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# Return of Organization Exempt From Income Tax

**2000**

Open to Public Inspection

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury  
Internal Revenue Service

**A** For the 2000 calendar year, OR tax year period beginning **10/01**, 2000, and ending **09/30/2001**

<b>B</b> Check if applicable: <input type="checkbox"/> Change of address <input type="checkbox"/> Change of name <input type="checkbox"/> Initial return <input type="checkbox"/> Final return  <input type="checkbox"/> Amend return	<b>C</b> Name of organization <b>AMERICAN SOCIETY OF CIVIL ENGINEERS, INC.</b>	<b>D</b> Employer identification number <b>13-1635293</b>
	Please use IRS label or print or type See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite <b>1801 ALEXANDER BELL DRIVE</b>	<b>E</b> Telephone number <b>(703) 295-6000</b>
	City or town, state or country, and ZIP code <b>RESTON, VA 20191</b>	<b>F</b> Check <input type="checkbox"/> if application pending

**G** Organization type (check only one)  501(c)(3) (insert no )  527 OR  4947 (a)(1)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

**J** Accounting method  Cash  Accrual  Other (specify) ▶

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return

Note (H and I are not applicable to section 527 orgs)  
**H(a)** Is this a group return for affiliates? Yes  No   
**H(b)** If "Yes" enter number of affiliates ▶ **N/A**  
**H(c)** Are all affiliates included? (If "No," attach a list. See inst.) Yes  No   
**H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes  No   
**I** Enter 4-digit group exemption no. (GEN) ▶  
**L** Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)**

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received					
	<b>a</b> Direct public support	<b>1a</b>	<b>911,435.</b>			
	<b>b</b> Indirect public support	<b>1b</b>				
	<b>c</b> Government contributions (grants)	<b>1c</b>	<b>1,431,636.</b>			
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>2,343,071.</b> noncash \$ <b>NONE</b> )	<b>1d</b>		<b>2,343,071.</b>		
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		<b>20,673,210.</b>		
	<b>3</b> Membership dues and assessments	<b>3</b>		<b>13,326,336.</b>		
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		<b>250,752.</b>		
	<b>5</b> Dividends and interest from securities	<b>5</b>		<b>1,529,752.</b>		
	<b>6a</b> Gross rents	<b>6a</b>				
	<b>b</b> Less rental expenses	<b>6b</b>				
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>				
<b>7</b> Other investment income (describe )	<b>7</b>					
<b>Revenue</b>	<b>8a</b> Gross amount from sales of assets other than inventory	<b>8a</b>				
	<b>b</b> Less cost or other basis and sales expenses	<b>8b</b>				
	<b>c</b> Gain or (loss) (attach schedule) <b>STMT 1</b>	<b>8c</b>	<b>605,606.25</b>			
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>	<b>2,301,749.</b>			
<b>Revenue</b>	<b>9</b> Special events and activities (attach schedule)					
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>				
	<b>b</b> Less direct expenses other than fundraising expenses	<b>9b</b>				
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>					
<b>Revenue</b>	<b>10a</b> Gross sales of inventory less returns and allowances <b>STMT 2</b>	<b>10a</b>	<b>2,684,125.</b>			
	<b>b</b> Less cost of goods sold <b>SEE STATEMENT 3</b>	<b>10b</b>	<b>1,632,880.</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		<b>1,051,245.</b>		
<b>Revenue</b>	<b>11</b> Other revenue (from Part VII line 103)	<b>11</b>		<b>3,133,800.</b>		
	<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		<b>44,609,915.</b>		
	<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<b>39,542,329.</b>	
		<b>14</b> Management and general (from line 44 column (C))	<b>14</b>		<b>4,378,550.</b>	
		<b>15</b> Fundraising (from line 44 column (D))	<b>15</b>			
<b>16</b> Payments to affiliates (attach schedule) <b>SEE STATEMENT 4</b>	<b>16</b>			<b>-100,523.</b>		
<b>17</b> Total expenses (add lines 16 and 44 column (A))	<b>17</b>			<b>43,820,356.</b>		
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		<b>789,559.</b>		
	<b>19</b> Net assets or fund balances at beginning of year (from line 73 column (A))	<b>19</b>		<b>25,159,578.</b>		
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>STMT 5</b>	<b>20</b>		<b>-5,970,770.</b>		
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		<b>19,978,367.</b>		



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**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 20.)

