

Form **990**

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.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015
Open to Public Inspection

A For the 2015 calendar year, or tax year beginning and ending

B Check if applicable: <input 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 <p align="center">SOCIETY OF AMERICAN MILITARY ENGINEERS</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p align="center">607 PRINCE STREET</p> City or town, state or province, country, and ZIP or foreign postal code <p align="center">ALEXANDRIA, VA 22314</p> F Name and address of principal officer: JOSEPH SCHROEDEL SAME AS C ABOVE	D Employer identification number <p align="center">53-0196491</p> E Telephone number <p align="center">703-549-3800</p> G Gross receipts \$ 6,618,300. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) 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

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROMOTE & FACILITATE ENGINEERING SUPPORT FOR NAT'L SECURITY AMONG UNIFORMED SRVCS & 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 49 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 49 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 26 6 Total number of volunteers (estimate if necessary) 6 800 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 548,146. 7b Net unrelated business taxable income from Form 990-T, line 34 7b 57,163.																									
Revenue	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center">Prior Year</th> <th align="center">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td align="right">39,688.</td> <td align="right">26,059.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td align="right">5,876,714.</td> <td align="right">5,699,484.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td align="right">307,116.</td> <td align="right">265,057.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td align="right">11,543.</td> <td align="right">3,353.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td align="right">6,235,061.</td> <td align="right">5,993,953.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	39,688.	26,059.	9 Program service revenue (Part VIII, line 2g)	5,876,714.	5,699,484.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	307,116.	265,057.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,543.	3,353.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,235,061.	5,993,953.							
	Prior Year	Current Year																								
8 Contributions and grants (Part VIII, line 1h)	39,688.	26,059.																								
9 Program service revenue (Part VIII, line 2g)	5,876,714.	5,699,484.																								
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	307,116.	265,057.																								
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,543.	3,353.																								
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,235,061.	5,993,953.																								
Expenses	<table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td> <td align="right">96,688.</td> <td align="right">49,826.</td> </tr> <tr> <td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td> <td align="right">0.</td> <td align="right">0.</td> </tr> <tr> <td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td> <td align="right">2,378,147.</td> <td align="right">2,111,003.</td> </tr> <tr> <td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td> <td align="right">0.</td> <td align="right">0.</td> </tr> <tr> <td>b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,511.</td> <td></td> <td></td> </tr> <tr> <td>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td> <td align="right">3,428,818.</td> <td align="right">3,555,271.</td> </tr> <tr> <td>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td> <td align="right">5,903,653.</td> <td align="right">5,716,100.</td> </tr> <tr> <td>19 Revenue less expenses. Subtract line 18 from line 12</td> <td align="right">331,408.</td> <td align="right">277,853.</td> </tr> </tbody> </table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	96,688.	49,826.	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)	2,378,147.	2,111,003.	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,511.			17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,428,818.	3,555,271.	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,903,653.	5,716,100.	19 Revenue less expenses. Subtract line 18 from line 12	331,408.	277,853.	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	96,688.	49,826.																								
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)	2,378,147.	2,111,003.																								
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.																								
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,511.																										
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,428,818.	3,555,271.																								
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,903,653.	5,716,100.																								
19 Revenue less expenses. Subtract line 18 from line 12	331,408.	277,853.																								
Net Assets or Fund Balances	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center">Beginning of Current Year</th> <th align="center">End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td align="right">8,300,707.</td> <td align="right">7,702,466.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td align="right">2,188,007.</td> <td align="right">1,675,340.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td align="right">6,112,700.</td> <td align="right">6,027,126.</td> </tr> </tbody> </table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	8,300,707.	7,702,466.	21 Total liabilities (Part X, line 26)	2,188,007.	1,675,340.	22 Net assets or fund balances. Subtract line 21 from line 20	6,112,700.	6,027,126.													
	Beginning of Current Year	End of Year																								
20 Total assets (Part X, line 16)	8,300,707.	7,702,466.																								
21 Total liabilities (Part X, line 26)	2,188,007.	1,675,340.																								
22 Net assets or fund balances. Subtract line 21 from line 20	6,112,700.	6,027,126.																								

