny excise tax incurred by organization urred a section 4955 tax, did it file For-	er section 501(a sation for section 501(a sation for section 501(a sation for section 501 (a sation for section for sect	n 4955	(c)(3).  0.  1 Yes No  2 No  2 Izations to which the filing ization's funds. Also enter
as a separate segrega	ted fund or a political action committe  (b) Address	e (PAC). If addition	(d) Amount paid from filing organization's funds. If none, enter -0	de Information in Part IV.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1) ACEC/PAC	1015 15TH ST. NW, 8TH FLOOR WASHINGTON, DC 20005	04-3631960		
(2)				
(3)				
(4)				
(5)				
(6)				

Page 2 on under	
name,	
(b) Affiliated group totals	
res No	
elow.	
(e) Total	

Schedule C (Form 990 or 990-EZ) 2019 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election Part II-A section 501(h)). if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's Check ▶ address, EIN, expenses, and share of excess lobbying expenditures). B Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply **Limits on Lobbying Expenditures** (a) Filing organization's totals (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) . e Total exempt purpose expenditures (add lines 1c and 1d) . . . . . . . . f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0-Subtract line 1f from line 1c. If zero or less, enter -0-If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns b See the separate instructions for lines 2a through 2f.)

	Lobby	ying Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
	Grassroots lobbying expenditures					

	(election under section 501(h)).	1 (	a)		(b)	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	Г	A	mount	t
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?					
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?	<u> </u>				
d	Mailings to members, legislators, or the public?	<u></u>	<u> </u>			
е	Publications, or published or broadcast statements?	ļ	<u> </u>			
f	Grants to other organizations for lobbying purposes?	<u> </u>	ļ			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>	<b></b> -			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>	ļ			
	Other activities?	Service de	في المحافظ الم			
J	Total. Add lines 1c through 1i				22 Se (4)	
28	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 by organization managers under section 4912					
c d	If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?				1000	<b>M</b> 155
Part		-1/51	OF SO	ction	ACHREC .	
	501(c)(6).	·/(U/,	01 30	CHOIL		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		×
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		×
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3		×
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6)) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."				line 3	, is
1	Dues, assessments and similar amounts from members		1	11,9	31,8	35.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a	3,2	28,1	.69.
b	Carryover from last year		2b			
C	Total		2c		28,1	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	3,4	03,1	.13.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbe and political expenditure next year?			:		
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Part		•	3			0.
	te the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gra	oup lis	t); Pai	t II-A, I	ines 1	and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
	haaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa					
						•

Scheanle C (For	m 890 or 990-E2) 2019	Page 4
Part IV	Supplemental Information (continued)	
L CI L L	Outpremental information (Continued)	- <del></del>
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### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

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

► Attach to Form 990. Open to I Square to Inspection of the latest information.

2019
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization AMERICAN COUNCIL OF ENGINEERING COMPANIES 52-0745115 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 Aggregate value of contributions to (during year) . Addregate 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 ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Part II 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 (for example, recreation or education) ☐ Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certifled 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 Held at the End of the Tax Year easement on the last day of the tax year. 2a c Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 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 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB 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 FASB ASC 958 relating to these items: 

