

Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning and ending

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SOCIETY OF AMERICAN MILITARY ENGINEERS		D Employer identification number 53-0196491
	Doing business as		E Telephone number 703-549-3800
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 10,432,609.
	1420 KING STREET	100	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code ALEXANDRIA, VA 22314		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: JOSEPH SCHROEDEL SAME AS C ABOVE			H(c) Group exemption number ▶ 1278
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.SAME.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1924 M State of legal domicile: DC

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROMOTE & FACILITATE ENGINEERING SUPPORT FOR NAT'L SECURITY AMONG UNIFORMED SRVCS AND RELATED PROF.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	53
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	53
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	29
	6 Total number of volunteers (estimate if necessary)	6	1000
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	664,951.
b Net unrelated business taxable income from Form 990-T, line 39	7b	49,210.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	0.	0.
	9 Program service revenue (Part VIII, line 2g)	7,151,149.	7,610,479.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	171,397.	374,073.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	40,718.	101,469.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,363,264.	8,086,021.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	24,735.	74,153.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,337,802.	2,474,182.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,981,176.	4,888,253.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,343,713.	7,436,588.	
19 Revenue less expenses. Subtract line 18 from line 12	19,551.	649,433.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 7,424,787.	End of Year 8,504,655.
	21 Total liabilities (Part X, line 26)	1,927,230.	1,734,488.
	22 Net assets or fund balances. Subtract line 21 from line 20	5,497,557.	6,770,167.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	JOSEPH SCHROEDEL, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name FRANK H. SMITH	Preparer's signature <i>Frank H. Smith</i>	Date 11/12/20	Check if self-employed <input type="checkbox"/>	PTIN P00639053
	Firm's name ▶ MARCUM LLP	Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Firm's EIN ▶ 11-1986323	Phone no. 202-227-4000	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO PROVIDE EDUCATION AND SUPPORT TO THE ENGINEERING COMPONENTS OF THE MILITARY AND UNIFORMED SERVICES AND OTHER FEDERAL, STATE AND LOCAL GOVERNMENT AGENCIES RESPONSIBLE FOR THE NATION'S INFRASTRUCTURE, AND TO ADVANCE THE PARTNERSHIP BETWEEN GOVERNMENT AND THE ARCHITECTURE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 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 \$ 4,299,335. including grants of \$ 60,153.) (Revenue \$ 3,442,202.) CONFERENCES AND MEETINGS - SOCIETY OF AMERICAN MILITARY ENGINEERS (SAME)'S ONGOING MISSION IS TO PROVIDE NETWORKING AND EDUCATIONAL OPPORTUNITIES WITHIN THE ENGINEERING COMMUNITY WITH A FOCUS ON THE DEPARTMENT OF DEFENSE (DOD) AND FEDERAL AGENCIES. SAME MEETINGS AND CONFERENCES PROVIDE OPPORTUNITIES FOR MEMBERS TO EXCHANGE KNOWLEDGE, NETWORK AND BUILD RELATIONSHIPS WITHIN THE ARCHITECTURE, ENGINEERING, AND CONSTRUCTION (A/E/C) COMMUNITIES. IN 2019, SAME HOSTED MORE THAN 9 EVENTS IN THE UNITED STATES. EVENTS IN 2019 INCLUDED THE JOINT ENGINEERING TRAINING CONFERENCE AND EXPO, DOD AND FEDERAL AGENCY BRIEFINGS, SMALL BUSINESS CONFERENCE, GOLDEN EAGLE AWARDS DINNER, CONTINUING EDUCATION PROGRAMS, POST LEADER WORKSHOP, TRANSITION WORKSHOP AND JOB FAIRS, A JOINT EVENT WITH THE DEPARTMENT OF VETERAN