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 <p align="center">JOSEPH SCHROEDEL, EXECUTIVE DIRECTOR</p> Type or print name and title	Date _____		
Paid Preparer Use Only	Print/Type preparer's name FRANK H. SMITH	Preparer's signature <i>Frank H. Smith</i>	Date 05/08/16	Check <input type="checkbox"/> if self-employed PTIN P00639053
	Firm's name ▶ RAFFA, P.C. Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Firm's EIN ▶ 52-1511275 Phone no. 202-822-5000		

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

COPY

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 \$ 2,649,332. including grants of \$ 16,599.) (Revenue \$ 1,551,787.) CONFERENCES AND MEETINGS - 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 COMMUNITIES. IN 2015, SAME HOSTED MORE THAN 10 EVENTS IN THE UNITED STATES. EVENTS IN 2015 INCLUDED THE JOINT ENGINEERING TRAINING CONFERENCE AND EXPO, DOD AND FEDERAL AGENCY BRIEFINGS, SMALL BUSINESS CONFERENCE, GOLDEN EAGLE AWARDS DINNER, CONTINUING EDUCATION PROGRAMS, 2 CHAPTER LEADER WORKSHOPS, TRANSITION WORKSHOP AND JOB FAIRS, STUDENT CHAPTER WORKSHOP, ENGINEER DINNERS TO HONOR 2015 GRADUATES OF THE SERVICE ACADEMIES AND

4b (Code:) (Expenses \$ 903,195. including grants of \$ 33,227.) (Revenue \$ 2,042,500.) MEMBERSHIP AND POST OPERATIONS - SAME MEMBERSHIP ACTIVITIES SUPPORT THE COMMUNITY OF MORE THAN 30,000 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, WE PROVIDE TRAINING WORKSHOPS FOR POST LEADERS. IN SUPPORT OF OUR STUDENT CHAPTERS, WE PROVIDE WORKSHOPS TO FACULTY ADVISORS AND STUDENT LEADERS TO LEARN ABOUT SAME AND MILITARY ENGINEERING.

SAME PROVIDES FUNDING TO ITS 104 POSTS (CHAPTERS) AND 60 STUDENT CHAPTERS LOCATED IN 17 REGIONS THROUGHOUT THE UNITED STATES, EUROPE AND

4c (Code:) (Expenses \$ 683,285. including grants of \$) (Revenue \$ 575,026.) SOCIETY PUBLICATIONS (PRINT AND DIGITAL)- SAME PUBLISHES TWO HIGH-QUALITY PRINT PUBLICATIONS - THE MILITARY ENGINEER MAGAZINE AND THE SAME DIRECTORY OF MEMBER COMPANIES AND ORGANIZATIONS - BOTH OF WHICH ARE AVAILABLE IN PRINT AND DIGITAL FORMAT.

THE MILITARY ENGINEER (TME) MAGAZINE KEEPS MEMBERS INFORMED ABOUT ISSUES IMPACTING THE A/E/C, ENVIRONMENTAL AND FACILITY MANAGEMENT FIELDS, AS THEY RELATE TO DOD AND OTHER FEDERAL AGENCIES. TME IS PUBLISHED SIX TIMES PER YEAR AND HAS A DISTRIBUTION OF NEARLY 30,000. ON AVERAGE, TME HAS 90 NON-MEMBER SUBSCRIBERS, WHICH INCLUDES LIBRARIES, UNIVERSITIES, DEFENSE AGENCIES AND INTERESTED INDIVIDUALS. MAGAZINE SUBSCRIPTIONS RANGE FROM ONE MAGAZINE TO BULK SUBSCRIPTIONS OF

4d Other program services (Describe in Schedule O.) (Expenses \$ 896,695. including grants of \$) (Revenue \$ 69,439.)

4e Total program service expenses 5,132,507.

COPY

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
Note. All Form 990 filers are required to complete Schedule O	X	

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

Input box for Schedule O check

Main table with columns for question numbers (1a-14b), Yes, and No. Includes sub-questions for backup withholding, employee reporting, foreign accounts, and charitable contributions.

