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Form	99	0 ,		n of Organiza	•	t From In	come	ıax		201	
(Rev J	anuary"	2020)		c), 527, or 4947(a)(1)				_	dations)		
Departm	ent of th	e Treasury		nter social security					M	Open to P	
		Service		www.irs.gov/Form99				n. 0	<u> </u>	Inspecti	on I
	or the 2	2019 calendar	year, or tax year begin			01 , 2019, ar		1		5-30 , 20 20	
Всн	eck if ap	plicable	-	merican Counci	l of Engineer	ring Compa	nies of	Nor	On Emplo		ber
==	dress ch	ange	Doing business as Ca			[56-1334000	
=	me chan	nge	,	O box if mail is not delivere	ed to street address)		Room/suite		E Teleph	none number	204
一	ıal returr		L50 Fayettevil				13	40		(919) 781-79	134
Fir	al return	/terminated		ovince, country, and ZIP or fo	oreign postal code				G Gross	•	- 100
☐ An	ended re	etum	Raleigh, NC 27				T		\$		5,183
∐ Ap	plication	pending	1	nncipal officer Derek	Clyburn, P.E.	,	'			or subordinates? Yes	<u>⊠</u> №
			Same as C abov		1	577 0 0	H(es included? Yes	. ∐ No
	exempt) < (insert no)		527				t (see instructions)	
	bsite:		acecnc.org	. Пап 🔊	1	l Voca et formation			exemption State of leg		
Par		Summary	progration Trust As	sociation Other		L Year of formation	n 1969	I MAI	state or teg	al domicile NC	
rai			the organization's miss	unn or most significan	t activities To					osts of	
		•	<u> </u>	-		promote th	_				
Governance	9	engineerin	g companies by	providing leg	islative adve	cacy and	busines	22 2e	LVICES		
nar	-										
Ver	2	Chack this hav	▶ ☐ if the organization	n discontinued its one	rations or disposed	of more than 25	5% of its no	et assets	<u> </u>		
ô			ng members of the gove								11
٠ ٥			pendent voting membe	• • •		RECEIVE	D IN CO	RRES	. 4		11
Activities &			findividuals employed ii			IRS -	OSC - 1	9	5		5
ť			volunteers (estimate if						. 6		
Ac			business revenue from			JUL	1 3 202	١	. 7a	3	050
			usiness taxable income						. 7b		0
		ivet differenced b	dalless taxable illoome	3 110/11 1 0/11 330-1, 111	<u> </u>		V. UTAH	nor Year	1	Current Year	
	8 (Contributions a	nd grants (Part VIII, line	1h)			7 0 14 01 12	1101 1001		Julion 1021	0
ē			e revenue (Part VIII, line	•				1,166	329	1 203	2,053
Revenue		•	ome (Part VIII, column (111		80
Š			(Part VIII, column (A), i	• • • • • • • • • • • • • • • • • • • •					,521		3,050
			add lines 8 through 11					1,168			5,183
			ilar amounts paid (Part						,,,,,,,		0
			or for members (Part I							-	0
		•	compensation, employe					431	.,726	440	6,883
Ses			ndraising fees (Part IX,						7		0
Ë			g expenses (Part IX, co			120,759				-	
Expenses			s (Part IX, column (A), li					722	,045	760	0,685
_		•	Add lines 13-17 (must					1,153			7,568
		-	expenses Subtract line						,190		2,385)
								g of Cum		End of Year	
Net Assets or Fund Balances	20	Total assets (Pa	art X. line 16)						.,195	30:	3,675
A Bas		•						109	,195		7,352
E S		Net assets or fu	und balances Subtract	line 21 from line 20					,000		6,323
Par	: 11	Signature	Block								
Under	penalties	s of perjury, I declare	that I have examined this retu	um, including accompanying	schedules and statement	s, and to the best of	my knowledg	e and beli	ef, it is		
true, c	orrect, an	nd complete Declar	ation of preparer (other than of	micer) is based on all informa	ation of which preparer has	s any knowledge			F		
	- 1	Jim Sm	uth, P.E.								
Sign		Signature of		1000	1000				Da	te	
Here	· [j	Jim Sn	uth, P.E., Exe	tive Directo	or						
			t name and title								
		Print/Type prepar	er's name	Preparer signature	1 0	Date		Check	f	PTIN	
Paid		Art Goude	ey Jr	words	CPA CPA	07-06-202	21	self-em	ployed	P01206138	
Prep	arer			Consulting Se	rvices PA			s EIN 🕨			

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

PO Box 18088

Raleigh NC 27619

919-510-5105

Phone no

Use Only

Firm's address

Form	990 (2019) American Council of Engineering Companies of North	56-1334000	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	· · · · <u> </u>
1	Bnefly describe the organization's mission		
4	To promote the business interests of engineering companies by providing legi	slative advo	cacy and
	business services.		
			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	□ vos	No No
	If "Yes." describe these new services on Schedule O	🔲 1es	M HO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
3	services?	· · · . 🗌 Yes	X No
	If "Yes," describe these changes on Schedule O		<u></u>
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	ed by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot		
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$322,017 including grants of \$) (Revenue	\$)
	Awards programs - Conduct two annual awards programs, the Engineering Excell		
	Young Engineer awards, which recognize companies for outstanding engineering	projects an	d honor
	young engineers by highlighting their engineering contributions and the resu	lting impact	. to
	society, respectively.		
		• • • • • • • • • • • • • • • • • • • •	
			
4b	(Code) (Expenses \$322,017 including grants of \$) (Revenue	\$)
	Legislative advocacy - represent the business interests of the engineering i	ndustry befo	re the
	North Carolina General Assembly.		
			