4b (Code:) (Expenses \$ 1,404,478. including grants of \$) (Revenue \$ 2,060,573.) MEMBERSHIP ACTIVITIES AND POST OPERATIONS - SAME MEMBERSHIP ACTIVITIES SUPPORT THE COMMUNITY OF MORE THAN 28,000 A/E/C, ENVIRONMENTAL AND FACILITY MANAGEMENT PROFESSIONALS. ACTIVITIES INCLUDE RECRUITING AND RETAINING MEMBERS, UPDATING MEMBER RECORDS, RENEWING MEMBERSHIPS, RECOGNIZING MEMBERS FOR LONGEVITY IN SAME, AND INTERFACING WITH SAME POSTS TO SUPPORT THEIR RECRUITMENT AND RETENTION EFFORTS. IN SUPPORT OF THE OFFICERS, SAME PROVIDES TRAINING WORKSHOPS FOR POST LEADERS.

SAME PROVIDES FUNDING TO ITS 105 POSTS (CHAPTERS) AND JUST OVER 25 STUDENT CHAPTERS LOCATED IN 17 REGIONS THROUGHOUT THE UNITED STATES, EUROPE AND THE PACIFIC. POSTS BRING TOGETHER PROFESSIONALS IN ENGINEERING AND RELATED FIELDS FOR NETWORKING AND PROFESSIONAL

4c (Code:) (Expenses \$ 714,133. including grants of \$) (Revenue \$ 673,311.) SOCIETY PUBLICATIONS (PRINT AND DIGITAL) - SAME PUBLISHES A HIGH-QUALITY PRINT PUBLICATION - THE MILITARY ENGINEER MAGAZINE. THE MILITARY ENGINEER (TME) MAGAZINE KEEPS MEMBERS INFORMED ABOUT ISSUES IMPACTING THE A/E/C INDUSTRY, ENVIRONMENTAL AND FACILITY MANAGEMENT FIELDS, AS THEY RELATE TO DOD AND OTHER FEDERAL AGENCIES. TME IS PUBLISHED SIX TIMES PER YEAR AND HAD ONE SPECIAL EDITION IN 2019. THE TME HAS A DISTRIBUTION OF NEARLY 28,000. ON AVERAGE, TME HAS 100 NON-MEMBER SUBSCRIBERS, WHICH INCLUDES LIBRARIES, UNIVERSITIES, DEFENSE AGENCIES AND INTERESTED INDIVIDUALS. MAGAZINE SUBSCRIPTIONS RANGE FROM ONE MAGAZINE TO BULK SUBSCRIPTIONS OF UP TO 15 MAGAZINES. TME MAIN THEMES FOR 2019 INCLUDED ENVIRONMENTAL ENGINEERING, INFRASTRUCTURE, ENERGY AND SUSTAINABILITY, PROJECT DELIVERY, ENVIRONMENTAL RESTORATION,

4d Other program services (Describe on Schedule O.) (Expenses \$ 272,579. including grants of \$ 14,000.) (Revenue \$ 7,866.)

4e Total program service expenses 6,690,525.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Contains 21 main questions and sub-questions (a-f) regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question number, Yes, No. Rows 1a, 1b, 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows 1a-9. 1a: 53, 1b: 53. 2: X, 3: X, 4: X, 5: X, 6: X, 7a: X, 7b: X, 8a: X, 8b: X, 9: X.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows 10a-16b. 10a: X, 10b: X, 11a: X, 12a: X, 12b: X, 12c: X, 13: X, 14: X, 15a: X, 15b: X, 16a: X, 16b: X.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 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. [X] Own website [] Another's website [X] 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.
20 State the name, address, and telephone number of the person who possesses the organization's books and records WILLIAM HOFFMAN - 703-549-3800 1420 KING STREET, NO. 100, ALEXANDRIA, VA 22314

