For	" 9	90	Return of Organization Exempt Fron Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	(except private foundation	OMB No. 1545-0047					
		of the Treasury	Do not enter Social Security numbers on this form as it may	•	Open to Public					
-		enue Service	▶ Information about Form 990 and its instructions is at www ar year, or tax year beginning APR 1, 2013 and ending		Inspection					
	Check if		f organization	D Employer identifi						
	applicab	le:	i organization	D Employer identili	Cation number					
	Addre									
	Name	103651								
	Initial Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number Termin- 136 TBVING STREET 617 - 51									
	ated]Amen		IRVING STREET		576-5000					
	_lreturn ∏Applie	Gity or t	own, state or province, country, and ZIP or foreign postal code RIDGE, MA 02138	G Gross receipts \$	22,436,766.					
L	⊥ltion pendi		nd address of principal officer:MARK ROBINSON	H(a) Is this a group reference for subordinates						
			AS C ABOVE	H(b) Are all subordinates i						
11	Гах-ех	empt status:			list. (see instructions)					
J١	Nebsi	te: 🕨 WWW .	AMACAD.ORG	H(c) Group exemptio						
			X Corporation Trust Association Other ► L	Year of formation: 1780	A State of legal domicile: MA					
Pa	art I	Summary								
e	1	Briefly describ	e the organization's mission or most significant activities: THE AMER S IS AN INDEPENDENT POLICY RESEARCH C	ICAN ACADEMY	OF ARTS AND					
nan				· · · · · · · · · · · · · · · · · · ·						
Governance	2	Check this bo	· · · · · · · · · · · · · · · · · · ·		13					
ତ୍ର			lependent voting members of the governing body (Part VI, line 1b)		13					
Activities &			of individuals employed in calendar year 2013 (Part V, line 2a)	·······	44					
vitie			of volunteers (estimate if necessary)		650					
Acti			d business revenue from Part VIII, column (C), line 12		0.					
_	b	Net unrelated	business taxable income from Form 990-T, line 34		0.					
				Prior Year	Current Year					
ani			and grants (Part VIII, line 1h)	9,600,193. 833,128.	7,948,754. 763,992.					
Revenue			ce revenue (Part VIII, line 2g) ' come (Part VIII, column (A), lines 3, 4, and 7d)	1,030,114.	2,395,358.					
å			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.					
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,463,435.	11,108,104.					
			nilar amounts paid (Part IX, column (A), lines 1-3)	0.	330,971.					
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	0.	0.					
nses			r compensation, employee benefits (Part IX, column (A), lines 5-10)	4,354,256.	3,966,734.					
ens	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.					
Expei	b		ing expenses (Part IX, column (D), line 25) 954,823.	4,168,904.	7,380,086.					
	11		es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,523,160.	11,677,791.					
	18 19		expenses. Subtract line 18 from line 12	2,940,275.	-569,687.					
or				Beginning of Current Year	End of Year					
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)	71,082,518.	73,057,297.					
t As	21	Total liabilities	(Part X, line 26)	4,134,688.	4,186,677.					
			fund balances. Subtract line 21 from line 20	66,947,830.	68,870,620.					
-										
			l declare that I have examined this return, including accompanying schedules and sta . Declaration of preparer (other than officer) is based on all information of which prep		y knowledge and bellet, it is					
<u></u>	COILER		and I hold and the second							
Sig	n	Signatur	of officer	Date	1 1					
Here MARK ROBINSON, CHIEF OPERATING OFFICER $\frac{2}{12}$										
		Type or p	print name and title							
	Print/Type preparer's name Preparer's signature Date Check PTIN									
Paic			. KELLEHER, CPA DAVID J. KELLEHER,	C self-employ						
-	Darer	Firm's name		P.C. Firm's EIN	04-2571780					
USE	Only	⊢irm's address	► 21 EAST MAIN STREET WESTBORO, MA 01581	Bhone no 50	8-366-9100					
Max	/ the !!	l BS discuss this	s return with the preparer shown above? (see instructions)		<u>X</u> Yes No					
			For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2013)					
	332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013) SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION									

		age 2
Pa	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE AMERICAN ACADEMY OF ARTS AND SCIENCES IS A NATIONAL HONORARY	
	SOCIETY FOUNDED IN 1780 BY JOHN ADAMS AND OTHER LEADERS OF THE	
	MASSACHUSETTS BAY COLONY. ITS APPROXIMATELY 4,600 FELLOWS INCLUDE	
	DISTINGUISHED SCHOLARS, PRACTITIONERS, BUSINESS LEADERS, AND PUBLIC	
2	Did the organization undertake any significant program services during the year which were not listed on	_
	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	-
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 3,001,654. including grants of \$ 330,971.) (Revenue \$)
чa	ACADEMY PROJECTS AND STUDIES - CONSISTS OF STUDIES AND OTHER ACADEMIC	'
	ENDEAVORS FUNDED FROM INTERNAL AND EXTERNAL SOURCES.	
44	(Code:) (Expenses \$ 1,791,624. including grants of \$) (Revenue \$ 77,04	1 、
4b	(Code:) (Expenses \$1, /91, 624. including grants of \$) (Revenue \$1, 04 PROJECT OUTREACH AND EVENTS - INCLUDES CONFERENCES, SYMPOSIA, MEETING	
	AND OTHER ACTIVITIES FOR THE ACADEMY MEMBERSHIP AND OTHER INTERESTED	
	PARTIES ON TOPICS RELATED TO PROJECTS AND OTHER WORK.	
		<u> </u>
4c	(Code:) (Expenses 1,420,495. including grants of \$) (Revenue \$552,41 HOUSE AND CONFERENCE SERVICES - INCLUDES MAINTENANCE OF THE ACADEMY'S	
	MAIN FACILITY AS WELL AS USE OF THE FACILITY FOR FUNCTIONS.)
	MAIN FACILITIE AD WELL AD ODE OF THE FACILITY FOR FORCHORD.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 869,186. including grants of \$) (Revenue \$ 134,538.)	
4e	Total program service expenses ► 7,082,959.	(0010)