			
4c	(Code.) (Expenses \$ 322,016 including grants of \$) (Revenue	\$)
	Conferences/Seminars - Conduct conferences and seminars on topics related to		s
	interests of the engineering industry which provide networking opportunities		
	as well as the opportunity to earn required professional development hours ((PDHS).	
4 - 4	Other groups on the Charles on Cabadilla Ch		
4d	Other program services (Describe on Schedule O)	,	
4-	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ▶ 966,050	 	

 $\Delta \Delta \Delta \Delta$	(2019)	

Page 3

American Council of Engineering Companies of North **Checklist of Required Schedules** Part IV No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 2 Х 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 х 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 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 98-197 If "Yes," complete Schedule C. Part III 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II x Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." x 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 or in quasi endowments? If "Yes," complete Schedule D, Part V 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 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX x e 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 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 X 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 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? X 20a 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

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

rai	Checkist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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			X
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	v	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		х	
240	\$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>x</u> _
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds? · · · · · · · · · · · · · · · · · · ·	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		<u> </u>
LJa	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	23a	-	<u> </u>
U	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	230	-	
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or 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	20		Х
21	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			l
	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	21		Х
20	IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
•	"Yes," complete Schedule L, Part IV	28a		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		^
·	"Yes," complete Schedule L, Part IV	28c	·	x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
••	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	-		^
	complete Schedule N, Part II · · · · · · · · · · · · · · · · · ·	32		x
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		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	- 55		_
•	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34	x	ŀ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	300		^
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		l
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	900		\vdash
-	related organization?// "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		ŀ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
J,	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	3/		X
30	19? Note : All Form 990 filers are required to complete Schedule O	20		
Dan		38	Х	<u> </u>
Par	Check if Schedule O contains a response or note to any line in this Part V			
	Oneck if Schedule O contains a response of note to any line in this Part V	• • •	· · ·	
۵.	Fatally and a Park of Fam 4000 File of California		Yes	No
1a L	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			1
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.	<u> </u>	ļ
	reportable gaming (gambling) winnings to prize winners?	1¢	X	

Form 990 (2019)

American Council of Engineering Companies of North
Part V

Statements Regarding Other IRS Filings and Tax Compliance (continued)

	u .		Yes	No
2a	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 2a 5			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. 1		7.00
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	x	
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 account)?	. 4a		x
b	If "Yes," enter the name of the foreign country		1	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	200		10
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
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?	6a	X_	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	. 6b	х	
7	Organizations that may receive deductible contributions under section 170(c).	QĐ)		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	. 7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	. 7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			Light.
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7е		
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?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	. 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	C.S.	E ASSI	17.7
	sponsonng organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.		133	
а	Did the sponsonng organization make any taxable distributions under section 4966?	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			
а	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			
а	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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?	13a		
	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			
С	Enter the amount of reserves on hand			E SA
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		1	
	excess parachute payment(s) dunng the year?	. 15		x
	If "Yes," see instructions and file Form 4720, Schedule N	1120		10/00
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		X
-	If "Yes," complete Form 4720, Schedule O	(Fat		
			1,000 1,04-2	

Form 990 (2019) Page 6 American Council of Engineering Companies of North Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yas No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 1b ь Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? x 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? A X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. а X 8ь Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records

Jim Smith, P.E. (919) 781-7934, 150 Fayetteville Street, Raleigh, NC 27601

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Form 990 (201	,			56-1334000	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Emp	loyee	s, Highes	t Compensated Employees	, and
	Independent Contractors				
	Check if Schedule O contains a response or note to any line in this Part VII				🗆