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOSEPH SCHROEDEL EXECUTIVE DIRECTOR	40.00 4.00			X				200,000.	0.	13,206.
(2) ANN MCLEOD DIR OF MTGS, MKTG AND BUS. DEV.	40.00			X				156,970.	0.	23,181.
(3) ALLISON INGRAM DIR OF OPS AND FIN. - UNTIL 02/2019	40.00 4.00			X				165,600.	0.	232.
(4) JOHN MEDEIROS COO - 02/2019 UNTIL 11/2019	40.00			X				160,000.	0.	1,399.
(5) STEPHEN KARL DIR OF COMMUNICATIONS & EDITOR	40.00				X			104,548.	0.	27,661.
(6) WILLIAM HOFFMAN SENIOR ACCOUNTANT	40.00 4.00			X				79,164.	0.	11,733.
(7) WENDELL BARNES PRESIDENT	5.00	X		X				0.	0.	0.
(8) HEATHER WISHART-SMITH PRESIDENT-ELECT	3.00	X		X				0.	0.	0.
(9) MARK HANDLEY VICE PRESIDENT	3.00	X		X				0.	0.	0.
(10) ROBERT KEYSER VICE PRESIDENT	3.00	X		X				0.	0.	0.
(11) NEAL WRIGHT VICE PRESIDENT	3.00	X		X				0.	0.	0.
(12) CINDY LINCICOME, VP - UNTIL 05/2019, COMMITTEE COUNCIL CHAIR	3.00	X		X				0.	0.	0.
(13) RAY WILLCOCKS, CHAIR, ACADEMY OF FELLOWS - UNTIL 05/2019	3.00	X		X				0.	0.	0.
(14) MARVIN FISHER PAST PRESIDENT	3.00	X		X				0.	0.	0.
(15) SAL NODJOMIAN PAST PRESIDENT - UNTIL 05/2019	3.00	X		X				0.	0.	0.
(16) JOHN BLAISDELL REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(17) NORM CAMPBELL REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JEFF DAVIS REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(19) PETE DELANO REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(20) JEFFREY DUPLANTIS REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(21) JACKIE HACKER REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(22) ANTHONY HIGDON REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(23) RICHARD HOUGHTON REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(24) R. SCOTT JARVIS REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(25) SHARON KROCK REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(26) MIRO KURKA REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
1b Subtotal								866,282.	0.	77,412.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								866,282.	0.	77,412.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CENTERPLATE NEW ORLEANS CONVENTION CENTER 900 CONV CNTR BLVD, NEW ORLEANS, LA 70130	CONVENTION CENTER	1,013,586.
OVATION, INC. 1138 2ND AVENUE, NORTH, NASHVILLE, TN 37208	AUDIO VISUAL AND EXHIBITOR SUPPORT	451,440.
AIRMARKTAMPA 333 S FRANKLIN STREET, TAMPA, FL 33602	CATERING FOR JETC 2019	371,973.
THE EXPO GROUP, 5931 WEST CAMPUS CIRCLE DRIVE, IRVING, TX 75063	EXPOSITION SET-UP SERVICES	304,488.
KAY BAILEY HUTHISON CONVENTION CENTER 650 S GRIFFIN STREET, DALLAS, TX 75202	CONVENTION CENTER	190,890.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **12**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JAY MANIK REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(28) PATRICE MELANCON REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(29) CINDY MILLER REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(30) SHAWN MOORE REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(31) TRICIA MUXLOW REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(32) KENNETH NEW REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(33) DAVE NEWKIRK REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(34) ROBERTA PERRY-SCHLICHER REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(35) ANTHONY PETROCCHITTO REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(36) STEPHEN PRANGER REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(37) JASON SWEET REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(38) JANETTE TUDOR REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(39) ERIC WARNER REGIONAL VICE PRESIDENT	2.00	X						0.	0.	0.
(40) KEVIN WILSON REG. VICE PRESIDENT - UNTIL 05/2019	2.00	X						0.	0.	0.
(41) JOSEPH ANGELL COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(42) ADAM BOUBEDE COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(43) KAREN BUNIAK COMMITTEE COUNCIL CHAIR-UNTIL 5/2019	1.00	X						0.	0.	0.
(44) MARIO BURGOS COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(45) MICHELLE CHAMBLISS COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(46) RICHARD COX COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) WILLIAM HAIGHT COMMITTEE COUNCIL CHAIR-UNTIL 5/2019	1.00	X						0.	0.	0.
(48) DAVE HOWE COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(49) JEFFREY LEONARD COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(50) SETH LORIMER COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(51) JOE MANOUS COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(52) VICTORIA MECHTLY COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(53) JOHN MOGGE COMMITTEE COUNCIL CHAIR	1.00 3.00	X						0.	0.	0.
(54) KATHELINA OFF COMMITTEE COUNCIL CHAIR-UNTIL 5/2019	1.00 4.00	X						0.	0.	0.
(55) TAMARA OLSON COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(56) DAVID PACKARD COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(57) SCOTT PROSUCH COMMITTEE COUNCIL CHAIR-UNTIL 5/2019	1.00	X						0.	0.	0.
(58) JAMES ROMASZ COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(59) BLAIR SCHANTZ COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(60) MARK TOMASSONI COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(61) MARK ZANARDI COMMITTEE COUNCIL CHAIR	1.00	X						0.	0.	0.
(62) LISA THOELE YOUNG MEMBER BOARD CHAIR	1.00	X						0.	0.	0.
(63) JOHN ACCARDI ELECTED DIRECTOR	1.00	X						0.	0.	0.
(64) ROBERT BEVINS ELECTED DIRECTOR	1.00	X						0.	0.	0.
(65) JOHN CAWTHORNE ELECTED DIRECTOR - UNTIL 05/2019	1.00	X						0.	0.	0.
(66) MICHAEL DARROW ELECTED DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a CONFERENCE REGISTR./SPONSORSHIPS	Business Code 900099	4,970,637.	3,442,202.		1,528,435.	
	b MEMBERSHIP DUES	900099	2,060,573.	2,060,573.			
	c SOCIETY PUBLICATIONS	541800	571,403.	7,921.	563,482.		