COPY

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (49); 1b Enter the number of voting members included in line 1a, above, who are independent (49); 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? (X); 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? (X); 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? (X); 6 Did the organization have members or stockholders? (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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 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 in Schedule O (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 include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? (X); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 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? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); 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? (X); 16b 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? (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 (or 1024 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 [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: ALLISON INGRAM - 703-549-3800 607 PRINCE STREET, 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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) JANE PENNY PRESIDENT	3.00	X		X				0.	0.	0.
(2) MIKE BLOUNT PRESIDENT-ELECT	3.00	X		X				0.	0.	0.
(3) SAL NODJOMIAN VICE PRESIDENT	3.00	X		X				0.	0.	0.
(4) KURT UBBELOHDE VICE PRESIDENT	3.00	X		X				0.	0.	0.
(5) WILLIAM BROWN SR(UNTIL 05/2015) VICE PRES. & CHAIR, AOF	3.00	X		X				0.	0.	0.
(6) MICHAEL GIORGIONE VICE PRESIDENT (UNTIL 05/2015)	3.00	X		X				0.	0.	0.
(7) BILL BERSSON CHAIR, ACADEMY OF FELLOWS	3.00	X		X				0.	0.	0.
(8) JOHN MOGGE PAST PRESIDENT	3.00	X		X				0.	0.	0.
(9) GARY ENGLE PAST PRESIDENT (UNTIL 05/2015)	3.00	X		X				0.	0.	0.
(10) MARY ANDERSON VICE PRESIDENT, MIDDLE ATLANTIC	1.00	X						0.	0.	0.
(11) AARON BENSON VICE PRESIDENT, EUROPE	1.00	X						0.	0.	0.
(12) JAMES DEGOUR VICE PRESIDENT, NORTH ATLANTIC	1.00	X						0.	0.	0.
(13) MICHELLE FRENCH VICE PRESIDENT, MISSOURI RIVER	1.00	X						0.	0.	0.
(14) TIMOTHY "STEPHEN" GAMBRELL VICE PRESIDENT, LOWER MISSISSIPPI	1.00	X						0.	0.	0.
(15) SIOKEY GASTELUM-GALVEZ VICE PRESIDENT, SOUTHWEST	1.00	X						0.	0.	0.
(16) JOHN GERSTENLAUER VICE PRESIDENT, NEW ENGLAND	1.00	X						0.	0.	0.
(17) ROSEMARY GILBERTSON VP, OHIO VALLEY (UNTIL 05/2015)	1.00	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) BILL GRIP (UNTIL 05/2015) VICE PRESIDENT, PACIFIC	1.00	X						0.	0.	0.
(19) JIM HAGAN VICE PRESIDENT, GREAT LAKES	1.00	X						0.	0.	0.
(20) STEVE HOUSER VICE PRESIDENT, TEXOMA	1.00	X						0.	0.	0.
(21) MARK KESSINGER VICE PRESIDENT, OHIO VALLEY	1.00	X						0.	0.	0.
(22) CINDY LINCICOME VICE PRES., ROCKY MOUNTAIN	1.00	X						0.	0.	0.
(23) TERRY MCCANN VICE PRES., NORTHWEST	1.00	X						0.	0.	0.
(24) CHARLES PERHAM (UNTIL 05/2015) VICE PRESIDENT, SOUTHWEST	1.00	X						0.	0.	0.
(25) THERON PICKENS (UNTIL 05/2015) VICE PRESIDENT, CALIFORNIA	1.00	X						0.	0.	0.
(26) RICHARD RUBIN VICE PRESIDENT, CALIFORNIA	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								681,317.	0.	65,884.
d Total (add lines 1b and 1c)								681,317.	0.	65,884.

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 **4**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual	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? If "Yes," complete Schedule J for such person		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
KANSAS CITY MARRIOTT 200 W. 12TH STREET, KANSAS CITY, MO 64105	FACILITY/CATERING	444,275.
CENTERPLATE CATERING 9800 INTERNATIONAL DRIVE, ORLANDO, FL 32819	CATERING	417,298.
ARAMARK CORPORATION, 1001 AVENUE DE LAS AMERICAS, HOUSTON, TX 77010	CATERING	253,640.
OVATION, INC., 3810 BEDFORD AVENUE, SUITE 200, NASHVILLE, TN 37215	AUDIO VISUAL	238,773.
THE EXPO GROUP, 5931 WEST CAMPUS CIRCLE DRIVE, IRVING, TX 75063	FACILITY/CATERING	164,986.