-	_		•
ra	q	е	4

Part	Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Ot	her Similar Ass	ets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot			-			gnificant use of Its
8	☐ Public exhibition				or exchange			
b	Scholarly research		e	Other				
C	☐ Preservation for future generations							
4	Provide a description of the organizat XIII.	ion's collections	and expl	ain how t	hey further t	the org	anization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							
Part								
	Complete if the organization 990, Part X, line 21.	answered "Yes	" on For	m 990, i	Part IV, line	9, or	reported an am	ount on Form
1a	Is the organization an agent, trustee, Included on Form 990, Part X?							Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	llowing to	able:	<del></del>		
						<u> </u>		nount
C	Beginning balance					1c		
ď	Additions during the year					1d		<del></del>
9	<b>9</b> ,					1e		
f 2a	Ending balance							Vae   No
	If "Yes," explain the arrangement in Pa							
Par		<u> </u>	<del>- 11 11 1 1</del>					
	Complete if the organization	answered "Yes	" on For	m 990, l	Part IV, line	10.		
		(a) Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions				<u> </u>			
C	Net Investment earnings, gains, and losses	_						
ď	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance		<u> </u>		<u> </u>			<u></u>
2	Provide the estimated percentage of t			e (line 1g	, column (a)	)) held a	as.	
a	Board designated or quasi-endowmer		%					
Ь	Permanent endowment ► %							
С	The percentages on lines 2a, 2b, and 3	2c should equal 1						
3a	Are there endowment funds not in the	possession of the	ne organi	zation tha	at are held a	and adı	ministered for the	Yes No
	organization by:							3a(i) 3a(i)
								3a(ii)
b	if "Yes" on line 3a(ii), are the related or				hedule B?			3b
4	Describe in Part XIII the intended uses	•	•					
Part					<del></del>			
	Complete if the organization	answered "Yes	" on For	m 990, f	Part IV, line	11a. S	See Form 990, I	Part X, line 10.
	Description of property	(a) Cost or of			r other basis ther)	đe	Accumulated preclation	(d) Book value
ta	Land		0.				2400 100	0.
ь	Bulldings							
c	Leasehold improvements				61,448.		831,471.	329,977.
ď	Equipment			1,4	36,489.	1	,436,489.	0.
e Total	Add lines 1a through 1e (Column (d) m	unt agual Farre C	OO Port	Y colum-	/P) iino 10			329 977

Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" on For		T	
	(a) Description of security or category (including name of security)	(b) Book value		od of valuation: of-year market value
(1) Financia				
	neld equity interests			
(3) Other				
(C) (D)			· · · · · · · · · · · · · · · · · · ·	
(E)				· · · · · · · · · · · · · · · · · · ·
(F)				
(G)				·····
(H)				
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 12.) . 🕨			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		od of valuation: of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				<u> </u>
(8)				<del></del>
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.) .			
Part IX	Other Assets.	L		
T GIT IA	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11d. See Form	990. Part X. line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)	· · · · · · · · · · · · · · · · · · ·			
(7)				
(8)				
(9)	mp (h) must sound Form 000. Dort V and (B) line 15.)			<del></del>
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	· · · · · · · ·	<u></u>	
raitA	Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.	in ood, rait it, in	0 110 01 111.000	1 Gm 500, 1 art 2,
1.	(a) Description of liability			(b) Book value
(1) Federal II	ncome taxes			
(2) DEFER	RED RENT PAYABLE			666,198.
(3) DEFER	RED COMPENSATION PAYABLE			149,768.
(4)				
(5)	· · · · · · · · · · · · · · · · · · ·			
(6)				
_(7)				···-
(8)		<u></u>		· · · · · · · · · · · · · · · · · · ·
(9)	41			
	<del></del>			815,966.
2. I lability fo	r uncertain tax positions. In Part XIII, provide the text of the footn	ote to the organization	n's financial statemen	ts that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Part	XI Reconciliation of Revenue per Audited Financial Statem			Retur	n.
	Complete if the organization answered "Yes" on Form 990,		line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	16,434,683.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-221,655.		
Ь	Donated services and use of facilities	2b			
C	Recoverles of prior year grants	2c			
d	Other (Describe In Part XIII.)		587,912.		
е	Add lines 2a through 2d			2e	366,257.
3	Subtract line 2e from line 1	1		3	16,068,426.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b		15,404.		
ъ	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	15,404.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	16,083,830.
Part				er Heti	urn.
	Complete if the organization answered "Yes" on Form 990,				<del></del>
1				1	15,366,438.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
8	Donated services and use of facilities				
b	Prior year adjustments	<u> </u>			
C	Other losses	2c			
ď	Other (Describe in Part XIII.)		623,049.		
e	Add lines 2a through 2d			2e	623,049.
3	Subtract line 2e from line 1	1		3	14,743,389.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		2022	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	15,404.		
ь	Other (Describe In Part XIII.)		825,000.		
C				4c	840,404.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, II	ne 18.) .	<del></del>	5	15,583,793.
Part					
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provi	de any additional in	format	ion.
Pt I	I, Line 3: THE COUNCIL FOLLOWS THE ACCOUNTING STA	NDARD	REGARDING THE	MEA	SUREMENT
	ACTION TO THE COUNTY OF THE COUNTY TWO THE COUNTY TO THE C		D00777010 337		
OF U	CERTAIN TAX POSITIONS. THE COUNCIL EVALUATED IT	STAX	POSITIONS AND	DET	EKWINED
THAT	ITS POSITONS ARE MORE-LIKELY-THAN-NOT TO BE SUST	AINRD	ON EXAMINATIO	N. TI	HE
COUN	CIL'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMI	NATION	BY FEDERAL A	ND S	PATE
AUTH	DRITIES. 				
Pt X	, Line 2d: ACEC/ARI REVENUE				
Pt X	II, Line 2d: ACEC/ARI EXPENSE				
Pt X	I, Line 4b: ACEC CONTRIBUTION TO ARI				uouddd 84g g 2000 o 777 200 20 20 20 20 20 20 20 20 20 20 20 20
					*********************