Do not include amounts reported on line 6b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 340,172.	306,155.	34,017.	
26 Other salaries and wages	26 11,492,253.	10,572,873.	919,380.	
27 Pension plan contributions	27 1,149,805.	834,825.	314,980.	
28 Other employee benefits	28 1,547,742.	1,392,968.	154,774.	
29 Payroll taxes	29 1,023,178.	920,860.	102,318.	
30 Professional fundraising fees	30			
31 Accounting fees	31 76,998.	69,298.	7,700.	
32 Legal fees	32 10,224.	9,202.	1,022.	
33 Supplies	33 602,293.	542,064.	60,229.	
34 Telephone	34 486,609.	437,948.	48,661.	
35 Postage and shipping	35 2,354,704.	1,766,028.	588,676.	
36 Occupancy	36 2,527,171.	2,174,454.	352,717.	
37 Equipment rental and maintenance	37 657,044.	591,340.	65,704.	
38 Printing and publications	38 6,200,698.	5,480,628.	720,070.	
39 Travel	39 2,130,024.	1,917,022.	213,002.	
40 Conferences, conventions, and meetings	40 4,413,888.	3,794,335.	619,553.	
41 Interest	41 509,010.	458,109.	50,901.	
42 Depreciation depletion etc (attach schedule) <b>STMT 6</b>	42 1,248,462.	1,123,616.	124,846.	
43 Other expenses (itemize) a <b>STMT 7</b>	43a 7,150,604.	7,150,604.		
b _____	43b			
c _____	43c			
d _____	43d			
e _____	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	44 43,920,879.	39,542,329.	4,378,550.	

**Reporting of Joint Costs** Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?  Yes  No  
 If "Yes" enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_ (ii) the amount allocated to Program services \$ \_\_\_\_\_  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_ and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See Specific Instructions on page 23)

What is the organization's primary exempt purpose? <b>SEE STATEMENT 8</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others)
a <b>SEE STATEMENT 9</b>  (Grants and allocations \$ _____)	11,767,625.
b <b>SEE STATEMENT 9</b>  (Grants and allocations \$ _____)	5,442,929.
c <b>SEE STATEMENT 9</b>  (Grants and allocations \$ _____)	5,998,492.
d <b>SEE STATEMENT 9</b>  (Grants and allocations \$ _____)	2,925,006.
e Other program services (attach schedule) <b>STMT 10</b> (Grants and allocations \$ _____)	13,408,277
f Total of Program Service Expenses (should equal line 44, column (B) Program services)	39,542,329

**Part IV Balance Sheets** (See Specific Instructions on page 23 )

Note		(A)		(B)	
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year	
Assets	45	Cash - non-interest-bearing	600.	45	600.
	46	Savings and temporary cash investments	1,441,709.	46	2,412,083.
	47a	Accounts receivable	47a 2,394,730.		
	b	Less allowance for doubtful accounts	47b 105,063.	47c	2,289,667.
	48a	Pledges receivable	48a -300,000.		
	b	Less allowance for doubtful accounts	48b	48c	-300,000.
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)	51a		
	b	Less allowance for doubtful accounts	51b	51c	
	52	Inventories for sale or use	959,717.	52	897,409
	53	Prepaid expenses and deferred charges	1,396,846.	53	1,466,421.
	54	Investments - securities (attach schedule) <b>STMT 1</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	26,946,156.	54	22,237,044.
	55a	Investments - land, buildings, and equipment basis	55a		
	b	Less accumulated depreciation (attach schedule)	55b	55c	
56	Investments - other (attach schedule)		56		
57a	Land, buildings, and equipment basis	57a 12,262,169.			
b	Less accumulated depreciation (attach schedule)	57b 7,994,873.	57c	4,267,296.	
58	Other assets (describe ► <b>SEE STATEMENT 12</b> )	399,743.	58	465,778.	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	36,770,981.	59	33,736,298.	
Liabilities	60	Accounts payable and accrued expenses	5,945,722.	60	4,608,630.
	61	Grants payable		61	
	62	Deferred revenue	3,841,367.	62	5,884,335.
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe ► <b>SEE STATEMENT 13</b> )	1,824,314.	65	3,264,966.
66	<b>Total liabilities</b> (add lines 60 through 65)	11,611,403.	66	13,757,931.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	19,211,363.	67	13,838,988.
	68	Temporarily restricted	4,364,432.	68	4,530,526.
	69	Permanently restricted	1,583,783.	69	1,608,853.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	25,159,578.	73	19,978,367.
	74	<b>Total liabilities and net assets/fund balances</b> (add lines 66 and 73)	36,770,981.	74	33,736,298.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 25)**

a	Total revenue, gains and other support per audited financial statements	a	46,242,795
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments		\$ _____
(2)	Donated services and use of facilities		\$ _____
(3)	Recoveries of prior year grants		\$ _____
(4)	Other (specify)		_____ \$ _____
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	46,242,795
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b Form 990		\$ _____
(2)	Other (specify)		_____
	<b>STMT 14</b> \$ -1,632,880		
	Add amounts on lines (1) and (2)	d	-1,632,880
e	Total revenue per line 12, Form 990 (line c plus line d)	e	44,609,915.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