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 **7**

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) STEVE SHEA (UNTIL 05/2015) VICE PRESIDENT, EUROPE	1.00	X						0.	0.	0.
(28) BOB SIDOTI VICE PRESIDENT, SOUTH CENTRAL	1.00	X						0.	0.	0.
(29) RICHARD STUMP VICE PRESIDENT, PACIFIC	1.00	X						0.	0.	0.
(30) STEVE THOMAS VICE PRESIDENT, CAROLINAS	1.00	X						0.	0.	0.
(31) ALAN WATT VICE PRESIDENT, SOUTH ATLANTIC	1.00	X						0.	0.	0.
(32) JOHN CAWTHORNE MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(33) AMY D'ALONZO-BASEHOAR MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(34) BILL HAIGHT MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(35) MARK HANDLEY MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(36) STUART HARRISON MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(37) CHARLES "HUD" HEATON MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(38) STACEY HIRATA (UNTIL 05/2015) MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(39) GERALD MORRIS JR. MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(40) SCOTT PROSUCH MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(41) JJ TANG MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(42) COREY WEAVER MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(43) NEAL WRIGHT MISSION COMMITTEE CHAIR	1.00	X						0.	0.	0.
(44) MATT ALTMAN COUNCIL CHAIR	1.00	X						0.	0.	0.
(45) ERNIE EDGAR COUNCIL CHAIR	1.00	X						0.	0.	0.
(46) CLARENCE MCALLISTER 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) GITA MURTHY COUNCIL CHAIR (UNTIL 05/2015)	1.00	X						0.	0.	0.
(48) BEN REDDING COUNCIL CHAIR (UNTIL 05/2015)	1.00	X						0.	0.	0.
(49) BRIAN BALUKONIS ELECTED DIRECTOR	1.00	X						0.	0.	0.
(50) RICHARD "RAD" DELANEY ELECTED DIRECTOR	1.00	X						0.	0.	0.
(51) MARVIN FISHER ELECTED DIRECTOR	1.00	X						0.	0.	0.
(52) WESLEY HAMILL ELECTED DIRECTOR	1.00	X						0.	0.	0.
(53) SHARON KROCK ELECTED DIRECTOR	1.00	X						0.	0.	0.
(54) MARILYN LEWIS ELECTED DIRECTOR (UNTIL 05/2015)	1.00	X						0.	0.	0.
(55) ROBERT MORIARTY ELECTED DIRECTOR (UNTIL 05/2015)	1.00	X						0.	0.	0.
(56) ANGELA NOCERA ELECTED DIRECTOR	1.00	X						0.	0.	0.
(57) WENDY PARKER ELECTED DIRECTOR	1.00	X						0.	0.	0.
(58) TONY PRICE ELECTED DIRECTOR	1.00	X						0.	0.	0.
(59) SALLY RIKER ELECTED DIRECTOR	1.00	X						0.	0.	0.
(60) STEVE ROSE ELECTED DIRECTOR (UNTIL 05/2015)	1.00	X						0.	0.	0.
(61) ROBERT SCHLESINGER ELECTED DIRECTOR	1.00	X						0.	0.	0.
(62) RAY WILLCOCKS ELECTED DIRECTOR	1.00	X						0.	0.	0.
(63) CARRIE ANN WILLIAMS ELECTED DIRECTOR	1.00	X						0.	0.	0.
(64) RICH KHALIL TREASURER	1.00			X				0.	0.	0.
(65) HAROLD I. ROSEN COUNSEL	1.00			X				0.	0.	0.
(66) JOSEPH SCHROEDEL EXECUTIVE DIRECTOR	40.00			X				207,692.	0.	11,180.
Total to Part VII, Section A, line 1c										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for Allison Ingram, Kathleen A. Wilson, Nicholas Desport, L Eileen Erickson, and Ann McLeod.

Total to Part VII, Section A, line 1c 681,317. 65,884.

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) 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	26,059.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		26,059.				
Program Service Revenue	2 a CONF. REG./SPONS.	Business Code 900099	3,024,024.	1,551,787.		1,472,237.	
	b MEMBERSHIP DUES	900099	2,042,500.	2,042,500.			
	c SOCIETY PUBLICATIONS	541800	575,026.	19,494.	555,532.		
	d CONTINUING EDUCATION	900099	57,934.	57,934.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		5,699,484.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		264,760.			264,760.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		11,946.		11,505.	441.	
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	596,628.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	596,331.				
		c Gain or (loss)	297.				
	d Net gain or (loss)		297.			297.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	9,125.					
	b Less: cost of goods sold	b	28,016.				
	c Net income or (loss) from sales of inventory		-18,891.		-18,891.		
Miscellaneous Revenue		Business Code					
11 a TAX REFUNDS	900099	10,298.			10,298.		
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		10,298.					
12 Total revenue. See instructions.		5,993,953.	3,671,715.	548,146.	1,748,033.		