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

See instructions for the order in which to list the persons above

(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	(do r box,	not che unles er and	Pos eck m	(C) sition nore the son is rector	nan one and Highest compensated employee	n)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Gary Hartong, P.E.										
National Director	 	Х	\dashv	Х				0	0_	0
(2) Derek Clyburn, P.E.										
President 7.20 P. 7.20		Х	\dashv	X	-			0	0	0
(3) Scott Hinesley, P.E. President-Elect		x		x				٥	o	o
President-Elect (4) Paul Meehan, P.E.		_	\dashv							
Vice-President		х		х				٥	o	o
(5) Elizabeth Phipps, P.E.										
Secretary/Treasurer		x		x				٥	o	0
(6) Iona Thomas										
Trustee/Director		х						0	0	0
(7) Joah Dalton, P.E.										
Trustee/Director		х						0	0	0_
(8) Mike Slusher, P.E.			l							
Trustee/Director		х						0	0	0
(9) Colin Davis										
Trustee/Director	<u> </u>	х			_			0	0	00
(10)Jason Peterson, P.E.									İ	
Trustee/Director		х		_				0	0	0
(11)Stephen Green, P.E.									:	•
Trustee/Director		Х						0	0	0
(12)Jim Smith, P.E.								177 000	_	10.045
Executive Director	 			\dashv		X		177,032	0	19,947
(13)						ì				
(14)										

Part	90 (2019) American Council										334000	F	Page 8
ran.	VII Section A. Officers, Directors, Trustees (A) Name and title	(B) Average hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				an one both an	1	(D) Reportable compensation	(E) Reportable compensation		(F) Estimated amou	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)) 0	compensa from the rganization ated organi	and
(15)													
<u>(</u> 16)		-											
(17)										. <u>-</u>			_
(18)									<u></u> -	:			
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Subtotal	ion A						• •					
d 	Total (add lines 1b and 1c)										0	19,	947
	reportable compensation from the organization	<u> </u>										Yes	No
3	Did the organization list any former officer, directo			-	, or	high	est co	mpe	nsated				
	employee on line 1a? If "Yes," complete Schedule										• • 3	+	X
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater than	า \$150,000?	If "Yes	," co	mple	ete S	chedu	ıle J	for such		-		
_	Individual · · · · · · · · · · · · · · · · · · ·										4	x	ļ
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes,"	•		•			-				5		х
Secti	on B. Independent Contractors	<u> </u>											
1	Complete this table for your five highest compensation from the organization. Report comp										ar		
	(A)				, -				(B)			C)	
	Name and business address	s							Description of service	xes	Comp	ensation	
							i			1			

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

2

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (A) Total revenue Related or exempt Unrelated Revenue excluded business revenue from tax under sections 512-514 1a Federated campaigns 1b b Membership dues . Gifts, Grants ilar Amounts 1c Fundraising events 1d Government grants (contributions) . . 1e All other contributions, gifts, grants, Contributions, and Other Simi and similar amounts not included above 1f Noncash contributions included in 1g **Business Code** 2a Conf, Seminar, Training 541300 630,185 630,185 Program Service Revenue b North Carolina Dues 571,868 571,868 541300 f All other program service revenue 1,202,053 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and Income from investment of tax-exempt bond proceeds 3,050 6a Gross rents 6b b Less rental expenses · · c Rental income or (loss) d Net rental income or (loss) (i) Secunties 7a Gross amount from sales of assets other than inventory.

b Less cost or other basis Other Revenue 7b and sales expenses . c Gain or (loss) · · · · · 7c 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 8b **b** Less direct expenses · · · · · · · · · c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a 9b **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances . . . 10a **b** Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11a d All other revenue · · · e Total. Add lines 11a-11d Total revenue. See instructions 1,205,183 1,202,053

Part X 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				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses		
'	and domestic governments See Part IV, line 21 · · ·				
2	Grants and other assistance to domestic				
-	Individuals See Part IV, line 22	Ì			A STATE OF THE STATE OF
3	Grants and other assistance to foreign			200	1000年,第二年中间
	organizations, foreign governments, and			A. S. S.	
	foreign individuals See Part IV, lines 15 and 16 · · · ·				
4	Benefits paid to or for members			The state of the s	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · ·	177,032	141,626	17,703	17,703
7	Other salaries and wages	185,179	-148,143	18,518	18,518
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	13,780	11,024	1,378	1,378
9	Other employee benefits	45,955	36,763	4,596	4,596
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·	24,937	19,949	2,494	2,494
11	Fees for services (nonemployees)				
а	Management	<u> </u>			•
þ	Legal · · · · · · · · · · · · · · · · · · ·	,			
С	Accounting	35,125	28,099	3,513	3,513
d	Lobbying · · · · · · · · · · · · · · · · · · ·		P7 T 20 T 2 T 20 T 2 T 20 T 2 T 20 T 2 T 2	Emiliar a Service and a servic	
8	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	16,299	13,039	1,630	1,630
14	Information technology		· · -· ·		
15 16	Occupancy · · · · · · · · · · · · · · · · · · ·	66 021	F0 00F	6 602	6 603
16 17	Travel	66,031	52,825	6,603	6,603
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	416,570	333,256	41,657	41,657
20	Interest	410,570	333,230	41,057	41,057
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	378	302	38	38
23	Insurance	6,337		634	634
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
a	Printing & Publications	267	213	27	27
b	Dues & Subscriptions	4,377	3,501	438	438
C	Travel & Entertainment	34,266		3,427	3,427
d	Outside Services	124,705	99,763	12,471	12,471
е	All other expenses	56,330		5,632	5,632
25	Total functional expenses. Add lines 1 through 24e	1,207,568	966,050	120,759	120,759
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)	I			<u> </u>