	d CONTINUING EDUCATION	900004	7,866.	7,866.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			7,610,479.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		170,960.			170,960.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	2,542,465.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	2,339,352.				
	c Gain or (loss)	7c	203,113.				
d Net gain or (loss)			203,113.			203,113.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		6,797.				
b Less: cost of goods sold	10b	7,236.					
c Net income or (loss) from sales of inventory			-439.			-439.	
Miscellaneous Revenue	11 a WEB ADVERTISING	Business Code 900004	101,408.		101,408.		
	b ONLINE DIRECTORY	900004	500.		500.		
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			101,908.			
12 Total revenue. See instructions			8,086,021.	5,518,562.	664,951.	1,902,508.	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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 and domestic governments. See Part IV, line 21 ...	14,000.	14,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	60,153.	60,153.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	811,485.	399,136.	412,349.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,204,859.	1,201,222.	3,637.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	55,644.	45,492.	10,152.	
9 Other employee benefits	249,770.	201,424.	48,346.	
10 Payroll taxes	152,424.	120,620.	31,804.	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	33,544.	33,544.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	38,920.		38,920.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	274,761.	240,688.	34,073.	
12 Advertising and promotion	71,868.	63,353.	8,515.	
13 Office expenses	327,773.	268,218.	59,555.	
14 Information technology	143,812.	117,712.	26,100.	
15 Royalties				
16 Occupancy	168,366.	141,077.	27,289.	
17 Travel	204,366.	196,076.	8,290.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	3,047,531.	3,043,838.	3,693.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	72,715.	57,543.	15,172.	
23 Insurance	55,954.	45,705.	10,249.	
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 DUES TO POSTS	209,014.	209,014.		
b PRODUCTION & PRINTING	154,245.	154,003.	242.	
c AWARDS & SPONSORSHIPS	71,667.	66,567.	5,100.	
d OTHER TAXES & LICENSES	13,717.	11,140.	2,577.	
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	7,436,588.	6,690,525.	746,063.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	296,755.	1	275,443.
	2 Savings and temporary cash investments	616,002.	2	652,913.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	189,988.	4	301,570.
	5 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		5	
	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	0.	7	237.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	164,405.	9	223,447.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,100,204.		
	b Less: accumulated depreciation	10b 1,403,451.		
	11 Investments - publicly traded securities	726,801.	10c	696,753.
	12 Investments - other securities. See Part IV, line 11	5,422,087.	11	6,333,884.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	8,749.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	7,424,787.	15	20,408.	
		16	8,504,655.	
Liabilities	17 Accounts payable and accrued expenses	403,081.	17	313,096.
	18 Grants payable		18	
	19 Deferred revenue	1,524,149.	19	1,421,392.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,927,230.	26	1,734,488.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	5,497,557.	27	6,770,167.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	5,497,557.	32	6,770,167.
	33 Total liabilities and net assets/fund balances	7,424,787.	33	8,504,655.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,086,021.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,436,588.
3	Revenue less expenses. Subtract line 2 from line 1	3	649,433.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,497,557.
5	Net unrealized gains (losses) on investments	5	623,177.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,770,167.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 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 Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or 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?
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 Consolidated 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?
If the organization changed either its oversight process or selection process during the tax year, explain 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 Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2019)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,059.	27,739.				53,798.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	5143952.	5515466.	5838643.	6657340.	7046997.	30202398.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	5170011.	5543205.	5838643.	6657340.	7046997.	30256196.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	295.	11,651.	976.	540.		13,462.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			176,196.	139,646.	161,718.	477,560.
c Add lines 7a and 7b	295.	11,651.	177,172.	140,186.	161,718.	491,022.
8 Public support. (Subtract line 7c from line 6.)						29765174.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	5170011.	5543205.	5838643.	6657340.	7046997.	30256196.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	265,201.	159,457.	184,477.	184,432.	170,960.	964,527.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	47,913.	96,577.	40,279.	72,657.	49,210.	306,636.
c Add lines 10a and 10b	313,114.	256,034.	224,756.	257,089.	220,170.	1271163.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	5483125.	5799239.	6063399.	6914429.	7267167.	31527359.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	94.41 %
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	94.24 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	4.03 %
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	4.64 %

