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Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2012

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2012 or other tax year beginning **OCT 1, 2012**, and ending **SEP 30, 2013**

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

AMERICAN SOCIETY OF CIVIL ENGINEERS, INC.

D Employer identification number (Employees' trust, see instructions)

13-1635293

B Exempt under section

501(c)(3)

408(e) 220(e)

408A 530(a)

529(a)

Print or Type

Number, street, and room or suite no. If a P.O. box, see instructions.

1801 ALEXANDER BELL DRIVE

City or town, state, and ZIP code

RESTON, VA 20191-4400

E Unrelated business activity codes (See instructions)

541800 561499

C Book value of all assets at end of year

22,012,113.

F Group exemption number (see instructions)

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. **SEE STATEMENT 1**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

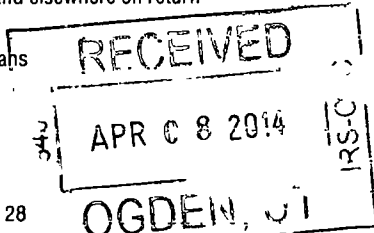
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **THE ORGANIZATION** Telephone number **703-295-6118**

| Part I Unrelated Trade or Business Income | | (A) Income | (B) Expenses | (C) Net |
|---|-----------------|-------------------|-----------------|-------------------|
| 1 a Gross receipts or sales | 177,468. | | | |
| b Less returns and allowances | | 177,468. | | |
| 2 Cost of goods sold (Schedule A, line 7) | | | | |
| 3 Gross profit. Subtract line 2 from line 1c | | 177,468. | | 177,468. |
| 4 a Capital gain net income (attach Schedule D) | | | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | | | | |
| c Capital loss deduction for trusts | | | | |
| 5 Income (loss) from partnerships and S corporations (attach statement) | | | | |
| 6 Rent income (Schedule C) | | | | |
| 7 Unrelated debt-financed income (Schedule E) | | | | |
| 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) | | | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | | | | |
| 10 Exploited exempt activity income (Schedule I) | | 588,846. | 37,647. | 551,199. |
| 11 Advertising income (Schedule J) | | 1,625,667. | 935,489. | 690,178. |
| 12 Other income (see instructions; attach statement) | | | | |
| 13 Total. Combine lines 3 through 12 | | 2,391,981. | 973,136. | 1,418,845. |

Part II Deductions Not Taken Elsewhere (see instructions for limitations on deductions) (except for contributions, deductions must be directly connected with the unrelated business income)

| | | |
|--|------------|-------------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | 14 | |
| 15 Salaries and wages | 15 | |
| 16 Repairs and maintenance | 16 | |
| 17 Bad debts | 17 | |
| 18 Interest (attach statement) | 18 | |
| 19 Taxes and licenses | 19 | 20,921. |
| 20 Charitable contributions (see instructions for limitation rules) STATEMENT 4 SEE STATEMENT 2 | 20 | 36,417. |
| 21 Depreciation (attach Form 4562) | 21 | |
| 22 Less depreciation claimed on Schedule A and elsewhere on return | 22a | |
| 23 Depletion | 23 | |
| 24 Contributions to deferred compensation plans | 24 | |
| 25 Employee benefit programs | 25 | |
| 26 Excess exempt expenses (Schedule I) | 26 | |
| 27 Excess readership costs (Schedule J) | 27 | 690,178. |
| 28 Other deductions (attach statement) SEE STATEMENT 3 | 28 | 342,574. |
| 29 Total deductions. Add lines 14 through 28 | 29 | 1,090,090. |
| 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 | 30 | 328,755. |
| 31 Net operating loss deduction (limited to the amount on line 30) | 31 | |
| 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 | 32 | 328,755. |
| 33 Specific deduction (generally \$1,000, but see instructions for exceptions) | 33 | 1,000. |
| 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 | 34 | 327,755. |



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70

AMERICAN SOCIETY OF CIVIL ENGINEERS, INC.