Form 990 (2019) 56-1334000 **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 1 1 Cash - non-interest-bearing 2 2 123,836 47,678 3 Pledges and grants receivable, net Accounts receivable, net 4 21,461 43,778 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 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 Notes and loans receivable, net 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 39,473 Less accumulated depreciation 10b 10c b 25 11 11 130,000 206,346 Investments - other securities See Part IV, line 11 12 12 13 13 14 14 15 15 5,873 5,873 16 281,195 16 303,675 17 17 5,646 18 18 19 19 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 103.549 107.000 26 Total liabilities. Add lines 17 through 25 109,195 107,352 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 172,000 196.323 28 Net assets with donor restrictions 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 30 Paid-in or capital surplus, or land, building, or equipment fund

196,323

303,675

31

33

172,000

281,195

31

32

33

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

Form	1990 (2019) American Council of Engineering Companies of North 56-133	4000		Pag	<u>je 12</u>
Ŗą	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)		1,20	05,1	83
2 ~	Total expenses (must equal Part IX, column (A), line 25)		1,20	7,5	68
3	Revenue less expenses Subtract line 2 from line 1			(2,3	85)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			72,0	
5	Net unrealized gains (losses) on investments			26,3	46
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				9
9	Other changes in net assets or fund balances (explain on Schedule O)		-	3	53
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	•	19	96,3	23
Pá	it XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		•	Y	es	No
1	Accounting method used to prepare the Form 990 🗍 Cash 🕱 Accrual 📗 Other			14 P	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	2			44
	Schedule O	2	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		25
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	[2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	120	Service 125	2 m 1 1 2 m	9, 5 yes 4, 3 g
	reviewed on a separate basis, consolidated basis, or both.	e,			- A
	Separate basis Consolidated basis Both consolidated and separate basis	4- (4)	4 Ugada - 1 (2) 1	% XI 1	
b	Were the organization's financial statements audited by an independent accountant?	"	2b	in in its	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	3	27- 13 1292	4 m	in South
	separate basis, consolidated basis, or both	Į.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	\$			2
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	-		12	المتانيطيي
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on	24	4-54 .		1
	Schedule O	4		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* 10
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	2	2042		التحاصم
	Single Audit Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	٢			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form 99	90 (20	19)

EEA

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► 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.

2019
Open(to)Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

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

ıu,	(See Separate Mistracachis), mor	•			
	Section 501(c)(4), (5), or (6) organ	zations Complete Part III		Empleyes idea	lification aumbon
	ne of organization			-	tification number
	merican Council of Engi				334000
		organization is exempt under			ganization.
1	•	nization's direct and indirect political cam	paign activities in Pa	if IV (see instructions for	
	definition of "political campaign as				
2	Political campaign activity expend			▶ \$	
3	·	aign activities (see instructions)			
_{[Pa}		organization is exempt under			
1		ix incurred by the organization under sec			
2		ix incurred by organization managers und			
3		tion 4955 tax, did it file Form 4720 for this			
4a		• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	· · · U Yes U No
<u>b</u>	If "Yes," describe in Part IV				
Pa		organization is exempt under		· · · · · · · · · · · · · · · · · · ·	c)(3).
1		ed by the filing organization for section 5			
	activities	• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · > \$	
2		anization's funds contributed to other org			
	527 exempt function activities •			▶ \$	
3	The state of the s	es Add lines 1 and 2 Enter here and on			
4	Did the filing organization file Fore	n 1120-POL for this year?			· · · L Yes L No
5	Enter the names, addresses and	employer identification number (EIN) of a	all section 527 politic	al organizations to which the f	iling
	organization made payments. For	r each organization listed, enter the amou	ant paid from the filin	g organization's funds. Also e	nter
		ns received that were promptly and direc		-	
	as a separate segregated fund or	a political action committee (PAC) If ad	ditional space is nee	ded, provide information in Pa	rt IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(=,=	(5) (53.555	(0)	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization
	· · · · · ·				If none, enter -0-
((1)				
((2)				
((3)				
	(4)				
	X*/				
	(5)				
	·····				
_	(6)				
,	(6)				