rai	t IV Checklist of Required Schedules		
			Yes
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x
_	If "Yes," complete Schedule A	1	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3	
1	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	11c	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d	x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16	
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	
	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	
9	Lighte produzation report more than \$15 you of pross income from daming activities on Part VIII line 9a7 // "Yes."		1

 complete Schedule G, Part III

 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Form 990 (2013)

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Pa	rt IV Checklist of Required Schedules (continued)		
~			Yes
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	x
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		
	Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a	x
b	Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		
	any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	250	
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		
	complete Schedule L, Part II	26	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		
•	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20a	
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		
	contributions? If "Yes," complete Schedule M	30	
31	Did the organization liquidate, terminate, or dissolve and cease operations?		
~~	If "Yes," complete Schedule N, Part I	31	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		
	Part V, line 1	34	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		
~ ~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1	I I

If "Yes," complete Schedule R, Part V, line 2

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Page 4

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Х Form **990** (2013)

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0: if not applicable 1 b Enter the number of Forms W-2G included in line 1a. Enter -0: if not applicable 1 c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e</i> -file (see instructions) 3 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' to line 3b, provide an explanation in Schedule O 3a Did the organization a party to a prohibited tax shelter transaction at any time during the tax year? b 5a Did any taxable party notify the organization file Form 8886-T? 6 Ab any time organization nack envise Size steets that are normally greater than \$100,000, and did the or any contributions that were not tax deductible as charitable contributions? f 'Yes,'' did the organization include wi	table gaming 4 1 4 1 1 4 1 4 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 11 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 11 c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners? 22 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this returm 22 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e- <i>file</i> (see instructions) 32 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b fif "yes," has it filed a Form 990-T for this year? If "No," to <i>line 3b</i> , provide an explanation in Schedule O 3a Did the organization aper year, did the organization have an interest in, or a signature or other auth financial account in a foreign country: > See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounds are state organization have annual gross receipts that are normally greater than \$100,000, and did the organization file Grom 8886-T? 6a Does the organization neave annual gross receipts that are normally greater than \$100,000, and did the organization neceive a payment in excess of \$75 made partly as a contributi	table gaming table gaming 1 4 nority over, a punt)?
 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable1 c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?	table gaming table gaming 1 4 nority over, a punt)?
 c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other auth financial account in a foreign country (such as a bank account, securities account, or other financial accous to regarization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the orany contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization in excess of \$75 made partly as a contributions? b If "Yes," did the organization neceive adplet the donor of the value of the goods or services provided? c Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service b If "Yes," indicate the number of Forms 8282 filed during the year c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract of the organization receive a contribution of qualified intellectual property, did the organizations. Did thu organization receive ad	table gaming 4 nority over, a bunt)?
 (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this returm b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4A At any time during the calendar year, did the organization have an interest in, or a signature or other auth financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial Accors) b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accors b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the or any contributions that were not tax deductible contributions under section 170(c). a Did the organization neceive apyment in excess of \$75 made partly as a contributions? b If "Yes," indicate the number of Forms 8282 filed during the year c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was no to file Form 8282? c Did the organization receive a oxy funds, directly or indirectly, to pay premiums on a personal benefit contract of Did the organization receive	a 4 nority over, a punt)? punts.
 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return	nority over, a pority over, a punt)? punts.
 filed for the calendar year ending with or within the year covered by this returm	nority over, a bunt)? bunts.
 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? <i>If "No," to line 3b, provide an explanation in Schedule O</i> A At any time during the calendar year, did the organization have an interest in, or a signature or other auth financial account in a foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account. b Did any taxable party notify the organization flate transaction at any time during the tax year? Did any taxable party notify the organization file Form 8886-T? Boes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization notify the donor of the value of the goods or services provided? c Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year d If the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 4282? d If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8282.5 d If the organization receiv	nority over, a bunt)? bunts.
 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Jid the organization have unrelated business gross income of \$1,000 or more during the year?	nority over, a bunt)? bunts.
 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other auth financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other auth financial account is respensed by the organization aparty to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactio or fir Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the o any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization notify the door of the value of the goods or services provided? c Did the organization notify the door of the value of the goods or services provide? c Did the organization sel, exchange, or otherwise dispose of tangible personal property for which it was re to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed	nority over, a punt)? punts. n?
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 financial account in a foreign country (such as a bank account, securities account, or other financial accounts in the provided of t	punt)? punts. n?
 b If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accord Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactio of If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Ga Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organy contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization notify the donor of the value of the goods or services provided? c Did the organization notify the donor of the value of the goods or services provided? c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract' filthe organization receive a contribution of qualified intellectual property, did the organization file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year c Did the organization receive a contribution of qualified intellectual property, did the organization file Form h If the organization maintaining donor advised funds. a Did the organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 	punts.
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IO Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	
a Initiation fees and capital contributions included on Part VIII, line 12 10	
	1
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	a
	b
11 Section 501(c)(12) organizations. Enter:	1
a Gross income from members or shareholders	a
b Gross income from other sources (Do not net amounts due or paid to other sources against	
amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1?
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	
I3 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state?	b
Note. See the instructions for additional information the organization must report on Schedule O.	b
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13	b