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	49,826.	49,826.		
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	294,454.	170,594.	123,860.	
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	1,388,141.	1,164,915.	222,180.	1,046.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	55,753.	46,316.	9,394.	43.
9 Other employee benefits	238,180.	189,620.	48,408.	152.
10 Payroll taxes	134,475.	106,729.	27,661.	85.
11 Fees for services (non-employees):				
a Management				
b Legal	4,137.	2,833.	1,304.	
c Accounting	32,163.		32,163.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	22,687.	22,687.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	364,309.	337,618.	26,506.	185.
12 Advertising and promotion	74,273.	74,273.		
13 Office expenses	219,118.	180,368.	38,750.	
14 Information technology	69,268.	59,968.	9,300.	
15 Royalties				
16 Occupancy	63,465.	52,296.	11,169.	
17 Travel	215,225.	214,414.	811.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,880,584.	1,880,584.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	77,511.	61,519.	15,992.	
23 Insurance	44,128.	36,953.	7,175.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a UBI TAXES	12,887.	12,887.		
b DUES TO POSTS	251,662.	251,662.		
c PRODUCTION & PRINTING	140,506.	140,103.	403.	
d AWARDS/SPONSORSHIPS	67,355.	64,830.	2,525.	
e All other expenses	15,993.	11,512.	4,481.	
25 Total functional expenses. Add lines 1 through 24e	5,716,100.	5,132,507.	582,082.	1,511.
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	580,848.	1	23,859.
	2 Savings and temporary cash investments	1,205,237.	2	1,114,569.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	65,752.	4	116,910.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	198,307.	9	141,498.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,226,644.		
	b Less: accumulated depreciation	10b 1,317,218.		
	11 Investments - publicly traded securities	933,560.	10c	909,426.
	12 Investments - other securities. See Part IV, line 11	4,896,122.	11	4,934,697.
	13 Investments - program-related. See Part IV, line 11	381,000.	12	226,000.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	39,881.	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,300,707.	15	235,507.	
		16	7,702,466.	
Liabilities	17 Accounts payable and accrued expenses	784,352.	17	297,068.
	18 Grants payable		18	
	19 Deferred revenue	1,289,901.	19	1,323,122.
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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	113,754.	25	55,150.
	26 Total liabilities. Add lines 17 through 25	2,188,007.	26	1,675,340.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,830,078.	27	5,741,601.
	28 Temporarily restricted net assets	8,396.	28	11,299.
	29 Permanently restricted net assets	274,226.	29	274,226.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,112,700.	33	6,027,126.
	34 Total liabilities and net assets/fund balances	8,300,707.	34	7,702,466.

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	5,993,953.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,716,100.
3	Revenue less expenses. Subtract line 2 from line 1	3	277,853.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,112,700.
5	Net unrealized gains (losses) on investments	5	-363,427.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,027,126.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in 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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

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

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.
10 An organization organized and operated exclusively to test for public safety.
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 2015 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2015. 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 - 2014. 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 - 2015. 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 - 2014. 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 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,026.	69,550.	81,146.	39,688.	26,059.	248,469.
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	6,713,141.	6,352,150.	5,242,976.	5,178,652.	5,143,952.	28,630,871.
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	6,745,167.	6,421,700.	5,324,122.	5,218,340.	5,170,011.	28,879,340.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons		8,610.	4,301.	1,100.	295.	14,306.
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						0.
c Add lines 7a and 7b		8,610.	4,301.	1,100.	295.	14,306.
8 Public support. (Subtract line 7c from line 6.)						28,865,034.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	6,745,167.	6,421,700.	5,324,122.	5,218,340.	5,170,011.	28,879,340.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	111,212.	181,342.	216,195.	243,202.	265,201.	1,017,152.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	367,233.	212,345.	190,262.	89,655.	47,751.	907,246.
c Add lines 10a and 10b	478,445.	393,687.	406,457.	332,857.	312,952.	1,924,398.
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.)	200.	780.	4,720.	3,218.	0.	8,918.
13 Total support. (Add lines 9, 10c, 11, and 12.)	7,223,812.	6,816,167.	5,735,299.	5,554,415.	5,482,963.	30,812,656.