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization SOCIETY OF AMERICAN MILITARY ENGINEERS Employer identification number 53-0196491

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, lines 2a-2d, number of modified easements, states where located, monitoring policy, staff hours, expenses, and requirements of section 170(h)(4)(B)(i).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include 1a) text of footnote for public service, 1b) amounts for art collections, and 2) amounts for financial gain.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		219,970.		219,970.
b Buildings		1,233,437.	809,551.	423,886.
c Leasehold improvements				
d Equipment		47,646.	26,273.	21,373.
e Other		599,151.	567,627.	31,524.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				696,753.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely held equity interests, (3) Other, (A) through (H), and Total.

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows include (1) through (9) and Total.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows include (1) through (9) and Total.

Part X Other Liabilities.

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

Table with 2 columns: (a) Description of liability, (b) Book value. Rows include 1. (1) Federal income taxes, (2) through (9), and Total.

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 ... [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

Part XIII Supplemental Information.

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

PART X, LINE 2:

MANAGEMENT OF SAME BELIEVES THAT IT HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT DID NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAXES IN ITS CONSOLIDATED FINANCIAL STATEMENTS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization **SOCIETY OF AMERICAN MILITARY ENGINEERS** Employer identification number **53-0196491**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (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
THE SOCIETY OF AMERICAN MILITARY ENGINEERS FOUNDATION - 1420 KING STREET, SUITE 100 - ALEXANDRIA, VA 22314	81-1960637	501(C)(3)	14,000.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **1.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MEDAL WINNER STIPENDS TO ATTEND JETC	60	60,153.	0.		