c Enter the amount of reserves on hand ______ 13c

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

Page 5

Yes

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No

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х Х

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Х Х

Form 990 (2013)

14a

14b

Х

Form 990 (2013)

	MERICAN	ACADEMY	OF	ARTS	AND	SCIENCES
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

If there are material differences in voting rights among members of the governing body, or if the governing

	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	3						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other							
	officer, director, trustee, or key employee?			2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?									
6										
7a										
	more members of the governing body?			7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,									
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	e following:							
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached a	at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	levenue	e Code.)			-				
					Yes	No				
	Did the organization have local chapters, branches, or affiliates?			10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	-								
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ .$			10b	37					
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	re filing the form?	11a	X					
b										
12a										
b										
С										
	in Schedule O how this was done									
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	X					
15	Did the process for determining compensation of the following persons include a review and approv		idependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v					
				15a	X	x				
b	, , , , , , , , , , , , , , , , , , , ,			15b						
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	/ith a	10		x				
	taxable entity during the year?			16a						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in initial tendence and the second se	-	-							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga			401						
500	exempt status with respect to such arrangements?			16b						
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright MA									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	100, 501(c)(3)c only)	availal	ماد					
10	for public inspection. Indicate how you made these available. Check all that apply.			availai	JIE					
	X Own website X Another's website X Upon request Other (explain	n in Sch	nedule ()							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c			nd fina	ncial					
.5	statements available to the public during the tax year.	or mot 1	a interest policy, a		. 10101					
20										
_0	AMERICAN ACADEMY OF ARTS AND SCIENCES - 617-576-50									
	136 IRVING STREET, CAMBRIDGE, MA 02138									
				Forr		(201)				

Yes

X

No

04-2103651 Page 6

13

1a

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation,

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Name and Title Average hours per biols and attractionation to main attractionation body Depotition body Reportable compensation from organization (W-2/1099-MISC) Estimated compensation from the organization (W-2/1099-MISC) (1) LESLIE BERLOWITZ 80.00 X X 555,651. 0. 64,358. (2) LOUIS W. CABOT 1.00 X X 0. 0. 0. (3) JERNOL METRIK X X 0. 0. 0. 0. (3) JERNOL METRIK X X 0. 0. 0. 0. (4) DON M. RANDEL 1.000 X X 0. 0. 0. (5) JERNOL METRIKAL 1.000 X X 0. 0. 0. (6) ALAN M. ACHS 1.000 X X 0. 0. 0. (3) JERNOL METRIKAL 1.000 X X 0. 0. 0. (4) DON M. RANDEL 1.000 X X 0. 0.	(A)	(B)			(0	C)			(D)	(E)	(F)
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FORMER MEMBER X 0. 0. 0.			Х						0.	0.	0.
		1.00							_	_	_
	FORMER MEMBER		X						0.	0.	