_	ule C (Form 990 or 990-EZ) 2019 American Countill A Complete if the organization section 501(h)).	ncil of Engin on is exempt un	eering Compan nder section 50	les of North 1(c)(3) and filed	56-1334 Form 5768 (ele	
	· · · · · · · · · · · · · · · · · · ·		and lot in Dark IV and	h efficient and annual annual		
Α (Check If the filing organization belongs to address, EIN, expenses, and sha			in amiliated group me	mbers name,	
В (, ,	, , ,			
<u>B</u> (Check if the filing organization checked			<u>/</u>	(a) Elvan	(b) Afflicted
	(The term "expenditures"	bying Expenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	•	-		organization o totalo	9.000 100.0
b	Total lobbying expenditures to influence public of Total lobbying expenditures to influence a legisla					
c	Total lobbying expenditures (add lines 1a and 1b	, ,	, ,,			
d	Other exempt purpose expenditures	-			-	
8	Total exempt purpose expenditures (add lines 1					
f	Lobbying nontaxable amount. Enter the amount					
	columns.	nom the lonewing tax				
ſ	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	is:		
ŀ	Not over \$500,000		ount on line 1e			
ŀ	Over \$500,000 but not over \$1,000,000		15% of the excess o	ver \$500,000		
F	Over \$1,000,000 but not over \$1,500,000		10% of the excess o			
Ì	Over \$1,500,000 but not over \$17,000,000		5% of the excess ov			
f	Over \$17,000,000	\$1,000,000		<u>,.,,</u>		
g	Grassroots nontaxable amount (enter 25% of lin				Committee Seattle Committee Committee	CONTRACTOR
h	Subtract line 1g from line 1a If zero or less, ente	•				
i	Subtract line 1f from line 1c If zero or less, ente	r-0- · · · · · ·				
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did th	e organization file Fo	rm 4720		
	reporting section 4911 tax for this year?					Yes No
	(Some organizations that made a s			e to complete all		ns below.
	Lobi	ying Expenditures	During 4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
EEA					Schedule C (Fe	orm 990 or 990-EZ) 2019

	Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled F	orm	5768		
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)	<u> </u>	(b)	
	conption of the lobbying activity	Yes	No	/	Amount	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			Law or		
	referendum, through the use of			E. William		6
а	Volunteers?					・多量
b	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>		
0	Publications, or published or broadcast statements?			<u> </u>		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>	<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·		Se. 15.0		116	/ day is serve
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	Luci Sur	86		And is the	
þ	If "Yes," enter the amount of any tax incurred under section 4912		19-10- 6 18-12- 1			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			11 24, 34	Abbam, 8 253 4 824	- ×1*3(3k 7
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1/5			To Make	A SECTION AND ADDRESS OF THE PARTY AND ADDRESS
i i i i d	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	,,(3),			Yes	No
4	Ware substantially all (90% or more) dues received condeductible by members?			1	162	
1	Were substantially all (90% or more) dues received nondeductible by members?			2	+	X
2	Did the organization make only in-nouse lobbying experiotides of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	• • •		3	+	X
₽ Pa	TREAST Complete if the organization is exempt under section 501(c)(4), section 501(c)	1(5)	OF SE		لــــــــــــــــــــــــــــــــــــ	
1-86	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."					, is
1	Dues, assessments and similar amounts from members		1		571	,868
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		GZ.Y		<u> </u>	,000
_	political expenses for which the section 527(f) tax was paid).		1.45. 3			
а	Current year		2a	4	124	,617
b	Carryover from last year		2b			7.0-
c	Total		2c		124	,617
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			,150
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					7
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?		4	1		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		44	,467
Pa	Supplemental Information		•			
Prov	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line instructions); and Part II-B, line 1. Also, complete this part for any additional information.	es 1 a	nd			
						, ,

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.

Department of the Treasury
Internal Revenue Service

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

Name of the organization

En

OMB No 1545-0047

2019

Open to Public Inspection

Name	of the organization		Employer identification number
Ame	rican Council of Engineering Companies o	f North	56-1334000
Pa	t I Organizations Maintaining Donor Advised Fu	inds or Other Similar Funds or Acco	unts.
	Complete if the organization answered "Yes" or	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wi	riting that the assets held in donor advised	-
	funds are the organization's property, subject to the organization	on's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor ad		
	only for charitable purposes and not for the benefit of the dono		
	conferring impermissible private benefit?		
Pa			
	Complete if the organization answered "Yes" of	n Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu	cation) Preservation of	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualified	l conservation contπbution in the form of a co	inservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2b
c	Number of conservation easements on a certified historic structure.	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at		
-	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	2d
3	Number of conservation easements modified, transferred, rele		
-	tax year ►	,g,	• • • • • • • • • • • • • • • • • • • •
4	Number of states where property subject to conservation ease	ment is located	
5	Does the organization have a written policy regarding the period		
•	violations, and enforcement of the conservation easements it i		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha		
-	>	3	3 .
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conservation e	asements during the year
-	▶ \$	3	5 ,
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4))(B)(ı)
-	,		
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense state	
	balance sheet, and include, if applicable, the text of the footnot		
	organization's accounting for conservation easements	•	
Pa	t III Organizations Maintaining Collections	of Art, Historical Treasures, or C	Other Similar Assets.
_	Complete if the organization answered "Yes"		
1a	If the organization elected, as permitted under FASB ASC 958.		alance sheet works
	of art, historical treasures, or other similar assets held for publi	•	
	service, provide, in Part XIII the text of the footnote to its finance		
b	If the organization elected, as permitted under FASB ASC 958,		ce sheet works of
_	art, historical treasures, or other similar assets held for public of	•	
	provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		
-	following amounts required to be reported under FASB ASC 95	_	i, provide trie
_	Revenue included on Form 990, Part VIII, line 1	_	> \$
a			
b	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	