Form 990-T (2012)

13-1635293

Page 2

Part III Tax Computation

35 Organizations taxable as corporations (see instructions for tax computation).
 Controlled group members (sections 1561 and 1563) check here **See instructions and:**
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
 (1) \$ 50,000. (2) \$ 25,000. (3) \$ 9,925,000.
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ 11,388.
 (2) Additional 3% tax (not more than \$100,000) \$ _____
c Income tax on the amount on line 34 **SEE STATEMENT 5** **35c** 111,075.
36 Trusts taxable at trust rates (see instructions for tax computation). Income tax on the amount on line 34 from:
 Tax rate schedule or Schedule D (Form 1041) **36** _____
37 Proxy tax (see instructions) **37** _____
38 Alternative minimum tax **38** _____
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies **39** 111,075.

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **40a** _____
b Other credits (see instructions) **40b** _____
c General business credit. Attach Form 3800 **40c** _____
d Credit for prior year minimum tax (attach Form 8801 or 8827) **40d** _____
e Total credits. Add lines 40a through 40d **40e** _____
41 Subtract line 40e from line 39 **41** 111,075.
42 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach statement) **42** _____
43 Total tax. Add lines 41 and 42 **43** 111,075.
44a Payments: A 2011 overpayment credited to 2012 **44a** _____
b 2012 estimated tax payments **44b** 165,973.
c Tax deposited with Form 8868 **44c** _____
d Foreign organizations: Tax paid or withheld at source (see instructions) **44d** _____
e Backup withholding (see instructions) **44e** _____
f Credit for small employer health insurance premiums (Attach Form 8941) **44f** _____
g Other credits and payments. Form 2439 Form 4136 Other _____ **Total** **44g** _____
45 Total payments. Add lines 44a through 44g **45** 165,973.
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached **46** _____
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed **47** _____
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid **48** 54,898.
49 Enter the amount of line 48 you want: **Credited to 2013 estimated tax** 54,898. **Refunded** **49** 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **Yes** **No**
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file **Yes** **No**
3 Enter the amount of tax-exempt interest received or accrued during the tax year **\$** _____ **Yes** **No**

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1 Inventory at beginning of year **1** _____
2 Purchases **2** _____
3 Cost of labor **3** _____
4a Additional section 263A costs (att statement) **4a** _____
b Other costs (attach statement) **4b** _____
5 Total. Add lines 1 through 4b **5** _____
6 Inventory at end of year **6** _____
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 **7** _____
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? **Yes** **No**

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer [Signature] Date 14/2/14 Title CFO
 May the IRS discuss this return with the preparer shown below (see instructions)? **Yes** **No**

Paid Preparer Use Only
 Print/Type preparer's name ELIZABETH W. HELLER Preparer's signature [Signature] Date 3/3/14 Check if self-employed PTIN P00397829
 Firm's name TATE AND TRYON Firm's EIN 52-1855942
 Firm's address 2021 L STREET NW SUITE 400 WASHINGTON, DC 20036 Phone no. (202) 293-2200

223711 01-11-13

Form 990-T (2012)

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

Table with 4 rows for property description (1-4).

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 0. (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

Table with 4 columns: 1. Description of debt-financed property, 2. Gross income from or allocable to debt-financed property, 3(a) Straight line depreciation, 3(b) Other deductions.

Table with 5 columns: 4. Amount of average acquisition debt, 5. Average adjusted basis, 6. Column 4 divided by column 5, 7. Gross income reportable, 8. Allocable deductions.

Totals: Total dividends-received deductions included in column 8. Enter here and on page 1, Part I, line 7, column (A) 0. Enter here and on page 1, Part I, line 7, column (B) 0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table for Exempt Controlled Organizations with 6 columns: 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income, 4. Total of specified payments made, 5. Part of column 4 that is included in the controlling organization's gross income, 6. Deductions directly connected with income.

Nonexempt Controlled Organizations

Table with 5 columns: 7. Taxable income, 8. Net unrelated income (loss), 9. Total of specified payments made, 10. Part of column 9 that is included in the controlling organization's gross income, 11. Deductions directly connected with income.