AMERICAN ACADEMY OF ARTS AND SCIENCES

04-2103651 Page 8

	ACADEMY	Y (ΟF	AF	S.L.S	5 A	N]	D SCIENCES	04-21	1036	551 Pag	e 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B) (C)							(D)	(E)		(F)	
Name and title	Average	(do	noto	Posi	tion	than c	no	Reportable	Reportable		Estimated	
	hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensatio		amount of	
	week	-	cer ar	id a di	recto	or/trust	ee)	from	from related		other	
	(list any	ector						the	organizations		compensatio	'n
	hours for related	ordi	e			ated		organization	(W-2/1099-MIS	SC)	from the	
	organizations	ustee	trust		e.	suadi		(W-2/1099-MISC)			organizatior and related	
	below	ual tr	ional		ploye	t com /ee	_				organization	
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former				organization	3
(18) GERALD EARLY	1.00		_	0	×		ш.					
FORMER MEMBER		x						0.		0.		0.
(19) EMILIO BIZZI	1.00											
FORMER MEMBER		x						0.		0.		0.
(20) ROBERT P. HENDERSON	1.00											
FORMER TREASURER		Х		Х				0.		0.		0.
(21) MARY BRANDT	50.00											_
DIR. OF EXTERNAL AFFAIRS						Х		212,573.		0.	38,50	2.
(22) MARK ROBINSON	50.00							001 488			24.26	`
CHIEF OPERATING OFFICER	50.00					Х		201,477.		0.	34,36	<u>.</u>
(23) PHYLLIS BENDELL EDITOR	50.00	{				x		134,972.		ο.	35,14	n
(24) JOHN TESSITORE	50.00							154,572.		••	55,14	<u>.</u>
PROGRAM DIRECTOR		1				x		101,057.		ο.	24,33	4.
(25) STEVEN W. DANSBY	50.00											
DIRECTOR OF FINANCE		1				x		135,529.		0.	20,40	7.
												_
1b Sub-total								1,341,259.		0.	217,10	_
c Total from continuation sheets to Part V								0.		0.		0.
d Total (add lines 1b and 1c)								1,341,259.		0.	217,10	<u>4 .</u>
2 Total number of individuals (including but r	not limited to th	lose	liste	ed ab	oove	e) wh	o r	eceived more than \$100	,000 of reportabl	le		0
compensation from the organization											Yes	8 10
3 Did the organization list any former officer.	dive stay as tw									Г	Tes r	10
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3	х
4 For any individual listed on line 1a, is the st	im of reportab	 le co	 omn	 ensa	ntion	 and	ot	her compensation from	the organization			
and related organizations greater than \$15									and organization		4 X	
5 Did any person listed on line 1a receive or									idual for services	···· F		
rendered to the organization? If "Yes," con					-						5	Х
Section B. Independent Contractors												
1 Complete this table for your five highest co		-								npensa	ation from	
the organization. Report compensation for	the calendar y	ear	endi	ng w	/ith	or wi	thir		year.			
(A) (B) (C)												
Name and business address Description of services Compensation												
CHOATE HALL & STEWART LLP 2 INTERNATIONAL PLACE, BOSTON, MA 02110 LEGAL SERVICES 1,207,561.												
Z INTERNATIONAL PLACE, BOSTON, MA 02110 LEGAL SERVICES 1,207,301. FOLEY HOAG LLP												
155 SEAPORT BLVD, BOSTON, MA 02210 LEGAL SERVICES 578,661.												
RESTAURANT ASSOCIATES												
132 WEST 31ST STREET, NET	W YORK,	N	Y 1)01	L	_	CATERING			254,05	7.
ROPES & GRAY LLP												
800 BOYLSTON STREET, BOS	TON, MA	0.	4 L S	19			-	LEGAL SERVIC	5D		234,92	<u>+ •</u>
UNIVERSAL WILDE, INC.												

 26
 DARTMOUTH STREET, WESTWOOD, MA 02090
 PRINTING SERVICES

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

217,768.

Form	n 990 ((2013) AMERI	CAN ACAI	DEMY OF A	RTS AND SC	IENCES	04-2103	651 Page 9
Pa	rt VII	I Statement of Rever	nue					
		Check if Schedule O cont	tains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
Gra	b	Membership dues	1b	1,110,675.				
s, C		Fundraising events						
Gift Iar	d	Related organizations	1d					
ns, imi	е	Government grants (contribut	tions) 1e	5,503.				
er S	f	All other contributions, gifts, gran						
Othe		similar amounts not included abo	ve 1f	6,832,576.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	s 1a-1f: \$					
a C	h	Total. Add lines 1a-1f		►	7,948,754.			
				Business Code				
Program Service Revenue	2 a	NORTON WOODS FEES		900099	552,413.	552,413.		
erv ue	b	SALES PUBLICATION		511120	211,579.	211,579.		
n S /en	С							
grar Rev	d							
roć	е							
<u>а</u>		All other program service reve		-	E (2, 0,00			
		Total. Add lines 2a-2f			763,992.			
	3	Investment income (including			1 000 122			1 000 122
		other similar amounts)			1,098,132.			1,098,132.
	4	Income from investment of ta						
	5	Royalties						
	<u> </u>	Overe verte	(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		I Net rental income or (loss) Gross amount from sales of	(i) Securities					
	<i>i</i> a		12,625,888	(ii) Other				
	h	assets other than inventory Less: cost or other basis		•				
	5	and sales expenses	11,328,662					
	~	Gain or (loss)						
		Net gain or (loss)		-	1,297,226.			1,297,226.
		Gross income from fundraisin			, , -			, , -
nue	0 4	including \$						
eve		contributions reported on line						
r B		Part IV, line 18	-					
Other Revenue	b	Less: direct expenses						
0		Net income or (loss) from fund						
		Gross income from gaming ad						
		Part IV, line 19	a					
	b	Less: direct expenses						
	с	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less: cost of goods sold	b					
	с	Net income or (loss) from sale	es of inventory	▶				
		Miscellaneous Revenu	le	Business Code				
	11 a							
	b							
	с							
		All other revenue						
	е	Total. Add lines 11a-11d		►				
	12	Total revenue See instructions			11 108 104.	763 992.	0.	2 395 358.