Schedule D (Fo	m 990) 2019	Page 5
Part XIII	Supplemental Information (continued)	
		***************************************
		***************************************
		***************************************
		***************************************
		*

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

N

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

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

<b>0</b>	to Public
8	Open t

OMB No 1545-0047

° □ Inspection Employer identification number X Yes 52-0745115 Does the organization maintain records to substantlate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . . ► Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoning the use of grant funds in the United States. ► Attach to Form 990. the selection criteria used to award the grants or assistance? Part | General Information on Grants and Assistance AMERICAN COUNCIL OF ENGINEERING COMPANIES

4	3	חססחול כ ווספסח	Bullouinou ioi cal	מוו ווו במווים אושל זה סכם פות לוווינטווינטו	וומז זוו מוס סוווונס סומנים	Otaloo.		CCC
ran i	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Do	mestic Organiz received more the	ations and Dom Ian \$5,000. Part I	lestic Governm I can be duplica	ents. Complete I ted if additional	t the organization answe space is needed.	: <b>Organizations and Domestic Governments.</b> Complete if the organization answered "Yes" on Form 990, d more than \$5,000. Part II can be duplicated if additional space is needed.
=	(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)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ² 6 AI	(1) ACEC/NEW YORK 6 AIRLINE DRIVE ALBANY NY 12205 13-1816600	13-1816600	501(c) (6)	100,000.	0.	CASH	N/A	ADVOCACY SEE PART IV
<b>(5)</b>	(2) ACEC/WASHINGTON 1621 114th AW SW STR 115 BELEVUR W 98004	91-0831597	501 (C) (6)	.000,000	0	CASH	N/A	ADVOCACY SEE PART IV
211	(3) ACEC/NEBRASKA 211 N. 14th ST LINCOLN NE 68508 47-0520375	47-0520375	501(c) (6)	8,500.	0.	CASH	N/A	ADVOCACY SEE PART IV
<b>4.</b> 1015	(4) ACEC RESEARCH INSTITUTE 1015 15th St, 1N, 8th FL WASHINTON DC 20005 52-114-0340 501 (C	52-114-0340	501(c)(3)	. 000, 009	225,000.	САЅН	SHARED STAFF/OVERHEAD GENERAL SUPPORT	GENERAL SUPPORT
(2)								
9								
E								
<b>(6)</b>								
6								
(10)								
(1)								
(12)								
8	Enter total number of section 501(c)(3) and governmer	1 501(c)(3) and go	vernment organiza	it organizations listed in the line 1 table	ine 1 table			<b>A</b>
က	Enter total number of other organizations listed in the	rganizations liste	d in the line 1 table					4

Schedule I (Form 990) (2019)