Totals: Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A) 0. Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B) 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (col 3 plus col 4) |
|--------------------------|---------------------|---|----------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| Totals | 0. | | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | STMT 6 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7 | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
|--------------------------------------|---|---|---|---|--------------------------------------|---|
| (1) WEBSITE/JOB | | | | | | |
| (2) BOARD | 588,846. | 37,647. | 551,199. | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals | 588,846. | 37,647. | | | | 0. |

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|--|-----------------------------|-----------------------------|---|-----------------------|---------------------|--|
| (1) CONSOLIDATED | | | | | | |
| (2) PERIODICALS | 1,625,667. | 935,489. | | 1,366,565. | 3,313,150. | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | 1,625,667. | 935,489. | 690,178. | 1,366,565. | 3,313,150. | 690,178. |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|------------------------------------|-----------------------------|-----------------------------|---|-----------------------|---------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 1,625,667. | 935,489. | | | | 690,178. |
| Totals, Part II (lines 1-5) | 1,625,667. | 935,489. | | | | 690,178. |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percent of time devoted to business | 4. Compensation attributable to unrelated business |
|--|----------|--|--|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | | | 0. |

Alternative Minimum Tax - Corporations

▶ Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

2012

Name **AMERICAN SOCIETY OF CIVIL ENGINEERS, INC.** Employer identification number **13-1635293**

Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e).

| | | |
|--|----|----------|
| 1 | 1 | 327,755. |
| 2 Adjustments and preferences: | | |
| a Depreciation of post-1986 property | 2a | |
| b Amortization of certified pollution control facilities | 2b | |
| c Amortization of mining exploration and development costs | 2c | |
| d Amortization of circulation expenditures (personal holding companies only) | 2d | |
| e Adjusted gain or loss | 2e | |
| f Long-term contracts | 2f | |
| g Merchant marine capital construction funds | 2g | |
| h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) | 2h | |
| i Tax shelter farm activities (personal service corporations only) | 2i | |
| j Passive activities (closely held corporations and personal service corporations only) | 2j | |
| k Loss limitations | 2k | |
| l Depletion | 2l | |
| m Tax-exempt interest income from specified private activity bonds | 2m | |
| n Intangible drilling costs | 2n | |
| o Other adjustments and preferences | 2o | |
| 3 | 3 | 327,755. |
| 4 Adjusted current earnings (ACE) adjustment: | | |
| a ACE from line 10 of the ACE worksheet in the instructions | 4a | 327,755. |
| b Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount (see instructions) | 4b | 0. |
| c Multiply line 4b by 75% (.75). Enter the result as a positive amount | 4c | |
| d Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments (see instructions). Note: You must enter an amount on line 4d (even if line 4b is positive) | 4d | |
| e ACE adjustment | 4e | 0. |
| • If line 4b is zero or more, enter the amount from line 4c | | |
| • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount | | |
| 5 Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT | 5 | 327,755. |
| 6 Alternative tax net operating loss deduction (see instructions) | 6 | |
| 7 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions | 7 | 327,755. |
| 8 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): | | |
| a Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- | 8a | |
| b Multiply line 8a by 25% (.25) | 8b | |
| c Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- | 8c | 0. |
| 9 Subtract line 8c from line 7. If zero or less, enter -0- | 9 | 327,755. |
| 10 Multiply line 9 by 20% (.20) | 10 | 65,551. |
| 11 Alternative minimum tax foreign tax credit (AMTFTC) (see instructions) | 11 | |
| 12 Tentative minimum tax. Subtract line 11 from line 10 | 12 | 65,551. |
| 13 Regular tax liability before applying all credits except the foreign tax credit | 13 | 111,075. |
| 14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return | 14 | 0. |

JWA For Paperwork Reduction Act Notice, see separate instructions.

Form 4626 (2012)

* SEE ALSO

STATEMENT 7

Adjusted Current Earnings (ACE) Worksheet

▶ See ACE Worksheet Instructions.