Form 990 (
Part IX	Statemen								
0									

AMERICAN ACADEMY OF ARTS AND SCIENCES nt of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

0000		,	0		X
	Check if Schedule O contains a respor			(0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	188,763.	188,763.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	142,208.	142,208.		
3	Grants and other assistance to governments,				
3	-				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	693,828.	346,914.	277,531.	69,383.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,674,665.	1,873,211.	238,801.	562,653.
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)	210,425.	104,050.	43,903.	62,472.
~		178,973.	171,482.	2,011.	5,480.
9	Other employee benefits	208,843.	128,800.	36,972.	43,071.
10	Payroll taxes	200,043.	120,000.	30,972.	43,071.
11	Fees for services (non-employees):				
а	Management				
b	Legal	2,670,884.	364.	2,669,685.	835.
с	Accounting	48,722.		48,722.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	56,379.	56,379.		
a	Other. (If line 11g amount exceeds 10% of line 25,	,	,		
9	column (A) amount, list line 11g expenses on Sch 0.)	1,597,952.	1,435,489.	118,327.	44,136.
40		1,357,7552.	1,133,1050	110/02/1	11,1300
12	Advertising and promotion	637,180.	471,920.	79,324.	85,936.
13	Office expenses	163,147.		3,645.	5,500.
14	Information technology	103,147.	154,002.	5,045.	5,500.
15	Royalties	126 042	100 (10	F (05	
16	Occupancy	136,243.	128,618.	7,625.	
17	Travel	393,838.	336,066.	12,315.	45,457.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	668,145.	640,179.	13,242.	14,724.
20	Interest	61,763.	61,763.		
21	Payments to affiliates	-	-		
22	Depreciation, depletion, and amortization	635,462.	635,462.		
23		76,737.	17,310.	59,427.	
23 24	Other expenses, Itemize expenses not covered		_ / • _ • ·		
24	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.) ´ FEES AND HONORARIA	140,700.	140,700.		
а		92,668.		20 470	15 176
b	OTHER		49,013.	28,479.	15,176.
С	PROMOTION	266.	266.		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	11,677,791.	7,082,959.	3,640,009.	954,823.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

33

34

							0100651
Form Pai	990 (; † X	2013) AMERICAN ACADE	MY OF ARTS AN	D SC	TENCES	04-	2103651 Page 11
. a		Check if Schedule O contains a response or not	e to any line in this Part X				
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			452,061.	1	199,794.
	2	Savings and temporary cash investments			12,327,920.	2	14,199,025.
	3		773,092.	3	1,072,423.		
	4	Pledges and grants receivable, net Accounts receivable, net			29,185.	4	108,163.
	5	Loans and other receivables from current and fo			- ,	-	
	-	trustees, key employees, and highest compensation					
						5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect		-			
ts		employees' beneficiary organizations (see instr).	Complete Part II of Sch L			6	
Assets	7	Notes and loans receivable, net		Г		7	
Ä	8	Inventories for sale or use		Г	13,048.	8	8,335.
	9	Prepaid expenses and deferred charges			50,252.	9	41,500.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a 15,670,2	07.			
	b	Less: accumulated depreciation	10b 6,297,9	60.	9,833,539.	10c	9,372,247.
	11	Investments - publicly traded securities			27,878,057.	11	38,203,920.
	12	Investments - other securities. See Part IV, line 1		11,900,328.	12	1,266,670.	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		7,825,036.	15	8,585,220.	
	16	Total assets. Add lines 1 through 15 (must equa			71,082,518.	16	73,057,297.
	17	Accounts payable and accrued expenses		989,035.	17	1,126,855.	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21 22	Escrow or custodial account liability. Complete F Loans and other payables to current and former		L		21	
lities	22	key employees, highest compensated employee					
Liabil						22	
Ľ	23	Secured mortgages and notes payable to unrela			3,145,653.	23	3,059,822.
	24	Unsecured notes and loans payable to unrelated				24	· · · ·
	25	Other liabilities (including federal income tax, pay		····· -			
		parties, and other liabilities not included on lines	17-24). Complete Part X o	of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			4,134,688.	26	4,186,677.
		Organizations that follow SFAS 117 (ASC 958		and			
Sec		complete lines 27 through 29, and lines 33 an			24 002 700		
and	27	Unrestricted net assets			24,803,799.	27	25,027,435.
Net Assets or Fund Balances	28			Г	13,961,431. 28,182,600.	28	12,842,669. 31,000,516.
pun	29	•	SC 059) abaak bara 🔊		20,102,000.	29	51,000,510.
ŗ		Organizations that do not follow SFAS 117 (As	зо эзој, спеск nere 🕨 🗆				
ts c	30	and complete lines 30 through 34. Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or eq				31	
∍t A	32	Retained earnings, endowment, accumulated in		Г		32	
Ne	22	Retained earnings, endowment, accumulated income, or other funds			66 947 830.	22	68 870 620

Total net assets or fund balances

Total liabilities and net assets/fund balances

33

34

68,870,620. 73,057,297.

Form **990** (2013)

66,947,830. 71,082,518.

Form	AMERICAN ACADEMY OF ARTS AND SCIENCES	04	-21036	51	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,1			
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,0			
3	Revenue less expenses. Subtract line 2 from line 1	3		569		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66,9			
5	Net unrealized gains (losses) on investments	5	2,3	333	, 89	90.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-	158	,58	87.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	68,8	<u>370</u>	<u>, 61</u>	20.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_	<u> </u>	/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	в,			
	consolidated basis, or both:					
	Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	x	

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

3b

3a

Form 990 (2013)

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LHA
For

Total			
LHA For Paperwork Re	duction Act Notice	, see the Instructions fo	or
Form 990 or 990-EZ.			