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

PART I, LINE 2:

BEFORE PROVIDING FUNDING, SAME OBTAINS INFORMATION ABOUT THESE DOMESTIC ORGANIZATIONS TO DETERMINE THAT THEIR PURPOSE IS TAX-EXEMPT IN NATURE. IN 2019, SAME PROVIDED THE SOCIETY OF AMERICAN MILITARY ENGINEERS FOUNDATION (THE FOUNDATION), A RELATED ORGANIZATION UNDER 501(C)(3), GENERAL SUPPORT FOR OPERATING EXPENSES.

STIPENDS AND ASSISTANCE TO INDIVIDUALS ARE IN FURTHERANCE OF ATTENDANCE, PARTICIPATION AND RECOGNITION OF SAME'S TAX-EXEMPT EVENTS AND ACTIVITIES.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization: **SOCIETY OF AMERICAN MILITARY ENGINEERS**
 Employer identification number: **53-0196491**

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b 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 explain

2 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?

3 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 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?
- 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.

5 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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 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

8 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 in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOSEPH SCHROEDEL EXECUTIVE DIRECTOR	(i)	200,000.	0.	0.	10,000.	3,206.	213,206.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ANN MCLEOD DIR OF MTGS, MKTG AND BUS. DEV.	(i)	146,970.	10,000.	0.	7,624.	15,557.	180,151.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALLISON INGRAM DIR OF OPS AND FIN. - UNTIL 02/2019	(i)	165,600.	0.	0.	0.	232.	165,832.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN MEDEIROS COO - 02/2019 UNTIL 11/2019	(i)	160,000.	0.	0.	0.	1,399.	161,399.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

FOR THE YEAR ENDED DECEMBER 31, 2019, JOSEPH SCHROEDEL, EXECUTIVE DIRECTOR,
WAS PROVIDED TRAVEL FOR HIS SPOUSE TO ATTEND SAME'S JOINT ENGINEER TRAINING
CONFERENCE AND SMALL BUSINESS CONFERENCE. THIS WAS FOR A BONA FIDE BUSINESS
PURPOSE AND IN ACCORDANCE WITH HIS EMPLOYMENT CONTRACT.

PART I, LINE 7:

BONUSES WERE AWARDED FOR THE OFFICERS AND HIGHEST COMPENSATED EMPLOYEES
BASED ON AN APPRAISAL OF THEIR PERFORMANCES.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

SOCIETY OF AMERICAN MILITARY ENGINEERS

Employer identification number

53-0196491

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENGINEERING AND CONSTRUCTION INDUSTRY IN THE INTEREST OF NATIONAL
SECURITY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

AFFAIRS, ENGINEER DINNERS TO HONOR 2019 GRADUATES OF THE SERVICE
ACADEMIES AND MULTIPLE CONTINUING EDUCATION WEBINARS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

DEVELOPMENT IN A WIDE RANGE OF POST PROGRAMS AND ACTIVITIES, WHICH MAY
INCLUDE EDUCATION AND TRAINING EVENTS, MENTORING PROGRAMS FOR YOUNG
MEMBERS AND SMALL BUSINESSES, AND OUTREACH OPPORTUNITIES TO FUTURE
ENGINEERS (COLLEGE AND K-12 STUDENTS).

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

ASSET MANAGEMENT, HEALTH AND SAFETY, HUMANITARIAN AND CIVIC ASSISTANCE,
AND DESIGN AND CONSTRUCTION.

THE PRINT VERSION OF TME IS ONLINE AT WWW.SAME.ORG/TME AS AN

INTERACTIVE PDF. ADDITIONALLY, "ONLINE EXCLUSIVE" ARTICLES ARE

PUBLISHED APPROXIMATELY EVERY TWO WEEKS TO KEEP THE CONTENT FRESH

BETWEEN PUBLICATION DATES.