| | | | |
|--|-------|----|----------|
| 1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 | | 1 | 327,755. |
| 2 ACE depreciation adjustment: | | | |
| a AMT depreciation | | 2a | |
| b ACE depreciation: | | | |
| (1) Post-1993 property | 2b(1) | | |
| (2) Post-1989, pre-1994 property | 2b(2) | | |
| (3) Pre-1990 MACRS property | 2b(3) | | |
| (4) Pre-1990 original ACRS property | 2b(4) | | |
| (5) Property described in sections 168(f)(1) through (4) | 2b(5) | | |
| (6) Other property | 2b(6) | | |
| (7) Total ACE depreciation. Add lines 2b(1) through 2b(6) | 2b(7) | | |
| c ACE depreciation adjustment. Subtract line 2b(7) from line 2a | | 2c | |
| 3 Inclusion in ACE of items included in earnings and profits (E&P): | | | |
| a Tax-exempt interest income | 3a | | |
| b Death benefits from life insurance contracts | 3b | | |
| c All other distributions from life insurance contracts (including surrenders) | 3c | | |
| d Inside buildup of undistributed income in life insurance contracts | 3d | | |
| e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) | 3e | | |
| f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e | | 3f | |
| 4 Disallowance of items not deductible from E&P: | | | |
| a Certain dividends received | 4a | | |
| b Dividends paid on certain preferred stock of public utilities that are deductible under section 247 | 4b | | |
| c Dividends paid to an ESOP that are deductible under section 404(k) | 4c | | |
| d Nonpatronage dividends that are paid and deductible under section 1382(c) | 4d | | |
| e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a partial list) | 4e | | |
| f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e | | 4f | |
| 5 Other adjustments based on rules for figuring E&P: | | | |
| a Intangible drilling costs | 5a | | |
| b Circulation expenditures | 5b | | |
| c Organizational expenditures | 5c | | |
| d LIFO inventory adjustments | 5d | | |
| e Installment sales | 5e | | |
| f Total other E&P adjustments. Combine lines 5a through 5e | | 5f | |
| 6 Disallowance of loss on exchange of debt pools | | 6 | |
| 7 Acquisition expenses of life insurance companies for qualified foreign contracts | | 7 | |
| 8 Depletion | | 8 | |
| 9 Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property | | 9 | |
| 10 Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of Form 4626 | | 10 | 327,755. |

**SCHEDULE O
(Form 1120)**

(Rev. December 2012)
Department of the Treasury
Internal Revenue Service

**Consent Plan and Apportionment Schedule
for a Controlled Group**

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-L, 1120-PC, 1120-REIT, or 1120-RIC.
▶ Information about Schedule O (Form 1120) and its instructions is available at www.irs.gov/form1120.

OMB No 1545-0123

| | |
|---|--|
| Name AMERICAN SOCIETY OF CIVIL ENGINEERS | Employer identification number 13-1635293 |
|---|--|

Part I Apportionment Plan Information

- 1 Type of controlled group:
- a Parent-subsidiary group
 - b Brother-sister group
 - c Combined group
 - d Life insurance companies only
- 2 This corporation has been a member of this group:
- a For the entire year
 - b From _____, 20_____, until _____, 20_____
- 3 This corporation consents and represents to:
- a Adopt an apportionment plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on 9/30, 2013, and for all succeeding tax years.
 - b Amend the current apportionment plan. All the other members of this group are currently amending a previously adopted plan, which was in effect for the tax year ending _____, 20_____, and for all succeeding tax years.
 - c Terminate the current apportionment plan and not adopt a new plan. All the other members of this group are not adopting an apportionment plan.
 - d Terminate the current apportionment plan and adopt a new plan. All the other members of this group are adopting an apportionment plan effective for the current tax year which ends on _____, 20_____, and for all succeeding tax years.
- 4 If you checked box 3c or 3d above, check the applicable box below to indicate if the termination of the current apportionment plan was:
- a Elected by the component members of the group.
 - b Required for the component members of the group
- 5 If you did not check a box on line 3 above, check the applicable box below concerning the status of the group's apportionment plan (see instructions).
- a No apportionment plan is in effect and none is being adopted.
 - b An apportionment plan is already in effect. It was adopted for the tax year ending _____, 20_____, and for all succeeding tax years.
- 6 If all the members of this group are adopting a plan or amending the current plan for a tax year after the due date (including extensions) of the tax return for this corporation, is there at least one year remaining on the statute of limitations from the date this corporation filed its amended return for such tax year for assessing any resulting deficiency?
See instructions.
- a Yes.
 - (i) The statute of limitations for this year will expire on _____, 20_____.
 - (ii) On _____, 20_____, this corporation entered into an agreement with the Internal Revenue Service to extend the statute of limitations for purposes of assessment until _____, 20_____.
 - b No. The members may not adopt or amend an apportionment plan.
- 7 Required information and elections for component members. Check the applicable box(es) (see instructions).
- a The corporation will determine its tax liability by applying the maximum tax rate imposed by section 11 to the entire amount method) for allocating the additional taxes for the group imposed by section 11(b)(1).
 - b The corporation and the other members of the group elect the FIFO method (rather than defaulting to the proportionate method) for allocating the additional taxes for the group imposed by section 11(b)(1).
 - c The corporation has a short tax year that does not include December 31.