SCHED

Department of ection Name of th ion number 651 Part I The organiz 1 2 3 4 's name. 5 6 cribed in 7 8 ceipts from investment 30, 1975. 10 11 of one or that a 📖 Type I **b** U Type II **c** Type III - Functionally integrated d Type III - Non-functionally integrated <u>م</u> By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No (i) the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (ii) EIN (iii) Type of organization (vii) Amount of monetary (i) Name of supported organization in col. organization in col. in col. (i) listed in your organization (described on lines 1-9 support (i) organized in the aoverning document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes No Yes No Yes No

(Form 990

Internal Revenu

1545-0047

o Public

ULE A) or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section	ОМВ №.
the Treasury ue Service	4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <i>www.irs.gov/fc</i>	Open to Inspe
ne organizatio		Employer identificati
-	AMERICAN ACADEMY OF ARTS AND SCIENCES	04-2103
Reason f	or Public Charity Status (All organizations must complete this part.) See instruction	
zation is not a	private foundation because it is: (For lines 1 through 11, check only one box.)	
A church, cor	ivention of churches, or association of churches described in section 170(b)(1)(A)(i).	
A school desc	ribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)	
A hospital or a	a cooperative hospital service organization described in section 170(b)(1)(A)(iii).	
A medical res	earch organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital
city, and state	2	
An organizatio	on operated for the benefit of a college or university owned or operated by a governmental u	unit described in
section 170(b)(1)(A)(iv). (Complete Part II.)	
A federal, stat	e, or local government or governmental unit described in section 170(b)(1)(A)(v).	
An organizatio	on that normally receives a substantial part of its support from a governmental unit or from t	he general public desc
section 170(b	b)(1)(A)(vi). (Complete Part II.)	
A community	trust described in section 170(b)(1)(A)(vi). (Complete Part II.)	
An organizatio	on that normally receives: (1) more than 33 1/3% of its support from contributions, members	ship fees, and gross rea
activities relat	ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of	its support from gross
income and u	nrelated business taxable income (less section 511 tax) from businesses acquired by the o	rganization after June 3
See section §	509(a)(2). (Complete Part III.)	
An organizatio	on organized and operated exclusively to test for public safety. See section 509(a)(4).	
An organizatio	on organized and operated exclusively for the benefit of, to perform the functions of, or to c	arry out the purposes o
more publicly	supported organizations described in section 509(a)(1) or section 509(a)(2). See section 50	/9(a)(3). Check the box
describes the	type of supporting organization and complete lines 11e through 11h.	

Schedule A (Form 990 or 990-EZ) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	7,260,304.	7,663,277.	5,916,042.	9,600,193.	7,948,754.	38,388,570.
2	Tax revenues levied for the organ-	,,200,0011	.,,	•,•=•,•==•	2,000,220.	.,	
2	ization's benefit and either paid to						
	or expended on its behalf						
2							
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	7,260,304.	7,663,277.	5 916 042	9 600 102	7 949 754	20 200 570
	Total. Add lines 1 through 3	7,200,304.	7,003,277.	5,916,042.	9,600,193.	7,948,754.	38,388,570.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						8,774,985.
	Public support. Subtract line 5 from line 4.						29,613,585.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	7,260,304.	7,663,277.	5,916,042.	9,600,193.	7,948,754.	38,388,570.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,140,381.	1,222,344.	1,169,827.	931,629.	1,098,132.	5,562,313.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						43,950,883.
	Gross receipts from related activities,	etc. (see instructio	ons)			12 3	,985,715.
	First five years. If the Form 990 is for	•	,	fourth or fifth ta	ax vear as a sectio		
	organization, check this box and stop	-			-		
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2013 (I			olumn (f))		14	67.38 %
	Public support percentage from 2012					15	66.82 %
	33 1/3% support test - 2013. If the c						
	stop here. The organization qualifies						
h	33 1/3% support test - 2012. If the c						
Ň	and stop here. The organization qual						
17~	10% -facts-and-circumstances tes						
110							
	and if the organization meets the "fac						
1-	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets th						
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	i, 16b, 17a, or 17b	o, check this box a	nd see instruction	s ►

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

See	ction A. Public Support				-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		ļ				
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5		1				
	Amounts included on lines 1, 2, and		1				
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support		1	•		•	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization'	s first, second. thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organ	ization,
	check this box and stop here	•			•		·
Se	ction C. Computation of Publi						·
_	Public support percentage for 2013 (li		v	column (f))		15	%
	Public support percentage from 2012					16	%
	ction D. Computation of Inves						/0
	Investment income percentage for 20		v			17	%
	Investment income percentage from 2					18	%
	133 1/3% support tests - 2013. If the						
150	more than 33 1/3%, check this box ar						
F	33 1/3% support tests - 2012. If the						
Ľ	line 18 is not more than 33 1/3%, che						
20							
20	Private foundation. If the organization	T GIG HOL CHECK a		a, or iou, check l	and buy and see in	30000000	····· 🔽 🖂

Part IV	Supplemental Information. Provide the explanations required by
	Also complete this part for any additional information. (See instructions)

(Form	990)
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Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