REV 06/02/20 PRO

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

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Schedule I (Fc	Schedule I (Form 990) (2019)					Page 2
Part III	Grants and Other Assistance to Domestic Part III can be duplicated if additional space	nestic Individua space is needed	ils. Complete if the	organization answe	Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. is needed.	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
ณ						
က						
4						
ເດ						
9						
_		-				
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	he information re	equired in Part I, lin	e 2; Part III, column	(b); and any other addit	ional information.
Pt I Li	Line 2: The following are general	al reporting	requirements for	the grant	recipients: (1) A br	brief report
should be	be sent to ACEC on how the grant	ant money was used,	s used, including	the name	of the recipients of	f the Minuteman
funding	funding paid through the Member Organizations, and the	nizations, a	nd the amounts	and dates of	payments to them.	to them. (2) Certify
that th	that the grant money was used solely for		pose for which	the grant was	the purpose for which the grant was provided. (3) If the grant money	the grant money
was not	was not used within 90 days of recei	receipt, it should be	d be returned	returned to ACEC, unless an	s an extension is given.	given. (4) Within
30 days	s after resolution of the matter for	er for which	the funds are	provided, a re	or which the funds are provided, a report to ACEC should state the	ld state the
outcome	outcome of the issue.					
Other	Other: ACEC MINUTEMAN FUND GRANTS PR	PROVIDE SUPPORT	TO MEMBER	ORGANIZATIONS FOR	FOR LOCAL ISSUES OF 1	NATIONAL IMPORTANCE,
WHICH !	WHICH MAY POTENTIALLY AFFECT A LARGE	SEGMENT	THE MEMBERSHIP	OF THE MEMBERSHIP OF ACEC OR OTHERWISE	HERWISE HAVE MAJOR	HAVE MAJOR PRECEDENT-SETTING
IMPLICATIONS	ATIONS.					

Schedule I (Form 990) (2019)

# **SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

2019

52-0745115

Open to Public Department of the Treasury Internal Revenue Service Inspection Employer identification number Name of the organization

AMER	ICAN COUNCIL OF ENGINEERING COMPANI	ES	52-0745115			
Part	Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a. Complete Part III to pr					
	☐ First-class or charter travel	☐ Housing allowance or residence for	or personal use		·	
	☐ Travel for companions	Payments for business use of pers	sonal residence			
		☑ Health or social club dues or initia	tion fees		ļ	
		Personal services (such as mald, of	chauffeur, chef)		l	1
	_ ,, ,	- ,	•		l	
b	If any of the boxes on line 1a are checked, did th				ļ	<u> </u>
	or reimbursement or provision of all of the exp		complete Part III to		×	
	explain			1b	<b>├</b> ^	<del> </del>
2	Did the organization require substantiation prior	r to reimburging or allowing expen	see incurred by all		}	<b> </b> -
-	directors, trustees, and officers, including the CEC	/Executive Director, regarding the ite	ems checked on line			
	1a?			2	×	
				-	<del> </del>	<del> </del>
3	Indicate which, if any, of the following the organizat	ion used to establish the compensation	on of the		:	
3	organization's CEO/Executive Director. Check all the	at apply. Do not check any boxes for	methods used by a		-	
	related organization to establish compensation of the	ne CEO/Executive Director, but explain	n in Part III.		1	
	☑ Compensation committee	☑ Written employment contract			1	
	☐ Independent compensation consultant	☑ Compensation survey or study				L
		Approval by the board or compen	sation committee	ŀ	ļ	1
	Form 990 of other organizations	Approval by the board of compen	Sation Committee			]
4	During the year, did any person listed on Form 990, organization or a related organization:	Part VII, Section A, line 1a, with resp	ect to the filing			
•	Receive a severance payment or change-of-control	navment?		4a	×	<u></u> †
a	Participate in, or receive payment from, a supplement			4b	<del></del>	×
b	Participate in, or receive payment from, a supplient			4c	-	×
С	If "Yes" to any of lines 4a-c, list the persons and pre-			- 70	<del>                                     </del>	1
	If Yes to any of times 4a-c, list the persons and pr	ovide the applicable amounts for each	ritem arracin.		1	1
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) or	rganizatione muet complete lines 5	_a		1	1
5	For persons listed on Form 990, Part VII, Secti	on A line 1a did the organization	pay or accrue any		ł	1
•	compensation contingent on the revenues of:	on 71, 1110 12, and the organization	pay 6. 220.22 a	ĺ	1	
_	The organization?			5a	<b>├</b> - <b>-</b> -	<b>†</b>
a	Any related organization?			5b	-	
Ь	•		· · · · · ·	35	<del> </del>	<del> </del>
	If "Yes" on line 5a or 5b, describe in Part III.					1
_	For persons listed on Form 990, Part VII, Secti	on A line to did the organization	nay or accrue any	}		
6	compensation contingent on the net earnings of:	on A, line 12, did the organization	pay or accide any			1
_	The organization?			6a		<b></b>
a	Any related organization?			6b	-	<del>                                     </del>
Ь				<u> </u>	<del> </del>	+
	If "Yes" on line 6a or 6b, describe in Part III.					
-	For paragraphic listed on Form 200 Bort Vill Santia	n A line 1s did the organization n	rovide any ponfived	<b></b>	ļ-,	<b></b>
7	For persons listed on Form 990, Part VII, Section payments not described on lines 5 and 67 if "Yes,"	n A, inte ra, dio the organization p	TOVICE any nonlixed	-		
_				7	<del> </del>	$\vdash$
8	Were any amounts reported on Form 990, Part VII,	paid or accrued pursuant to a contrac	t that was subject			
	to the initial contract exception described in F	• • • • • • • • • • • • • • • • • • • •				
	in Part III		· · <i>·</i> · · · ·	8	ļ	ļ
						<b> </b>
9	If "Yes" on line 8, did the organization also foil	ow the rebuttable presumption pro-	cedure described in i		ı	1