Part II Taxable Income Apportionment (See instructions)

Caution: Each total in Part II, column (g) for each component member must equal taxable income from Form 1120, page 1, line 30 or the comparable line of such member's tax return.

| | (a) Group member's name and employer identification number | (b) Tax year end (Yr-Mo) | Taxable Income Amount Allocated to Each Bracket | | | | | (g) Total (add columns (c) through (f)) |
|--------------|--|--------------------------------|--|------------|------------|------------|------------|---|
| | | | (c) 15% | (d) 25% | (e) 34% | (f) 35% | | |
| 1 | AMERICAN SOCIETY OF CIVIL ENGINEERS 13-1635293 | 2013-09 | 50,000 | 25,000 | 252,755 | | 327,755.00 | |
| 2 | AMERICAN SOCIETY OF CIVIL ENGINEERS FDN 52-1891243 | 2013-09 | 0 | 0 | 31,820 | | 31,820.00 | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| Total | | | 50,000.00 | 25,000.00 | 284,575.00 | 0.00 | 359,575.00 | |

Part III Income Tax Apportionment (See instructions)

Income Tax Apportionment

| (a) Group member's name | (b) 15% | (c) 25% | (d) 34% | (e) 35% | (f) 5% | (g) 3% | (h) Total income tax (combine lines (b) through (g)) |
|--|------------|------------|------------|------------|-----------|-----------|---|
| 1 AMERICAN SOCIETY OF CIVIL ENGINEERS | 7,500 | 6,250 | 85,937 | 0 | 11,388 | 0 | 111,075.00 |
| 2 AMERICAN SOCIETY OF CIVIL ENGINEERS FDN | 0 | 0 | 10,819 | 0 | 0 | 0 | 10,819.00 |
| 3 ----- | | | | | | | |
| 4 ----- | | | | | | | |
| 5 ----- | | | | | | | |
| 6 ----- | | | | | | | |
| 7 ----- | | | | | | | |
| 8 ----- | | | | | | | |
| 9 ----- | | | | | | | |
| 10 ----- | | | | | | | |
| Total | 7,500.00 | 6,250.00 | 96,756.00 | 0.00 | 11,388.00 | 0.00 | 121,894.00 |

Part IV Other Apportionments (See instructions)

Other Apportionments

| (a) Group member's name | (b) Accumulated earnings credit | (c) AMT exemption amount | (d) Phaseout of AMT exemption amount | (e) Penalty for failure to pay estimated tax | (f) Other |
|---|---------------------------------|--------------------------|--------------------------------------|--|-----------|
| 1 AMERICAN SOCIETY OF CIVIL ENGINEERS | | 20,000 | 75,000 | | |
| 2 AMERICAN SOCIETY OF CIVIL ENGINEERS FDN | | 20,000 | 75,000 | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| Total | 0.00 | 40,000.00 | 150,000.00 | 0.00 | 0.00 |

| FORM 990-T | | CONTRIBUTIONS | STATEMENT | 2 |
|--------------------------------------|------------------------------|---------------|-----------|---|
| DESCRIPTION/KIND OF PROPERTY | METHOD USED TO DETERMINE FMV | | AMOUNT | |
| CASH ONLY | N/A | | 54,240. | |
| TOTAL TO FORM 990-T, PAGE 1, LINE 20 | | | 54,240. | |

FORM 990-T

OTHER DEDUCTIONS

STATEMENT 3

DESCRIPTION

AMOUNT

CONFERENCE CENTER EXPENSES

338,574.

TAX RETURN PREPARATION EXPENSE

4,000.