a	Total expenses and losses per audited financial statements	a	45,453,236
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities		\$ _____
(2)	Prior year adjustments reported on line 20, Form 990		\$ _____
(3)	Losses reported on line 20, Form 990		\$ _____
(4)	Other (specify)		_____ \$ _____
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	45,453,236
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b Form 990		\$ _____
(2)	Other (specify)		_____
	<b>STMT 15</b> \$ -1,632,880		
	Add amounts on lines (1) and (2)	d	-1,632,880
e	Total expenses per line 17, Form 990 (line c plus line d)	e	43,820,356

**Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 25)**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 16		340,172.	27,334.	NONE

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes" attach schedule - see Specific Instructions on page 26

Part VI Other Information (See Specific Instructions on page 26)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a	Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return?	78 a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78 b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80 a	X
b	If "Yes," enter the name of the organization <u>AMERICAN SOCIETY OF CIVIL ENGINEERS FOUNDATION, INC.</u> and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a	Enter the amount of political expenditures direct or indirect as described in the instructions for line 81	81 a	NONE
b	Did the organization file Form 1120-POL for this year?	81 b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.)	82 b	NOT VALUED
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84 a	N/A
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85 a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85 b	N/A
c	Dues, assessments, and similar amounts from members	85 c	N/A
d	Section 162(e) lobbying and political expenditures	85 d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85 f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85 g	X
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12	86 a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86 b	N/A
87	501(c)(12) orgs. Enter a Gross income from members or shareholders	87 a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87 b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 <u>NONE</u> section 4912 <u>NONE</u> section 4955 <u>NONE</u>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89 b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		NONE
d	Enter Amount of tax on line 89c above, reimbursed by the organization		N/A
90 a	List the states with which a copy of this return is filed <u>NEW YORK AND VIRGINIA</u>		
b	Number of employees employed in the pay period that includes March 12, 2000 (See inst.)	90 b	219
91	The books are in care of <u>AMER. SOC. OF CIVIL ENGINEERS</u> Telephone no <u>(703) 295-6000</u> Located at <u>1801 ALEXANDER BELL DR, RESTON, VA</u> ZIP code <u>22091</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

**Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 30)**

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a <b>SEE STATEMENT 17</b>		2,610,295.			18,062,915.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					13,326,336.
95 Interest on savings and temporary cash investments			14	250,752.	
96 Dividends and interest from securities			14	1,529,752.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	2,301,749.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					1,051,245.
103 Other revenue a					
b <b>ROYALTIES</b>			15	1,759,652.	
c <b>LABEL SALES</b>			15	838,828.	
d <b>OTHER PROG INCOME</b>					535,320.
e					
104 Subtotal (add columns (B), (D), and (E))		2,610,295.		6,680,733.	32,975,816.
105 Total (add line 104, columns (B), (D) and (E))					42,266,844.

Note Line 105 plus line 1d Part I should equal the amount on line 12 Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 31)**

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	<b>SEE STATEMENT 18</b>

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 31)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 31)**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

**Please Sign Here**

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. (Important: See General Instruction W on page 14.)

Signature of officer: *James E. Davis* Date: 8/14/02 Type or print name and title: *James E. Davis Executive Director/CEO*

**Paid Preparer's Use Only**

Preparer's signature: *Richard [Signature]* Date: 8/14/02 Check if self-employed:  Preparer's SSN or PTIN: P0028834

Firm's name (or yours if self-employed) and address and ZIP code: **KPMG LLP**  
2001 M STREET, NW  
WASHINGTON, DC 20036-3310

EIN: 13-5565207 Phone no: 202-533-3000

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**2000**

**Supplementary Information - (See separate instructions)**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**AMERICAN SOCIETY OF CIVIL ENGINEERS, INC.**

Employer identification number

**13-1635293**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
LAWRENCE ROTH	COO			
C/O ASCE	FULL TIME	165,000.	10,897.	NONE
JOHN WYRICK	SR MANAGER			
C/O ASCE	FULL TIME	141,355.	9,587.	NONE
JOSEPH DEFIGLIA	CIO			
C/O ASCE	FULL TIME	137,457.	13,714.	NONE
CHARLES DINJES	MANAGING DIRECTOR			
C/O ASCE	FULL TIME	135,773.	16,358.	NONE
STANLEY TUCKER	CFO			
C/O ASCE	FULL TIME	132,000.	16,290.	NONE
Total number of other employees paid over \$50,000	▶ 68			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 1 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
KPMG LLP		
2001 M ST, NW, WASHINGTON, DC 20036	ACCOUNTING	80,810.
Total number of others receiving over \$50,000 for professional services	▶ NONE	