THE SAME DIRECTORY OF MEMBER COMPANIES AND ORGANIZATIONS (DIRECTORY) IS

PUBLISHED ONLINE AND PROVIDES A LISTING OF SAME MEMBER COMPANIES.

CONTACT INFORMATION OF CORPORATE LEADERS FOR USE IN PARTNERING AND

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization SOCIETY OF AMERICAN MILITARY ENGINEERS	Employer identification number 53-0196491
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TEAMING AGREEMENTS, AS WELL AS A LISTING OF MEMBER COMPANIES BY SAME POST, IS PART OF THE INFORMATION CAPTURED IN THE PUBLICATION. THE PUBLICATION ALSO CAPTURES COMPANY DESCRIPTION, SIZE, REVENUE, NUMBER OF EMPLOYEES, AND OFFICE LOCATIONS. CONSIDERED A GO-TO PUBLICATION BY MANY SAME MEMBERS, THE DIRECTORY IS USED THROUGHOUT THE YEAR BY GOVERNMENT AND INDUSTRY DECISION MAKERS FOR PARTNERING AND DURING THE PRE-SOLICITATION PROCESS TO SURVEY INDUSTRY CAPABILITIES FOR FUTURE PROCUREMENTS. ADDITIONALLY, IN 2019, A MEMBER DIRECTORY WAS CREATED AND DISTRIBUTED BY AN OUTSIDE VENDOR, AND WAS AVAILABLE FOR PURCHASE BY SUSTAINING AND INDIVIDUAL MEMBERS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CONTINUING EDUCATION

EXPENSES \$ 272,579. INCLUDING GRANTS OF \$ 14,000. REVENUE \$ 7,866.

FORM 990, PART VI, SECTION A, LINE 6:

ANY INDIVIDUAL, PRIVATE COMPANY, PUBLIC AGENCY, NON-PROFIT ORGANIZATION, ACADEMIC INSTITUTION CAN JOIN THE MEMBERSHIP OF SAME. AN INDIVIDUAL MEMBER MAY BE CLASSIFIED AS A STUDENT MEMBER, YOUNG MEMBER, PUBLIC SECTOR MEMBER, REGULAR MEMBER, FULLY RETIRED MEMBER, AND LIFE MEMBER. THE FOLLOWING CATEGORIES OF MEMBERSHIP FOR COMPANIES, NON-PROFITS ORGANIZATIONS, ACADEMIC INSTITUTIONS, AND PUBLIC AGENCIES ARE: SUSTAINING MEMBERS, PUBLIC AGENCY, NON-PROFIT AND ACADEMIC INSTITUTION MEMBERS, AND STUDENT CHAPTER MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A:

THE PRESIDENT APPOINTS A NOMINATING COMMITTEE OF SEVEN SOCIETY MEMBERS

COPY

Name of the organization SOCIETY OF AMERICAN MILITARY ENGINEERS	Employer identification number 53-0196491
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(REPRESENTING A CROSS-SECTION OF MEMBERSHIPS) WHICH NOMINATES ONE OR MORE CANDIDATES FOR ELECTION TO THE BOARD OF DIRECTORS. IN THE CASE OF A TIE VOTE BETWEEN TWO OR MORE CANDIDATES FOR THE SAME OFFICE, THE MEMBERS OF THE BOARD OF DIRECTORS WILL DECIDE BY BALLOT.

FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBERSHIP (AS MENTIONED IN LINE 6) MUST APPROVE ANY CHANGES TO SAME'S CONSTITUTION.