TOTAL TO FORM 990-T, PAGE 1, LINE 28

342,574.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 4

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

| | |
|-------------------|-----------|
| FOR TAX YEAR 2007 | |
| FOR TAX YEAR 2008 | 1,040,150 |
| FOR TAX YEAR 2009 | 290,796 |
| FOR TAX YEAR 2010 | |
| FOR TAX YEAR 2011 | |

TOTAL CARRYOVER 1,330,946

TOTAL CURRENT YEAR 10% CONTRIBUTIONS 54,240

TOTAL CONTRIBUTIONS AVAILABLE 1,385,186

TAXABLE INCOME LIMITATION AS ADJUSTED 36,417

EXCESS 10% CONTRIBUTIONS 1,348,769

EXCESS 100% CONTRIBUTIONS 0

TOTAL EXCESS CONTRIBUTIONS 1,348,769

ALLOWABLE CONTRIBUTIONS DEDUCTION 36,417

TOTAL CONTRIBUTION DEDUCTION 36,417

FORM 990-T

TAX COMPUTATION

STATEMENT 5

| | | | |
|-----|---|---------|----------------|
| 1. | TAXABLE INCOME | 327,755 | |
| 2. | LESSER OF LINE 1 OR FIRST BRACKET AMOUNT . | 50,000 | |
| 3. | LINE 1 LESS LINE 2 | 277,755 | |
| 4. | LESSER OF LINE 3 OR SECOND BRACKET AMOUNT . | 25,000 | |
| 5. | LINE 3 LESS LINE 4 | 252,755 | |
| 6. | INCOME SUBJECT TO 34% TAX RATE | 252,755 | |
| 7. | INCOME SUBJECT TO 35% TAX RATE | 0 | |
| 8. | 15 PERCENT OF LINE 2 | 7,500 | |
| 9. | 25 PERCENT OF LINE 4 | 6,250 | |
| 10. | 34 PERCENT OF LINE 6 | 85,937 | |
| 11. | 35 PERCENT OF LINE 7 | 0 | |
| 12. | ADDITIONAL 5% SURTAX. | 11,388 | |
| 13. | ADDITIONAL 3% SURTAX | 0 | |
| 14. | TOTAL OF LINES 8 THROUGH 13 TO FORM 990-T, PAGE 2, LINE 35C | | <u>111,075</u> |

FORM 990-T SCHEDULE I - EXPENSES DIRECTLY CONNECTED WITH STATEMENT 6
 PRODUCTION OF UNRELATED BUSINESS INCOME

| DESCRIPTION | ACTIVITY NUMBER | AMOUNT | TOTAL |
|---|-----------------|---------|---------|
| WEBSITE/JOB BOARD EXPENSES | | 37,647. | |
| - SUBTOTAL - | 1 | | 37,647. |
| TOTAL OF FORM 990-T, SCHEDULE I, COLUMN 3 | | | 37,647. |

FORM 4626

AMT CONTRIBUTIONS

STATEMENT 7

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

- FOR TAX YEAR 2007
- FOR TAX YEAR 2008
- FOR TAX YEAR 2009
- FOR TAX YEAR 2010
- FOR TAX YEAR 2011

TOTAL CARRYOVER

CURRENT YEAR CONTRIBUTIONS

54,240

TOTAL CONTRIBUTIONS

10% OF TAXABLE INCOME AS ADJUSTED

54,240

36,417

EXCESS CONTRIBUTIONS

17,823

ALLOWABLE CONTRIBUTIONS

36,417

AMT CHARITABLE DEDUCTION

REGULAR CONTRIBUTION DEDUCTION

36,417

36,417

AMT CONTRIBUTION ADJUSTMENT

0

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **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).

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

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|---|--|--|
| Type or print | Name of exempt organization or other filer, see instructions. AMERICAN SOCIETY OF CIVIL ENGINEERS, INC. | Employer identification number (EIN) or 13-1635293 |
| 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. 1801 ALEXANDER BELL DRIVE | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. RESTON, VA 20191-4400 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 07

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

THE ORGANIZATION

• The books are in the care of ▶ **1801 ALEXANDER BELL DRIVE - RESTON, VA 20191-4400**
Telephone No. ▶ **703-295-6118** FAX No ▶

• 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.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2014**, 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 **OCT 1, 2012**, and ending **SEP 30, 2013**.

2 If the tax year entered in line 1 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. | 3a | \$ | 115,458. |
| 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. | 3b | \$ | 165,973. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2013)