**Part III Statements About Activities**

	Yes	No
<b>1</b> During the year has the organization attempted to influence national, state or local legislation including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>162,540.</u>  Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	<b>1</b>	<b>X</b>
<b>2</b> During the year, has the organization, either directly or indirectly engaged in any of the following acts with any of its trustees directors officers creators key employees or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director trustee, majority owner or principal beneficiary		
<b>a</b> Sale exchange or leasing of property?	<b>2a</b>	<b>X</b>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>	<b>X</b>
<b>c</b> Furnishing of goods, services or facilities?	<b>2c</b>	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1 000)? <b>FORM 990, PART V</b>	<b>2d</b>	<b>X</b>
<b>e</b> Transfer of any part of its income or assets? If the answer to any question is "Yes " attach a detailed statement explaining the transactions	<b>2e</b>	<b>X</b>
<b>3</b> Does the organization make grants for scholarships, fellowships student loans etc ?	<b>3</b>	<b>X</b>
<b>4a</b> Do you have a section 403(b) annuity plan for your employees?	<b>4a</b>	<b>X</b>
<b>b</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See page 2 of the instructions )		

**Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions )**

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5  A church convention of churches or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5 )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  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 charitable etc 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 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4) (5) or (6) if they meet the test of section 509(a)(2) (See section 509(a)(3) )

Provide the following information about the supported organizations (See page 5 of the instructions )

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10 11 or 12 ) Use cash method of accounting

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts grants and contributions received (Do not include unusual grants See line 28 )	2,598,033.	1,998,367.	1,690,811.	2,856,571.	9,143,782.
16 Membership fees received	11612518.	11708384.	11418113.	11148619.	45887634.
17 Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc. purpose	19794511.	28682979.	17656969.	16440492.	82574951.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	6,471,038.	3,414,912.	5,701,690.	5,230,824.	20818464.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	40476100.	45804642.	36467583.	35676506.	158424831.
24 Line 23 minus line 17	20681589.	17121663.	18810614.	19236014.	75849880.
25 Enter 1% of line 23	404,761.	458,046.	364,676.	356,765.	
26 Organizations described in lines 10 or 11	a Enter 2% of amount in column (e), line 24 <b>NOT APPLICABLE</b>				26a
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a Enter the sum of all these excess amounts					26b
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12	a For amounts included in lines 15 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of and total amounts received in each year from each "disqualified person " Enter the sum of such amounts for each year <b>STMT 19 STMT 20 STMT 21 STMT 22</b>				
(1999) _____ (1998) _____ (1997) _____ (1996) _____	4,935. 4,935. 4,480. 4,480.				
b For any amount included in line 17 that was received from a nondisqualified person attach a list to show the name of and amount received for each year that was more than the larger of (1) the amount on line 25 for the year or (2) \$5 000 (Include in the list organizations described in lines 5 through 11, as well as individuals ) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(1999) _____ (1998) _____ (1997) _____ (1996) _____				
(1999) _____ (1998) _____ (1997) _____ (1996) _____	NONE NONE NONE NONE				
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	9,143,782. 45887634. 82574951.				27c 137606367.
d Add Line 27a total _____ and line 27b total _____	18,830. NONE				27d 18,830.
e Public support (line 27c total minus line 27d total)					27e 137587537.
f Total support for section 509(a)(2) test Enter amount on line 23 column (e)					27f 158424831.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 86.8472 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 13.1409 %
28 Unusual Grants For an organization described in line 10 11, or 12 that received any unusual grants during 1996 through 1999 attach a list (which is not open to public inspection) for each year showing the name of the contributor the date and amount of the grant and a brief description of the nature of the grant Do not include these grants in line 15 (See page 5 of the instructions )					

**Part V Private School Questionnaire** (See page 5 of the instructions )

(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

**NOT APPLICABLE**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement ) ----- ----- -----		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement ) ----- -----		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement ) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 7 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

**NOT APPLICABLE**

- Check here  **a** if the organization belongs to an affiliated group
- Check here  **b** if you checked "a" above and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)		<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37)		<b>38</b>	
<b>39</b> Other exempt purpose expenditures		<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)		<b>40</b>	
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000	20% of the amount on line 40	} <b>41</b>	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)		<b>42</b>	
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		<b>43</b>	
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		<b>44</b>	

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 9 of the instructions

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 9 of the instructions)

During the year did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum through the use of