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 2015 (line 8, column (f) divided by line 13, column (f))	15	93.68 %
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	93.36 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	6.25 %
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	6.49 %

19a 33 1/3% support tests - 2015. 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 - 2014. 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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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 11a or 11b 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 (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? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

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

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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? 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.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
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? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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. 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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

FSA FORFEITURE AND ASSET DISPOSALS

2011 AMOUNT: \$ 0.

2012 AMOUNT: \$ 780.

2013 AMOUNT: \$ 4,720.

2014 AMOUNT: \$ 3,218.

2015 AMOUNT: \$ 0.

ADJUSTMENT ON ACCOUNT RECEIVABLE INVOICE

2011 AMOUNT: \$ 200.

2012 AMOUNT: \$ 0.

2013 AMOUNT: \$ 0.

2014 AMOUNT: \$ 0.

2015 AMOUNT: \$ 0.

COPY

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

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, total number and acreage, number of easements on historic structures, and monitoring details.

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 reporting requirements for art and historical treasures.

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 are a 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 programs
- 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	843,838.	775,128.	751,080.	674,357.	574,523.
b Contributions	41,877.	68,710.	119,697.	95,844.	90,496.
c Net investment earnings, gains, and losses	5,124.	12,386.	24,647.	25,701.	17,565.
d Grants or scholarships					
e Other expenditures for facilities and programs	5,124.	12,386.	45,802.	44,822.	8,227.
f Administrative expenses					
g End of year balance	885,715.	843,838.	849,622.	751,080.	674,357.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 69.04 %
- b Permanent endowment 30.96 %
- c Temporarily restricted 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		X
(ii) related organizations		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		

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		1,210,647.	710,952.	499,695.
c Leasehold improvements				
d Equipment		195,843.	162,994.	32,849.
e Other		600,184.	443,272.	156,912.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				909,426.

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.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED COMPENSATION	55,150.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	55,150.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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.

1	Total revenue, gains, and other support per audited financial statements		1	5,658,542.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-363,427.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	28,016.	
e	Add lines 2a through 2d	2e		-335,411.
3	Subtract line 2e from line 1	3		5,993,953.
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		5,993,953.

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.

1	Total expenses and losses per audited financial statements		1	5,744,116.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	28,016.	
e	Add lines 2a through 2d	2e		28,016.
3	Subtract line 2e from line 1	3		5,716,100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		5,716,100.

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 V, LINE 4:

THE PURPOSE OF THE EDUCATION AND MENTORING FUND IS TO PROMOTE THE EDUCATIONAL, PROFESSIONAL DEVELOPMENT AND MENTORING GOALS OF SAME. SOME OF THE INITIATIVES SUPPORTED BY THE FUND INCLUDE: 1) PROVIDING FINANCIAL SUPPORT TO SAME ENGINEERING AND CONSTRUCTION CAMPS, 2) PROVIDING FINANCIAL SUPPORT TO OTHER PROFESSIONAL DEVELOPMENT, EDUCATION AND MENTORING INITIATIVES THAT WILL BENEFIT SAME MEMBERS, AND 3) OFFERING SPONSORSHIPS FOR COLLEGE STUDENT AND YOUNG MEMBER AWARD WINNERS TO ATTEND THE ANNUAL SAME JOINT ENGINEER EDUCATION AND TRAINING CONFERENCE AND EXPOSITION.

PART X, LINE 2:

SAME PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS

Part XIII Supplemental Information (continued)

ENDED DECEMBER 31, 2015 AND 2014, AND DETERMINED THAT THERE ARE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 28,016.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 28,016.

COPY

**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.**

▶ **Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

**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 non-cash assistance	(h) Purpose of grant or assistance

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

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

Schedule I (Form 990) (2015)

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 non-cash assistance
JOINT ENGINEER TRAINING CONFERENCE (JETC) PUBLIC SECTOR POST PRESIDENTS	13	8,377.	0.		
STIPENDS FOR TRAVEL TO SUPPORT POST OPERATIONS	21	18,227.	0.		
MEDAL WINNER STIPENDS TO ATTEND JETC	8	8,222.	0.		
COLLEGE SCHOLARSHIP AWARDS	12	15,000.	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:

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

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2015

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

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 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 (e.g., 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 in line 1a?