FORM 990, PART VI, SECTION B, LINE 11B:

AFTER PREPARATION BY AN INDEPENDENT CPA FIRM, THE DRAFT VERSION OF THE FEDERAL FORM 990 IS REVIEWED BY THE DIRECTOR OF FINANCE, ADMINISTRATION AND OPERATIONS, THE EXECUTIVE DIRECTOR, AND MEMBERS OF THE AUDIT COMMITTEE. THE FORM 990 IS POSTED TO THE SECTION OF THE WEBSITE THAT IS AVAILABLE TO ALL BOARD MEMBERS BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY EACH OFFICER, DIRECTOR, AND EMPLOYEE AND ACKNOWLEDGED IN WRITING. THE EXECUTIVE DIRECTOR MONITORS POLICY COMPLIANCE WITH ANNUAL COMPLIANCE STATEMENTS AND BY RESPONDING TO QUESTIONS ABOUT THE POLICY. SHOULD A CONFLICT ARISE, THE OFFICER, DIRECTOR, OR EMPLOYEE MAY RECUSE HIMSELF/HERSELF FROM INVOLVEMENT IN OR DISCUSSION OR DECISION THAT HE OR SHE BELIEVE THEY HAVE A CONFLICT WITHOUT GOING THROUGH THE PROCESS TO DETERMINE IF A CONFLICT EXISTS. IF A DISCLOSURE OF A CONFLICT IS MADE AND A REVIEW HAPPENS, DURING THE REVIEW, THE PERSON WHO HAS THE CONFLICT IS PROHIBITED FROM PARTICIPATING IN DISCUSSIONS UNTIL THE CONFLICT IS RESOLVED AND DISCLOSED AS APPROPRIATE.

Name of the organization SOCIETY OF AMERICAN MILITARY ENGINEERS	Employer identification number 53-0196491
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FORM 990, PART VI, SECTION B, LINE 15:

SAME HAS ESTABLISHED A COMPENSATION COMMITTEE CONSISTING OF THREE BOARD MEMBERS; PRESIDENT (ELECTED), VICE PRESIDENT (ELECTED), AND PAST PRESIDENT (ELECTED) TO REVIEW THE SALARY AND COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR USING VARIOUS CRITERIA. SALARY SURVEYS ARE REVIEWED ANNUALLY. THE COMPENSATION COMMITTEE EVALUATES PERFORMANCE AGAINST MAJOR ELEMENTS OF THE POSITION DESCRIPTION AND DETERMINES THE APPROPRIATE SALARY ADJUSTMENTS AND BONUS. EMAIL DOCUMENTATION IS PROVIDED ON THIS DETERMINATION.

WHEN HIRING FOR DIRECTOR POSITIONS, THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE REVIEW SALARY SURVEY DATA, ASSESSING THE SALARIES OF VIABLE CANDIDATES FOR THE POSITION. OFFERS ARE MADE USING SALARIES COMPARABLE TO OTHER SAME DIRECTORS, TAKING INDIVIDUAL SCOPE AND LEVEL OF RESPONSIBILITIES INTO CONSIDERATION. THE LAST COMPENSATION REVIEW WAS UNDERTAKEN IN MARCH, 2017.

FORM 990, PART VI, SECTION C, LINE 19:

ALL SAME GOVERNING DOCUMENTS, INCLUDING CONFLICT OF INTEREST STATEMENTS ARE AVAILABLE ON SAME'S WEBSITE. ANNUAL REPORTS ARE ALSO AVAILABLE ON THE WEBSITE. SPECIFIC FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST DIRECTLY TO THE DIRECTOR OF FINANCE, ADMINISTRATION AND OPERATIONS.

COPY

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization **SOCIETY OF AMERICAN MILITARY ENGINEERS** Employer identification number **53-0196491**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
SOCIETY OF AMERICAN MILITARY ENGINEERS FOUNDATION - 81-1960637, 1420 KING STREET, SUITE 100, ALEXANDRIA, VA 22314	TO SUPPORT EDUCATIONAL AND SCIENTIFIC PURPOSES OF SAME	DISTRICT OF COLUMBIA	501(C)(3)	LINE 12A, I	SOCIETY OF AMERICAN MILITARY ENGINEERS		X

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

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