	Yes	No	Amount
<b>a</b> Volunteers		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines c through h)	X		
<b>c</b> Media advertisements		X	
<b>d</b> Mailings to members, legislators, or the public	X		SEE STATEMENT 23 105,651.
<b>e</b> Publications, or published or broadcast statements		X	
<b>f</b> Grants to other organizations for lobbying purposes		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body	X		STMT 24 56,889.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
<b>i</b> Total lobbying expenditures (add lines c through h)			162,540.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 9 of the instructions )**

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting organization to a noncharitable exempt organization of

(i) Cash

(ii) Other assets

**b** Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
<b>51a(i)</b>		<b>X</b>
<b>a(ii)</b>		<b>X</b>
<b>b(i)</b>		<b>X</b>
<b>b(ii)</b>		<b>X</b>
<b>b(iii)</b>		<b>X</b>
<b>b(iv)</b>		<b>X</b>
<b>b(v)</b>		<b>X</b>
<b>b(vi)</b>		<b>X</b>
<b>c</b>		<b>X</b>

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

**52a** Is the organization directly or indirectly affiliated with, or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Schedule B**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary Information for line 1d of Form 990 or  
line 1 of Form 990-EZ (see instructions)

OMB No 1545 0047

**2000**

Name of organization

Employer identification number

**AMERICAN SOCIETY OF CIVIL ENGINEERS**

**13-1635293**

Organization type (check only one) - Section  501(c)( 3 ) (enter number)  527 or  4947(a)(1) nonexempt charitable trust

**A Section 501(c)(7), (8), or (10) organizations -**

Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see **General rule below**)

Enter here the total gifts received during the year for a religious, charitable, etc purpose ▶ \$

**Note: This form is generally not open to public inspection except for section 527 organizations.**

**General Instructions**

**Purpose of Form**

Schedule B (Form 990 or 990-EZ) is used by organizations required to file **Form 990**, Return of Organization Exempt From Income Tax, or **Form 990-EZ**, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization

**Who Must File Schedule B (Form 990 or 990-EZ)**

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ

**Caution:** Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ)

**Public Inspection**

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ

See the instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ)

**Contributors Required To Be Listed on Part I**

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations

**General Rule** Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who, during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year

**Section 501(c)(3) organizations** For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a))

**Example** A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000

**Section 501(c)(7), (8), or (10) organizations** For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the **General Rule** discussed above

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)) -

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If a section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

### Specific Instructions

**Note** You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

**Part I** In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

**Part II** In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

**Part III** Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization

Employer identification number

**AMERICAN SOCIETY OF CIVIL ENGINEERS**

**13-1635293**

**Part I** Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1	<b>FEDERAL GRANTS</b>	1,431,636.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
			Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)



AMERICAN SOCIETY OF CIVIL ENGINEERS  
EIN 13-1635293  
YEAR ENDED SEPTEMBER 30, 2001

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FORM 990

STATEMENT 1

PART I, LINE 8 - GROSS AMOUNT FROM SALES OF ASSETS OTHER THAN INVENTORY

<u>DESCRIPTION</u>	<u>AMOUNT</u>
Gross amount from sales of securities	60,560,625
Less Cost or other basis and sales expenses	<u>(58,258,876)</u>
Net Gain or (Loss)	<u><u>2,301,749</u></u>

STATEMENT 1

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
ACQUIRED TITLES	472,505.
CONTRACT DOCUMENTS	75,160.
COMMITTEE REPORTS	313,285.
MANUALS	226,717.
PROCEEDINGS	726,467.
PURCHASED TITLES	143,280.
STANDARDS	606,992.
ICE TITLES	158,624.
RETURNS	-38,905.
TOTAL	<u>2,684,125</u>

FORM 990, PART I - COST OF GOODS SOLD

DESCRIPTION	COST OF GOODS SOLD
-----	-----
ACQUIRED TITLES	376,632
CONTRACT DOCUMENTS	11,461
COMMITTEE REPORTS	131,060
MANUALS	104,284
PROCEEDINGS	484,011
PURCHASED TITLES	128,866
STANDARDS	236,216
ICE TITLES	160,350
TOTALS	----- 1,632,880

FORM 990, PART I - PAYMENTS TO AFFILIATES  
=====

DESCRIPTION  
-----

AMOUNT  
-----

RESERVED FOR FUTURE USE

-100,523.  
-----

TOTAL

-100,523.  
=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED LOSS ON INVESTMENTS	5,970,770.
TOTAL	<u>5,970,770.</u>

PART II, LINE 42 - DEPRECIATION EXPENSE  
PART IV, LINE 57a - LAND, BUILDINGS, AND EQUIPMENT  
PART IV, LINE 57b - ACCUMULATED DEPRECIATION