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of W-2 and/or 1099-MISC compensation  (C) Retirement and (D) Normayable (E) Total of columns (F) Compensation	or each	IISted individual mu (B) Breakdown o	st equal the total amof W-2 and/or 1099-MIS	ount of Form 990, Fa C compensation	(C) Retirement and	O Nortaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)+(D)	in column (B) reported as deferred on prior Form 990
LINDA BAUER DARR	6	557,730.	82,500.	0.	33,585.	17,985.	691,800.	0
	ε	0	0.	0.		0.		.0
1	€	238,190.	35,000.	0.	33,585.	48,568.	355,343.	0.
2 SENIOR VP, ADVOCACY	Ξ	0	0.	0.	0.	0.		0.
DAPHNE BRYANT	ε	258,308.	25,000.	0	23,653.	22,562.	329, 523.	0
3 SENIOR VP, MEMBERSHIP & MO SERVICES		0	0.	0.	0.			0.
	↓_	254,170.	25,000.	0.	24,920.		305,075.	0
	€	0	.0	0	: 1		0.	0.
GREGORY KNOPP	8	229,740.	13,500.	6,021.	28,973.	20,348.	298,582.	0
5 VP AIR & MO SERVICES	€	0	0	i	Ι.	0.	0.	0.
HAEL E	Θ	170,513.	15,000.	0	20,541.	25,610.	231,664.	0
-		0.	0	0.	0.		0.	0.
MARIE TERNIEDEN	Ξ	184,861.	12,000.	0.	21,792.	10,462.	229,115.	0.
7 SENIOR VP, BRE	3	0			0.		0.	0.
KATHARINE MOTTLEY	()	183,221.	7,000.	5,038.	21,000.	12,025.	228,284.	0
8 VP TAX & REGULATORY AFFAIRS	2	0.	0.		0.	0.	0.	0.
MATTHEW REIFFER	ω	172,834.	10,000.	2,443.	20,847.	17,214.	223,338.	0.
9 VP TRANSPORTATION PROGRAM	Ξ	0.	0.	0.	0.	0.	0.	0.
CHARLES KIM	Θ	155,788.	25,000.	0.	19,674.	20,731.	221,193.	0.
10 GENERAL COUNSEL & CORPORATE SECRETARY	_	0	0	0.		0.	0.	0.
LYNN SCHLOESSER	Θ	161,676.	4,000.	0.	18,361.	30,661.	214,698.	0
11 DIR. ENVIRONMENTAL & ENERGY PROGRAMS	€	0.	0.	0.	0.	0.	0.	0.
ERIN MCLAUGHLIN	ε	174,532.	6,500.	0.	18,984.	9,054.	209,070.	0
12 VP PRIVATE MARKET		0.	0.	.0	0.	0.	0.	
BARRY DOYLE	ω	144,927.	8,500.	5,450.	16,966.	24,480.	200,323.	0
13 VP FINANCE	Ξ	0.	0.	0.	0.	0.	0.	
MELISSA THOMPSON	(0)	140,861.	8,000.	3,401.	14,542.	2,055.	168,859.	0
14 CORPORATE SECRETARY	(3)	0.		0.	0.	0.	0.	0.
	60				0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
15								
	€							***************************************
16	€							
ВАА			REV 06/02/20 PRO				438	Schedule J (Form 890) 2019