3 **Open to Public** Inspection

OMB No. 1545-0047

ganization							-
	AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCES	

Employer identification number 04-2103651

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accou	Ints. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.		
		(a) Donor advised funds	(b) Fur	ids and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	
•	are the organization's property, subject to the organization's	-		Yes No
6	Did the organization inform all grantees, donors, and donor a			
Ŭ	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?		•	
Pa				
1			art iv, inte 7	
•	Purpose(s) of conservation easements held by the organizati		orically imp	ortant land area
	Protection of natural habitat	Preservation of a certif		
	Preservation of open space		ieu nistoric	Structure
0		ind concernation contribution in the form o	f a aanaan	ation accoment on the last
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form o	a conserv	ation easement on the last
	day of the tax year.			Hold at the Fod of the Tay Veer
	-			Held at the End of the Tax Year
a	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
c	Number of conservation easements on a certified historic str			
d	Number of conservation easements included in (c) acquired a			
-	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organizatio	n during the tax
	year ►	_		
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements in			
6	Staff and volunteer hours devoted to monitoring, inspecting,			
7	Amount of expenses incurred in monitoring, inspecting, and			\$
8	Does each conservation easement reported on line 2(d) above	• • •		
	and section 170(h)(4)(B)(ii)?			Yes 📖 No
9	In Part XIII, describe how the organization reports conservati	-		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes th	he organiza	tion's accounting for
	conservation easements.			
Pa	t III Organizations Maintaining Collections of		ner Simi	ar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statem	ent and bal	ance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheran	ice of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balanc	e sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pub	lic service,	provide the following amounts
	relating to these items:			
	(i) Revenues included in Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical treater	asures, or other similar assets for financial	gain, provid	le
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Revenues included in Form 990, Part VIII, line 1		►	\$
h	Assets included in Form 990 Part X			\$

Sche	dule D	(Form 990) 2013	AMERICAN	N ACADEMY	OF A	RTS 2	AND	SCIEN	ICES		04-21	L0365	1 _P	age 2
Pai	t III	Organizations M	laintaining C	ollections of A	rt, His	torical	Trea	isures, o	r Oth	er Sin	nilar Asse	ets(contii	nued)	
3	Using	the organization's acqu	uisition, accessio	on, and other record	ds, chec	k any of	the fol	lowing that	are a s	significa	nt use of its	collectio	n item	s
	(chec	k all that apply):												
а	X	Public exhibition		d	IX	Loan or o	excha	nge progra	ms					
b		Scholarly research		e		Other								
С	X	Preservation for future	generations											
4	Provi	de a description of the c	organization's co	llections and explai	n how t	hey furth	er the	organizatio	on's exe	empt pu	rpose in Pa	rt XIII.		
5	Durin	g the year, did the orgai	nization solicit or	receive donations	of art, h	istorical t	reasu	res, or othe	er simila	r assets	3 _	_		-
		sold to raise funds rath										Yes		No
Pai	t IV	Escrow and Cus reported an amount o			ete if the	e organiz:	ation a	answered "`	Yes" to	Form 9	90, Part IV,	line 9, or		
1a	Is the	organization an agent,	trustee, custodia	an or other intermed	diary for	⁻ contribu	tions o	or other ass	sets not	t includ	ed			
		orm 990, Part X?										Yes		No
b		s," explain the arrangen												
												Amoun	t	
с	Begin	ning balance								10	;			
		ions during the year \dots									ł			
		butions during the year)			
f	Endin	ig balance								11				<u> </u>
		ne organization include a									L	Yes		No
_		s," explain the arrangen												
Pai	t V	Endowment Fun	ds. Complete if	the organization ar	nswered	l "Yes" to								
				(a) Current year		Prior year	-	c) Two years		. ,	e years back	- · ·		
1a		ning of year balance		34,479,274.		L,511,69	_	34,682			,020,760		,459,	
b	Contr	ibutions		2,139,000.		3,215,00			,000.		,590,000	_	532,	
С	Net ir	nvestment earnings, gair	ns, and losses	3,230,262.	1	L,820,78	39.	-1,147	,091.	3	,315,759	. 9	,012,	161.
d	Grant	s or scholarships	····· [
е		r expenditures for faciliti												
		programs		1,672,379.	2	2,068,20)8.	2,173	,580.	2	,244,155	. 1	,915,	895.
f	Admi	nistrative expenses	····· [
g			L	38,176,157.		1,479,2		31,511	,693.	34	,682,364	. 31	,020,	760.
2		de the estimated percer	-		ce (line ⁻	1g, colum	n (a)) I	held as:						
а		d designated or quasi-er		12.65	_%									
b		anent endowment 🕨 _	73.44	<u>%</u>										
С		orarily restricted endow												
		ercentages in lines 2a, 2												
3a	Are th	nere endowment funds i	not in the posses	ssion of the organiz	ation th	at are he	d and	administer	red for t	the orga	nization			
	by:												Yes	No
		nrelated organizations										. 3a(i)	X	X
		elated organizations												
b		s" to 3a(ii), are the relate										3b		
4 Da	t VI	ribe in Part XIII the inten Land, Buildings,		<u>u</u>	owment	tunas.								
Fai						/ line 11/		Form 000	Davit V	line 10				
		Complete if the organi										(-1) D		
		Description of prop	eπy	(a) Cost or o basis (investr		1	ost or sis (ot	other her)	• •	ccumul preciati		(d) Boo	k value	e
1a	Land													
b		ings				13,	442	,814.	4,	503,	636.	8,93	9,1	78.
с	Lease	ehold improvements										• -		
d	Equip	oment				2,	227	,393.	1,	794,	324.	43	3,0	69.
	Other													
Tota	. Add	lines 1a through 1e. (Co	olumn (d) must eo	qual Form 990, Part	X, colu	mn (B), lir	ne 10(c).)			🕨 🗌	9,37	2,2	<u>47.</u>
											Schedul	e D (Forn	n 990)	2013