DESCRIPTION	AMOUNT
EQUIPMENT, FURNITURE & FIXTURES	3,676,773
COMPUTER EQUIPMENT	8,373,672
LEASEHOLD IMPROVEMENTS	<u>211,724</u>
	12,262,169
ACCUMULATED DEPRECIATION	<u>(7,994,873)</u>
NET FIXED ASSETS	<u><u>4,267,296</u></u>

The depreciation expense for September 30, 2001 was \$1,248,462

Fixed assets are stated at cost, less accumulated depreciation and amortization determined using the straight-line method over the following useful lives

Computer Equipment	3 - 5 years
Equipment, Furniture and Fixtures	7 to 10 years
Leasehold Improvements	Lesser of 5 years or life of related lease

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	PROGRAM SERVICES
CONSULTING	1,947,519.
INSURANCE	94,656.
GENERAL CONTINGENCY	25,000.
SECTION EXP.	524,930.
TEMP HELP	26,000.
INSTRUCTORS FEES	1,166,316.
AWARDS, SPEC FNDS & INST	2,651,492.
OTHER AWARDS	137,627.
SUBSCRIPTIONS	56,436.
PROPERTY, SALES & INCOME TAXES	153,957.
PROF MEMBERSHIP/ACCREDITATION	366,671.
TOTALS	7,150,604.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE  
=====

THE OBJECTIVE OF THE SOCIETY IS THE ADVANCEMENT OF THE SCIENCE AND  
PROFESSION OF ENGINEERING TO ENHANCE THE WELFARE OF HUMANITY.



FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

EXPENSES

11,767,625.

THE PUBLICATION DIVISION PROVIDED MEMBERS WITH INFORMATION ON CURRENT TRENDS AND PROJECTS/ISSUES IN CIVIL ENGINEERING. IN ADDITION, TECHNICAL PAPERS/BOOKS ARE SOLD TO PROVIDE MEMBERSHIP ACCESS TO RELEVANT TOPICS IN CIVIL ENGINEERING.

5,442,929.

MEMBERSHIP SERVICES PROVIDED CAREER PLANNING: EMPLOYMENT SERVICES, JOB REFERRAL AND RECRUITING SERVICE, ASCE SALARY SURVEY, SALARY INDEX, INSURANCE AND FINANCIAL PROGRAMS.

5,998,492.

THE TECHNICAL & PROFESSIONAL COMMITTEES OF THE SOCIETY ESTABLISHED TECHNICAL STANDARDS.

2,925,006.

THE EXECUTIVE BOARD HAD IMMEDIATE SUPERVISION AND CONTINUING OVERSIGHT OF THE FINANCIAL AFFAIRS OF THE SOCIETY. IT HAD THE POWER TO CONSIDER AND CONDUCT DISCIPLINARY PROCEEDINGS AGAINST ANY MEMBER.

TOTAL

26,134,052.

AMERICAN SOCIETY OF CIVIL ENGINEERS  
EIN 13-1635293  
YEAR ENDED SEPTEMBER 30, 2001

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FORM 990

STATEMENT 10

PART III, LINE e - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>EXPENSES</u>
Meetings and exhibits The Society held an annual convention to keep the professional civil engineer abreast of the technical developments in the field	1,621,439
Specialty conferences The Society sponsored approximately 25 specialty conferences during the year. The conferences featured keynote speakers and exhibits displaying products and services	1,971,782
Continuing education ASCE Continuing Education sponsored more than 150 technical, management, regulatory and computer-based continuing professional development seminars and workshops nationwide during the year for civil engineers and related professionals	4,261,579
Government and public affairs The Society coordinated government affairs activities of national significance for members of the civil engineering profession	2,892,456
Educational activities The Society developed curriculum guidance for technical institute, technology, and undergraduate and graduate civil engineering programs, career guidance programs for primary, secondary and college students, guidance for student chapters and clubs, and continuing education	1,509,929
Professional activities The Society proposed policies concerning appropriate professional standards and economic conditions for civil engineering practice	<u>1,151,092</u>
Total	<u><u>13,408,277</u></u>

STATEMENT 10

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION

ENDING  
BOOK VALUE

MUTUAL FUNDS

22,237,044.

TOTALS

22,237,044.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
DUE TO ASCE	-73,886.
DUE FROM CERF	539,664.
	-----
TOTALS	465,778.
	=====

FORM 990, PART IV - OTHER LIABILITIES

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DESCRIPTION	ENDING BOOK VALUE
-----	-----
ANNUAL LEAVE PAYABLE	690,455.
FUNDS HELD FOR OTHERS	342,269.
ACCRUED PENSION COST	2,232,242.
TOTALS	----- 3,264,966. -----

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	-1,632,880.
TOTAL	-1,632,880.