	ule D (Form 990) 2019 American Council						56-1334		Page 2
Ь	rt III Organizations Maintaining C							sets (COII	uriueu)
3	Using the organization's acquisition, accession,	and other records,	check any	of the follo	owing that ma	ke signit	ricant use of its		
	collection items (check all that apply)			—			_		
`a	Public exhibition		a		or exchange p	orogram	5		
b	Scholarly research		θ	∐ Other					
C	Preservation for future generations	tions and alimbon h	anne Abare fe	thar tha a		ovomnt.	numana in Bad		
4	Provide a description of the organization's collect XIII	tions and explain r	now they to	unner the o	rganization's	exempt	purpose in Part		
5	During the year, did the organization solicit or red	ceive donations of	art, histori	cal treasure	es, or other su	mılar			
	assets to be sold to raise funds rather than to be	maintained as pa	rt of the or	ganization'	s collection?			. 🗌 Yes	☐ No
Par			 	<u> </u>					
	Complete if the organization ar		on Forn	n 990, Pa	art IV, line 9	9, or re	eported an amo	ount on Fe	orm
	990, Part X, line 21							. <u></u>	
1a	Is the organization an agent, trustee, custodian of								П.,
					• • • • • •		• • • • • • • • •	· · U Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII and	complete the follo	wing table	•					
							<u> </u>	ount	
С	3								
d	realistic carring the year					<u> </u>			
θ	Bioting daining and your	· · · · · · · · ·					+		
f	Ending balance					· ·		- 	-
2a	Did the organization include an amount on Form								∐ No
b	if "Yes," explain the arrangement in Part XIII Ch	eck here if the exp	lanation h	as been pro	ovided on Par	t XIII	· · · · · · · · · · ·		_ 니
Fai	rt V Endowment Funds. Complete if the organization ar	newered "Vee"	on Form	- 000 P	art IV line :	10			
	Complete if the organization at		Τ'					1 4 5 5 1	
4-	Paraman of ward belongs	(a) Current year	(b) [/] P	nor year	(c) Two years	back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance								
b	Contributions		+					 	
С	Net investment earnings, gains, and losses								
		-						 	
d	Grants or scholarships	· · · · · · · · · · · · · · · · · · ·	-	_		···········			
9	Other expenditures for facilities and								
	Administrativo expenses		 						
,	Administrative expenses		 					 	
g 2	End of year balance · · · · · · · · L Provide the estimated percentage of the current	year and halance	(line 1g. c	olumn (a))	hold as			_i	
	Board designated or quasi-endowment	year end balance	(lille 19, C	olumin (a))	ileiu as				
a	Permanent endowment > %								
C	Term endowment > %								
·	The percentages on lines 2a, 2b, and 2c should	egual 100%							
3a		•	on that an	held and	administered t	for the			
- Ou	organization by	m or the organizati	on mar an	o noid and				Г	Yes No
	(i) Unrelated organizations · · · · · · ·							. 3a(i)	
	(ii) Related organizations · · · · · · · ·							. 3a(ii)	
ь	If "Yes" on line 3a(ii), are the related organization	ns listed as require	d on Sche	dule R?				. 3b	
4	Describe in Part XIII the intended uses of the org	· ·							
Par	rt VI Land, Buildings, and Equipm						····-		
	Complete if the organization ar		on Forr	n 990, Pa	art IV, line	11a S	ee Form 990, i	art X, lin	e 10
	Description of property	(a) Cost or oth		T	or other basis		Accumulated	(d) Book	
	· · · · · · · · · · · · · · · · · · · ·	(investm		1	(other)		epreciation		
1a	Land	•		T					
b	Buildings		-						
c	Leasehold improvements								
d	Equipment				39,473		39,473		
9	Other	•							
Total	Add lines 1a through 1e (Column (d) must equ	al Form 990, Part	X. column	(B). line 10	c)				

('Security Deposit	3,8/3
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	▶ 5,873

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2Accrued Expenses	12,712	
(3Payroll Liabilities	5,980	
(4ACEC Natl Dues Payable	82,120	
(5NC QBS Facilitator Payable	6,188	4 (A)
(6)		
(7)		
(8)		のはなる。 1975年 - 1975年
(9)		Mark Laboration and Same Colombia and Colomb
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	107,000	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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