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Schedule J (Form 990) 2019

# SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

20**19** 

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990 or 990-EZ.
➤ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer Identification number

AMERICAN COUNCIL OF ENGINEERING COMPANIES	52-0745115
Other: Pt I, Line 6: THE TOTAL VOLUNTEERS REPRESENT THE EXECUTIVE	COMMITTEE
AND BOARD OF DIRECTORS OF ACEC, WHO ARE CONSIDERED OFFICERS OF AC	EC.
Pt VI, Line la: A Member Organization, current in its payments, s	hall have voting
power in the Board of Directors and for elections to office in pr	oportion to
the Member Firm dues obligation to the Council for the current fi	scal year in
accordance with the following table: Annual Dues Paid Number Doll	ars of Votes 1,000
and under 1 1,000 to 2,500 2 2,501 to 5,000 3 Over 5,000* *One ad	ditional vote
for each additional \$5,000 or any part thereof. The number of vot	es permitted
to be cast by a certain Appointed Director on behalf of a Member	Organization,
and the number of votes permitted to be cast by an Officer, shall	be referred
to in these Bylaws as the Voting Power.	
Pt VI, Line la: Between meetings of the Board of Directors, the B	Executive Committee
shall exercise full powers of the Board of Directors in matters w	which in the
judgment of the Executive Committee must be acted upon before the	e next regular
meeting of the Board of Directors, except as provided for in the	Certificate
of Incorporation and as limited by applicable law. The Executive	Committee shall
have immediate supervision of the financial affairs of the Counci	il, and shall
advise the Board of Directors on all financial matters. All action	ons taken by
the Executive Committee shall be in accordance with the general p	policies of the
Board of Directors and shall be reported to the Board of Director	rs at its next
meeting.	***************************************
Pt VI, Line 6: REGULAR AND AFFILIATE	
DE UT 1 DI BOR MUD EVECIMIUE COMMIRMEE MEMDEDE UTA MUE 1/01	PE OF TURID