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

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DESCRIPTION	AMOUNT
-----	-----
COST OF GOODS SOLD	-1,632,880.
	-----
TOTAL	-1,632,880.
	-----

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAMES DAVIS C/O ASCE	EXECUTIVE FULL TIME	340,172.	27,334.	NONE

SEE FOLLOWING PAGE FOR THE LIST OF DIRECTORS WHO SERVE ON AN AS NEEDED BASIS WITH NO COMPENSATION, CONTRIBUTION TO BENEFIT PLANS, OR EXPENSE ACCOUNT.

ALL MEMBERS CAN BE CONTACTED C/O ASCE.

GRAND TOTALS	340,172.	27,334.	NONE
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PART V, LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

Officers and members of the board of directors receive reimbursement for actual travel, meals and lodging expenses related to board meetings

**President**

Robert W Bein, P E , F ASCE

**Past-President**

Delon Hampton, Ph D , P E , Hon M ASCE

**President-elect**

H Gerald Schwartz, Jr Ph D , P E , F ASCE

**Vice Presidents**

David G Mongan, P E , F ASCE

Thomas S Slater, P E , M ASCE

Dennis R Martenson, P E , DEE, M ASCE

Charles R Rendall, P E , F ASCE

**Directors**

Alfred H S Ang, Ph D , Hon M ASCE

Louis C Aurigemma, P E , F ASCE

George E Blandford, M ASCE

Lauren B Brown, III, P E , F ASCE

James R Carlsen, P E , M ASCE

William R Gibson, P E , F ASCE

John J Gillespie, P E , F ASCE

Moustafa Gouda, P E , F ASCE

W Craig Helms, P E , M ASCE

Blaine D Leonard, P E , F ASCE

William R Merwarth, Jr , P E , F ASCE

Randall S Over, P E , M ASCE

Robert S Patton, Jr , P E , F ASCE

Thomas J Pilch, P E , P G , M ASCE

Marlo Ricozzi, P E , F ASCE

Jeffrey S Russell, Ph D , P E , M ASCE

Joseph R Synchronick, P E , M ASCE

Paul C Taylor, P E , M ASCE

G Nicholas Textor, P E , F ASCE

Fred P Wagner, Jr , Ph D , P E , M ASCE

James C Webb, P E , M ASCE

**District Representative**

Charles A Tiltrum, M ASCE

**Secretary**

James E Davis, P E , F ASCE

**Treasurer**

Michael L Stevens, P E , F ASCE

**Assistant Secretary**

Lawrence H Roth, P E , F ASCE

FORM 990, PART VII - PROGRAM SERVICE REVENUE

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
PUBLICATION SALES	541800	2,610,295.			6,423,737.
MEETINGS & EXHIBIT					2,211,009.
SPECIALTY CONF.					1,980,993.
CONTINUING EDUC.					4,312,822.
ENTRANCE FEES					12,232.
ADVERTISING					3,122,122.
TOTALS		2,610,295.			18,062,915.

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A, B	ASCE ISSUES PUBLICATIONS TO KEEP THE CIVIL ENGINEER INFORMED OF CURRENT TRENDS AND ISSUES IN CIVIL ENGINEERING.
93C 93D	SPECIALTY CONFERENCES PROVIDE AN OPPORTUNITY FOR ATTENDEES TO LEARN AND EXCHANGE INFORMATION WITH OTHER CIVIL ENGINEERS.
93E	ENTRANCE FEES ARE DUE FORM MEMBERS WITH ANY APPLICATION FOR ADMISSION OR REINSTATEMENT TRANSFER.
93F	ASCE ADVERTISES IN ITS CIVIL ENGINEERS MAGAZINE, WHICH ENGINEERS CAN USE IN THEIR PRACTICES, AND IN ASCE NEWS, IT POSTS ADS FOR JOBS AT UNIVERSITIES AND OTHER COMPANIES.
94	MEMBER DUES SUPPORT THE OBJECTIVE OF THE SOCIETY (SEE PART III).
102	TECHNICAL BOOKS ARE SOLD TO ENGINEERS.
103D	OUTSIDE PEER REVIEW, CAREER GUIDANCE, CURRICULUM ACCREDITATION, EDUCATIONAL ACTIVITIES, STUDENT SERVICES AND GOVERNMENT SPECIAL SERVICIS CONTRIBUTE TO THE OBJECTIVE OF THE SOCIETY.

SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 12 - 1999

=====

DISQUALIFIED PERSON

-----

AMOUNT

-----

BOARD MEMBER DUES

4,935.

-----

TOTAL

4,935.