	the D (Form 990) 2019 American Council of Engineering Companies		6-133		Page 4
<u>Ka</u>	Reconciliation of Revenue per Audited Financial Statem	_	er Kett	ırn.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements $\cdot\cdot\cdot\cdot\cdot\cdot$		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments · · · · · · · · · · · · · · · · · · ·	2a			
b	Donated services and use of facilities	2b			
C	Recovenes of pnor year grants	2c			
d	Other (Describe in Part XIII)	2d	1.500		
0	Add lines 2a through 2d		2е		
3	Subtract line 2e from line 1		3		
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	4a			
ь	Other (Describe in Part XIII)	4b	1.500 \$4.500		
c	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·		4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) · · ·		5		
-	Reconciliation of Expenses per Audited Financial State			Return	
(F.G.	Complete if the organization answered "Yes" on Form 990,	Part IV line 12a	, per i	Cuiii.	
			141		
1	Total expenses and losses per addited interioris statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
þ	Prior year adjustments	2b			
C	Other losses · · · · · · · · · · · · · · · · · ·	2c			
d	Other (Describe in Part XIII)	2d	<u> </u>		
0	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		2е		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		ならなる		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · ·	4a	1 200		
b	Other (Describe in Part XIII)	4b	- 4		
С	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
Pai	tXIIIS Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lin	nes 1b and 2b, Part V, line 4, P	art X, lin	е	
	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any				
					,
		·		****	
					
		<u> </u>			
				· · · · · · · · · · · · · · · · ·	
					· · · · · ·
		 			

Schedule D (Form 990) 2019

EEA

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public

Employer identification number

American Council of Engineer	ring Compani	es of No	orth	· · · · · · · · · · · · · · · · · · ·	56-13	34000
Part.I Fundraising Activities Form 990-EZ filers are no				wered "Yes" on F	Form 990, Part IV,	line 17.
1 Indicate whether the organization rais				inc. Chack all that an		
a Mail solicitations	ea lanas unougn	_	-	f non-government gra		
		, H		f government grants	iiito	
=		<u>'</u> H		raising events		
=		9 ∐	Special fullul	aising events		
		.45	امرام المرام	a officer director t	mustoos	
2a Did the organization have a written or	_					es 🛛 No
or key employees listed in Form 990, b If "Yes," list the 10 highest paid individ						
compensated at least \$5,000 by the d		iliulaiseis) p	ursuani io ay	reements under winc	ii tile luliulaise: is to be	
compensated at least \$5,000 by the C	nganization					
	T	(III) D. 4 5		T	(v) Amount paid to	(vi) A
(i) Name and address of individual	(ii) Activity		ndraiser have or control of	(iv) Gross receipts	(or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(ii) / tourity		butions?	from activity	fundraiser listed in col (i)	organization
		Yes	No			
1						
2						
3						
4						
5						
6		-				
7						<u></u>
8						
· · · · · · · · · · · · · · · · · · ·						
9						
10						
	<u></u>		1			
Total			▶			
3 List all states in which the organization	is registered or li	censed to so	licit contribution	ons or has been notifi	ed it is exempt from	
registration or licensing						
						
				<u> </u>	·	
						
	-					
						
						
		_				<u></u>

	•	than \$15,000 of fundraising gross receipts greater than		d gross income on Forn	n 990-EZ, lines 1 and 6b	. List events with
•		gross receipts greater triain	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
ш	2	Less Contributions				
	3	Gross income (line 1 minus				
		line 2)				
	4	Cash prizes	· · · · · · · · · · · · · · · · · · ·			
	5	Noncash pnzes				····
suses	6	Rent/facility costs · · · · · · · ·	<u> </u>			
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses · · · · ·				
	10 11	Direct expense summary. Add lines Net income summary Subtract line				·
Pa	rt II		organization answered "			more than
		\$15,000 on Form 990-EZ,	line 6a.	,		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue · · · · · · · ·				
ses	2	Cash prizes				
Expenses	3	Noncash pnzes · · · · · · ·				
Direct	4	Rent/facility costs				
	5	Other direct expenses	Yes %	☐ Yes %	☐ Yes %	····
	6	Volunteer labor	☐ Yes %	% % % %	☐ Yes%	
	7	Direct expense summary Add lines	2 through 5 in column (d)	• • • • • • • • • • • • • • • • • • • •		
	8	Net gaming income summary Subtr	act line 7 from line 1, colum	nn (d)		
9 a	ls t	ter the state(s) in which the organizat the organization licensed to conduct g No," explain	-			· · · · Yes No
		ere any of the organization's gaming li Yes," explain.	censes revoked, suspende	d, or terminated during the	tax year?	Yes No
	_					

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Open to Public

Employer identification number Name of the organization 56-1334000 American Council of Engineering Companie **Questions Regarding Compensation** Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 272 202 24 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe SALE SA If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

56-1334000

Schedule J (Form 990) 2019 American Council of Engineering Companies of North

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

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

Schedule J (Form 990) 2019 (F) Compensation in column (B) reported as deferred on prior Form 990 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 196,979 0 Total of columns Œ) 12,285 0 Nontaxable benefits 9 7,662 0 (C) Retrement and other deferred compensation 4,235 (B) Breakdown of W-2 and/or 1099-MISC compensation (Ili) Other reportable compensation instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII 0 19,547 (ii) Bonus & incentive compensation 153,250 C (i) Base compensation (i) (II) \equiv €€ \equiv \equiv (E) Ξ €€ \equiv 1 Executive Director (A) Name and Title Jim Smith, P.E. EEA 9 15 16 œ 6 42 3 4 ~ က S 9 Ę