INTERESTS WITH VENDORS DOING, OR SEEKING TO DO, BUSINESS WITH ACEC. (3) INDIVIDUALS

OR MEMBERS OF COMMITTEES PREPARING OFFICIAL STATEMENTS FOR ACEC SHOULD DISCLOSE

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization AMERICAN COUNCIL OF ENGINEERING COMPANIES	52-0745115
FINANCIAL RELATIONSHIPS OR LEGAL OBLIGATIONS THAT INTERFERE, OR	COULD INTERFERE,
WITH THE TASK. THIS POLICY IS DIRECTED PRINCIPALLY AT OFFICERS	AND DIRECTORS
OF ACEC, MEMBERS OF THE BOARD OF DIRECTORS, COMMITTEE MEMBERS A	ND GROUPS WORKING
ON BEHALF OF ACEC, MEMBERS WHO SPEAK ON BEHALF OF ACEC, AND ALL	STAFF OF ACEC.
ALL ACEC STAFF ARE MADE AWARE OF THE POLICY AND SHOULD AN OCCAS	ION ARISE WHERE
A POTENTIAL CONFLICT IS IDENTIFIED STAFF AND VOLUNTEERS WORK TO	GETHER TO RESOLVE
IT IN LINE WITH ACEC POLICY.	
Pt VI, Line 15a: THE CHAIR, CHAIR-ELECT AND FORMER CHAIR UNDERT	AKE A DETAILED
PERFORMANCE ASSESSMENT AND REVIEW SALARY SURVEYS FOR SIMILAR PO	SITIONS/ORGANIZATIONS
TO DETERMINE SALARY LEVEL. LAST REVIEW 7/1/2020.	
Pt VI, Line 15b: THE PRESIDENT & CEO, WITH INPUT FROM THE HUMAN	RESOURCES DEPARTMENT,
SETS COMPENSATION FOR OTHER STAFF.	
Pt VI, Line 19: WEBSITE FOR CONFLICT OF INTEREST, IDENTITY THEF	T PREVENTION
PROGRAM & PROCEDURES, AND GOVERNING DOCUMENTS; FINANCIAL STATEM	ENTS ARE MAILED
TO BOARD MEMBERS. FINANCIAL STATEMENT AND FORM 990 ARE AVAILAB	LE TO THE GENERAL
PUBLIC UPON REQUEST.	
Pt VI, Line 11b: THE DRAFT FORM 990 IS PROVIDED TO THE FINANCIA	L OVERSIGHT COMMITTEE
FOR REVIEW AND COMMENT PRIOR TO FINALIZATION AND SUBMISSION.	
Pt III, Line 2: DURING THE YEAR ARI BEGAN RESEARCH INTO ISSUES	OF CRITICAL IMPORTANCE
TO THE ENGINEERING INDUSTRY.	
***************************************	

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

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

ENGINEERING COMPANIES

AMERICAN COUNCIL OF

Part I

2019

OMB No. 1545-0047

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Open to Public Inspection

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

Related Organizations and Unrelated Partnerships

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

▶ Attach to Form 990.

Employer identification number 52-0745115 (f) Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (e) End-of-year assets (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity (a) Vame, address, and EIN (if applicable) of disregarded entity Part II 9 3 O Ξ 0 €

(g) Section 512(b)(13) controlled entity? Yes × (f) Direct controlling Personal Controlling Persona ACEC (e)
Public charity status
(if section 501(c)(3)) 509 (A) (2) (d) Exempt Code section 501 (c) (3) (c) Legal domicile (state or foreign country) В (1) ACEC RESEARCH INSTITUTE 52-1140340
1015 15TH STREET, NW, 8TH FLOOR WASHINGTON DC 20005 SCHOLARSHIPS (b) Prumary activity (a) Name, address, and EIN of related organization Ε € 9 ල 9

Schedule R (Form 990) 2019

REV 08/02/20 PRO

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

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Part III dentifica because it	tion of Relat	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.	ions Taxable	as a Partner reated as a p	rship. Cor artnership	nplete if the during the	organizat tax year.	ion answe	red ¦ Ye	s" on F	orm 990,	Part	, IIIe	<b>4</b> ,
(a) Name, address, and EIN of related organization	5 Z -	(b) Primary activity	(c) Legal domucile (state or foreign	(d) Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512—514)		(f) Share of total (income	(g) Share of end-of- year assets	(f) Osproportonate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	****	(i) General or maraging partner?	(K) Percentage ownership
									Yes	ટ		Yes	ş	
(1)														
(2)														
(6)										<u> </u>		-		
(4)												-		
(5)								į		<u> </u>				
(9)							<u> </u>			<u> </u>		-		
<u>ت</u>										<u> </u>				
Part IV Identification Identificatio	tion of Relaticanse it had	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ions Taxable elated organi	as a Corpor zations treate	ation or 1	rust. Comp	lete if the trust durir	organizati ig the tax	on ansv year.	vered "	Yes" on F	orm 9	90, Pa	π IV,
(a) Nama, address, and EIN of related organization	(e) BN of related orgar	nzation	(b) Primary activity	(c) Legal domicile (state or foreign country)	omicile ign country)	(d) Direct controlling entity	(e) Type of entity (C corp., S corp., or trust)	entity Sh p, or trust)	(f) Share of total income	S) end-of-	(g) Share of end-of-year assets	(h) Percentage ownership	Sect N	Section 512(b)(13) controlled entity?
(1)													<u> </u>	2
(2)														
(6)														
(4)														
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Schedule R (Form 980) 2019