=====

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SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 12 - 1998

=====

DISQUALIFIED PERSON

-----

AMOUNT

-----

BOARD MEMBER DUES

4,935.

TOTAL

-----  
4,935.  
=====

SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 12 - 1997

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DISQUALIFIED PERSON

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AMOUNT

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BOARD MEMBER DUES

4,480.

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TOTAL

4,480.

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SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 12 - 1996

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DISQUALIFIED PERSON

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AMOUNT

---

BOARD MEMBER DUES

4,480.

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TOTAL

4,480.

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SCHEDULE A, PART VI-B - MAILINGS TO MEMBERS

ASCE EDUCATES PUBLIC POLICY LEADERS THROUGH MAILINGS REGARDING ISSUES OF CONCERN TO THE CIVIL ENGINEERING PROFESSION. ADDITIONALLY, ASEC EDUCATES AND MOBILIZES ITS MEMBERS TO COMMUNICATE WITH POLICY MAKERS ON KEY POLICY ISSUES.



SCHEDULE A, PART VI-B - MAILINGS TO MEMBERS  
=====

ASCE EDUCATES PUBLIC POLICY LEADERS THROUGH MAILINGS REGARDING  
ISSUES OF CONCERN TO THE CIVIL ENGINEERING PROFESSION. ADDITIONALLY,  
ASEC EDUCATES AND MOBILIZES ITS MEMBERS TO COMMUNICATE WITH POLICY  
MAKERS ON KEY POLICY ISSUES.

**SCHEDULE A, PART VI-B - DIRECT CONTACT WITH LEGISLATORS**

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ASCE EDUCATES PUBLIC POLICY LEADERS REGARDING ISSUES OF CONCERN TO THE CIVIL ENGINEERING PROFESSION. ADDITIONALLY, ASCE EDUCATES AND MOBILIZ ITS MEMBERS TO COMMUNICATE WITH POLICY MAKERS ON KEY POLICY ISSUES.

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury  
 Internal Revenue Service

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)**

**Note** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

<b>Type or print</b>	Name of Exempt Organization <b>AMERICAN SOCIETY OF CIVIL ENGINEERS</b>	Employer identification number <b>13-1635293</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions <b>1801 ALEXANDER BELL DRIVE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>RESTON, VA 22091</b>	

**Check type of return to be filed (file a separate application for each return)**

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)               | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T(sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)    | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                            | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole group** check this box  If it is for **part of the group** check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until MAY 15 2002, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning OCTOBER 1, 2000 and ending SEPTEMBER 30, 2001

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

- 3a If this application is for Form 990-BL, 990-PF, 990-T 4720, or 6069, enter the tentative tax less any nonrefundable credits. See instructions. \$ \_\_\_\_\_ N/A
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_ N/A
- c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form or, if required, deposit with FTD coupon or if required by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ \_\_\_\_\_ NONE

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ \_\_\_\_\_ Title ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

For Paperwork Reduction Act Notice, see Instruction

• If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box  **X**

**Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868**

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

**Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.**

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>AMERICAN SOCIETY OF CIVIL ENGINEERS</b>	Employer identification number <b>13-1635293</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>1801 ALEXANDER BELL DRIVE</b>	For IRS use only
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions <b>RESTON, VA 22091</b>	

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

**STOP Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868**

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole group**, check this box  If it is for **part of the group**, check this box  and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until AUGUST 15, 2002

5 For calendar year \_\_\_\_\_, or other tax year beginning OCT 1, 2000 and ending SEP 30, 2001

6 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension: ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN

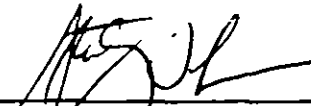
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ N/A

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. \$ N/A

c **Balance Due** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ NONE

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title Chief Financial Officer Date 5-7-02

**Notice to Applicant - To Be Completed by the IRS**

We have approved this application. Please attach this form to the organization's return.

We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.

We have not approved this application. After considering the reasons stated in item 7, we cannot extend the due date of the extension of time to file. We are not granting a 10-day grace period.

We cannot consider this application because it was filed after the due date of the return for which an extension was requested.

Other \_\_\_\_\_

**EXTENSION APPROVED**

**MAY 21 2002**

LINDA WEISKOPF FIELD DIRECTOR  
SUBMISSION PROCESSING OGDEN

By \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name <b>KPMG LLP ATTN RICHARD J LOCASTRO</b>
	Number and street (include suite, room, or apt. no.) Or a P.O. box number <b>2001 M STREET, NW</b>
	City or town, province or state, and country (including postal or ZIP code) <b>WASHINGTON, DC 20036-3300</b>
	Country (if not in the United States)