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.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public. Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

American Council of Engineering Companies of North	56-1334000
01. Form 990 governing body review (Part VI, line 11)	
No review was or will be conducted.	
no leview was of will so conducted.	
02. Governing documents, etc, available to public (Part VI, line 19)	
The governing documents are available for public inspection via the organ	
	12401011 5
website.	
03. Explanation of other changes in net assets or fund balances (Part XI	, line 9)
Tax Depreciation in excess of Book	
04. Part VI, response or note to any other line in Part VI	
Line 17 response to states with which a copy of 990 is required is: None	

OMB No 1545-0047 Inspection Employer identification number 56-1334000 <u>e</u> (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ► Go to www.irs.gov/Form990 for instructions and the latest information. ▶ Attach to Form 990. (b) Primary activity American Council of Engineering Companies of North (a) Name, address, and EIN (if applicable) of disregarded entity Department of the Treasury SCHEDULE R nternal Revenue Service Name of the organization (Form 990) Part

2019

Open to Public

Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2019 Ŷ (f) Direct controlling entity Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had (f)
Direct controlling entity End-of-year assets (e)
Public chanty status
(if section 501(c)(3)) (d) Exempt Code section (c) Legal domacle (state or foreign county) Legal domicile (state or foreign country) one or more related tax-exempt organizations during the tax year. (b) Primary activity Name, address, and EIN of related organization Partil E 3 ල € 3 E ල 1 3 3

Page 2

Percentage ownership ड Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, ŝ General or managing partner? Yes 56-1334000 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Ξ Yes No (h) Disproportionate allocaline 34, because it had one or more related organizations treated as a corporation or trust during the tax year (g) Share of end-of-year assets because it had one or more related organizations treated as a partnership during the tax year. Share of total income American Council of Engineering Companies of North excluded from tax under sections 512-514) Predominant income (related, unrelated, <u>e</u> Direct controlling entity ਉ (C) Legal domate (state or foreign country) Primary activity 9 Name, address, and EIN of related organization Schedule R (Form 990) 2019 Part IV Part'III ΙΞ ₹ 3 <u>ල</u> 3

				ı			1	ı	1	1
	(2(b)(13)	olled 32	N _o			×				
=	Section512(b)(13)	controller entity?	Yes							-
(F)	Percentage	ownership					-			
(6)		end-of-year assets			_			,		
(E)	Share of total	amoonia a								
(e)	Type of entity	(C corp, S corp, or trust)				Trust				
(p)	Direct controlling	entity				N/A				
(c)	Legal domicile	(state or foreign country)				МО				
(q)	Primary activity					Insurance				
(a) (b) (c) (d) (e)	Name, address, and EIN of related organization			(1) ACEC Business Insuranc, 43-6461633	701 Market Street Ste 1100	Saint Louis, MO 63101-1867	(2)	(6)	(4)	(5)

Schedule R (Form 990) 2019

EE

		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
		x
		1c ×
e Loans of loan guarantees by related organization(s)		
f Dividends from related organization(s)		1f x
g Sale of assets to related organization(s)		<u> 19 </u>
h Purchase of assets from related organization(s) · · · · · · · · · · · · · · · · · · ·		
i Exchange of assets with related organization(s)		1i
j Lease of facilities, equipment, or other assets to related organization(s)		
		The state of the s
k Lease of faculties, equipment, or other assets from related organization(s)		
Performance of services or membership or fundraising solicitations for related organization(s)		=
m Performance of services or membership or fundraising solicitations by related organization(s)		
n Shannq of facilities, equipment, mailing lists, or other assets with related organization(s)		
		Ĺ
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
p Reimbursement paid to related organization(s) for expenses		1 of
r Other transfer of cash or property to related organization(s)		1r ×
s Other transfer of cash or property from related organization(s)		
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	onships and transaction thresholds	
(a) (b)	(c)	(p)
Name of related organization Transaction (type (a-s)	Amount involved	Method of determining amount involved
(1)		
(3)		
/_1		
(3)		
(4)		
(9)		
EEA		Schedule R (Form 990) 2019

American Council of Engineering Companies of North

Schedule R (Form 990) 2019

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

Page 4

56-1334000

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

Schedule R (Form 990) 2019 Percentage ownership 3, General or managing partner? ŝ 9 Yes amount in box 20 of Schedule K-1 (Form 1065) Code V-UBI Disproportionat allocations Ŷ Ξ Yes Share of end-of-year assets Ð Share of total income € Are all partners section 501(c)(3) organizations Yes No <u>e</u> Predomnant income (related, unrelated, excluded from tax under sections 512-514) ਉ Legal domicile (state or foreign country) Primary activity **@** Name, address, and EIN of entity 5 (11) (12) Ξ 3 E (2) ල 9 8 <u>6</u> EEA 3