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

			5N
Note: Complete line in any entry is listed in Farts in, in, of 1V of this scriedule.  1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts ILIV?	or more related organ	trations listed in Part	3
a Receipt of (i) interest, (ii) annuitles, (iii) royaltles, or (iv) rent from a controlled entity			1a × × × × × × × × × × × × × × × × × × ×
b Gift, grant, or capital contribution to related organization(s)		•	
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan quarantees to or for related organization(s)			×
	•		
	•	· · · · ·	
f Dividends from related organization(s)		•	
g Sale of assets to related organization(s)		•	× 20
			÷
i Exchange of assets with related organization(s)	•	•	
j Lease of facilities, equipment, or other assets to related organization(s)			× -
R Lease of facilities, equipment, or other assets from related organization(s)			+
refrormance of services of membership of fundralsin			×
Performance of services or membership or fundraisin			+
			$\dashv$
o Sharing of paid employees with related organization(s)			10 X
p Heimbursement paid to related organization(s) for expenses			
<ul> <li>q Reimbursement paid by related organization(s) for expenses</li> <li></li></ul>			
T Other transfer of one to a constant to the second of the			
s Other transfer of cash or property from related organization(s)			× ×
9 If the answer to any of the above is "yes " see the instructions for information on who must	doci only of of order	soitolos bosovoo peilos	polytocath actions and the polytocath
E II DIE GLEWEL O GIY OI DIE GLEWE IN THE TRANSPORT OF THE TRANSPORT OF THE TRANSPORT OF THE GLEWEL OF THE GREWEL	Somplete this line, included	Joing Covered relation	Isnips and dansaction unestiones.
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ACEC RESEARCH INSTITUTE	д	.000,009	CASH
(2) ACEC RESEARCH INSTITUTE	L	0	CASH
(3) ACEC RESEARCH INSTITUTE	2	160 020	NOTHEOLITE
	N	10707001	ALLOCAL LON
(4) ACEC RESEARCH INSTITUTE	0	265,041.	ALLOCATION
(9)			
(9)			
BAA REV 08/02/20 PRO			Schedule R (Form 990) 2019

# Part VI Unrelated Or

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.

Name, address, and ElN of entity   Primary activity   Legal domicije   Predominant Areal pathers   Share of Sha	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate	onate		() General c	(k) r Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under	section 501(c)(3) organizations?	¥	end-of-year assets	allocator	ns? amour of Sci	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	
			sections 512-514)	Yes No			Yes	2		Yes No	۱.
(1)											
(2)	-										
(6)											:
(4)				-						<u> </u>	
(5)											
(9)											
Ø										<u> </u>	
(8)	 										
(6)											
(10)											
(11)											
(12)											
(13)											:
(14)											
(15)											
(16)											
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Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.
PART V,	LINE 2: ACEC INCLUDES A SOLICITATION FOR CONTRIBUITON TO ARI'S SCHOLARSHIP
PROGRAM	ON ACEC FELLOWS DUES INVOICES. NO VALUE HAS BEEN ASSIGNED TO THIS SOLICITATION.
PART V,	LINE 2: ARI REIMBURSED ACEC FOR SHARED STAFF AND FACILITIES AFTER THE
FISCAL Y	YEAR END, LESS AN INKIND CONTRIBUTION OF \$225,000 FROM ACEC.
110.00.00.00.00.00	
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Schedule R (Form 990) 2019