3 Indicate which, if any, of the following the filing 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" to 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 non-fixed 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
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) 2015

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 are not 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)	207,281.	0.	411.	9,616.	1,564.	218,872.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NICHOLAS DESPORT DEPUTY EX DIR & DIR OF PROGRAMS	(i)	155,070.	0.	268.	7,310.	4,115.	166,763.	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)							
	(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.

COPY

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.

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

OMB No. 1545-0047

2015

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:

MULTIPLE CONTINUING EDUCATION WEBINARS.

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

THE PACIFIC. POSTS BRING TOGETHER PROFESSIONALS IN ENGINEERING AND
RELATED FIELDS FOR NETWORKING AND PROFESSIONAL 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:

UP TO 13 MAGAZINES. TME MAIN THEMES FOR 2015 INCLUDED ENVIRONMENTAL
ENGINEERING, CIVIL INFRASTRUCTURE, ENERGY, PROGRAM & PROJECT
MANAGEMENT, ASSET MANAGEMENT, AND SUSTAINABLE DESIGN & 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. IN 2015, SAME PUBLISHED IT'S SECOND "YEAR
IN REVIEW" ISSUE OF TME. THE PUBLICATION, WHICH WAS RELEASED IN
DIGITAL FORMAT ONLY, FEATURED THE "BEST OF THE BEST" ARTICLES CULLED

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

Schedule O (Form 990 or 990-EZ) (2015)

532211
09-02-15

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

FROM ALL ARTICLES PUBLISHED IN THE PRINT EDITION DURING 2014 AND INCLUDED A SPOTLIGHT ON THE TOULMIN AWARD WINNING ARTICLE.

THE SAME DIRECTORY OF MEMBER COMPANIES AND ORGANIZATIONS (DIRECTORY) IS PUBLISHED ANNUALLY AND PROVIDES A LISTING OF SAME MEMBER COMPANIES. CONTACT INFORMATION OF CORPORATE LEADERS FOR USE IN PARTNERING AND TEAMING AGREEMENTS, AS WELL AS A LISTING OF MEMBER COMPANIES BY SAME POST, IS PART OF THE INFORMATION CAPTURED IN THE PUBLICATION. 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. THE DIRECTORY FEATURES ORGANIZATIONAL CHARTS, PHOTOS AND CONTACT INFORMATION FOR EACH OF THE UNIFORMED SERVICE COMPONENTS. ORGANIZATIONAL CHARTS AND CONTACT INFORMATION IS ALSO INCLUDED FOR THE DEPARTMENT OF HOMELAND SECURITY AND THE FEDERAL EMERGENCY MANAGEMENT AGENCY.

THE DIRECTORY HAS A COMPANION PIECE - THE ONLINE DIRECTORY - THAT INCLUDES MORE ROBUST INFORMATION OF SAME MEMBER COMPANIES, INCLUDING COMPANY DESCRIPTION, SIZE, REVENUE, NUMBER OF EMPLOYEES, AND OFFICE LOCATIONS. THE ONLINE DIRECTORY FEATURES A SEARCHABLE DATABASE THAT IS ACCESSIBLE 24/7.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
CONTINUING EDUCATION
EXPENSES \$ 563,758. INCLUDING GRANTS OF \$ 0. REVENUE \$ 69,439.

MEMBERSHIP ACTIVITIES

COPY

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

EXPENSES \$ 332,937. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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 (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 11:

AFTER PREPARATION BY AN INDEPENDENT CPA FIRM, THE 990 IS REVIEWED BY THE DIRECTOR OF FINANCE AND ACCOUNTING, 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

COPY

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

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.

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 TO VERIFY THAT THE EXECUTIVE DIRECTOR SALARY IS APPROXIMATELY WITHIN THE 75 PERCENTILE OF SIMILAR PROFESSIONAL AND TRADE ASSOCIATIONS. 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 REVIEWS 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 ANNUAL REVIEW WAS UNDERTAKEN IN JANUARY OF 2015.

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

GOVERNING DOCUMENTS ARE MADE AVAILABLE TO ALL MEMBERS ON THE WEBSITE AT WWW.SAME.ORG, AND TO THE GENERAL PUBLIC UPON REQUEST ON A CASE-BY-CASE

COPY

Name of the organization

SOCIETY OF AMERICAN MILITARY ENGINEERS

Employer identification number

53-0196491

BASIS.

Lined area for providing details on the basis of the organization's status.

COPY