	nvestments - Other Securities.				
	Complete if the organization answered "Yes" In of security or category (including name of security)	to Form 990, Part IV, (b) Book value			nd-of-year market value
	derivatives				
	eld equity interests				
Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	must equal Form 990, Part X, col. (B) line 12.) 🕨				
art VIII	nvestments - Program Related.				
	Complete if the organization answered "Yes"				
	(a) Description of investment	(b) Book value	(c) Method of	f valuation: Cost or er	nd-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	must equal Form 990, Part X, col. (B) line 13.) ► Other Assets.				
	Complete if the organization answered "Yes"	to Form 000 Dort IV	line 11d See Form 000	Dort V line 15	
<u> </u>		Description	, line 110. See Form 990	J, Part A, line 15.	(b) Book value
(1) PRE	PAID LAND LEASE	Bocomption			512,45
	FROM AFFILIATE				5,054,61
(-)		RPETUAL TRI	UST		2,964,51
(-)	ER ASSETS				53,62
(5)					
(6)					
(7)					
(8)					
(9)					
tal. (Colum	n (b) must equal Form 990, Part X, col. (B) line	e 15.)			8,585,22
Part X 0	Other Liabilities.				
C	Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11e or 11f. See Fo	rm 990, Part X, line 2	5.
	(a) Description of liability		(b) Book value		
(1) Federa	al income taxes				
(2)					
(3)				_	
(4)					
(5)				_	
(6)				_	
. ,				_	
(7)					
(7) (8)				_	
(7) (8) (9)				_	
(7) (8) (9) otal. (Column	n (b) must equal Form 990, Part X, col. (B) line				
(7) (8) (9) tal. (Columi Liability fo	n (b) must equal Form 990, Part X, col. (B) line or uncertain tax positions. In Part XIII, provide on's liability for uncertain tax positions under	the text of the footn			

AMERICAN ACADEMY OF ARTS AND SCIENCES

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Schedule D (Form 990) 2013

Sche	edule D (Form 990) 2013 AMERICAN ACADEMY OF ART	S AND SCIENCES	04-2103651 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue pe	er Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	-	per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	· · · · · · · · · · · · · · · · · · ·		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)	5
Pa	rt XIII Supplemental Information.		

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

PART III, LINE 1A:

EXPLANATION: THE ACADEMY DOES NOT CAPITALIZE COLLECTIONS, WHICH HAVE BEEN

ACQUIRED THROUGH DONATION.

PART III, LINE 4:

EXPLANATION:	THE	AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCE	COLLECTION	\mathbf{OF}	WORKS
--------------	-----	----------	---------	----	------	-----	---------	------------	---------------	-------

OF ART, HISTORICAL DOCUMENTS AND OBJECTS CHRONICLE THE ACADEMY'S HISTORY,

MEMBERSHIP, PROGRAMS AND PUBLICATIONS FOR MORE THAN 200 YEARS. THE

COLLECTION INCLUDES PUBLICATIONS, WORKS OF ART, SCIENTIFIC INSTRUMENTS AND

MANUSCRIPTS DATING FROM THE EARLIEST YEARS OF OUR HISTORY.

 Schedule D (Form 990) 2013
 AMERICAN ACADEMY OF ARTS AND SCIENCES
 04-2103651 Page 5

 Part XIII
 Supplemental Information (continued)
 EXPLANATION: ACADEMY-DESIGNATED ENDOWMENTS HAVE NO EXTERNAL RESTRICTIONS

 BUT HAVE DESIGNATED LIMITATIONS INITIATED BY THE ACADEMY. THESE
 LIMITATIONS MAY BE CANCELED AT THE DIRECTION OF THE BOARD. THESE

 ENDOWMENTS INCLUDE, AMONG OTHER THINGS, "FUND FOR MAJOR REPAIRS" WHICH IS

 AN ACADEMY-DESIGNATED RESERVE FUND FOR MAJOR PROPERTY AND EQUIPMENT

 ADDITIONS AND REPAIRS.

TEMPORARILY RESTRICTED ENDOWMENTS REPRESENT AMOUNTS RECEIVED OR COMMITTED WITH DONOR RESTRICTIONS, WHICH HAVE NOT YET BEEN EXPENDED FOR THEIR DESIGNATED PURPOSE. TEMPORARILY RESTRICTED ENDOWMENTS ALSO INCLUDE A BUILDING FUND AND THE APPRECIATION ON CERTAIN PERMANENTLY RESTRICTED ENDOWMENTS.

PERMANENTLY RESTRICTED ENDOWMENTS ARE RESTRICTED AGAINST ANY EXPENDITURES OF PRINCIPAL. INCOME EARNED ON PRINCIPAL WILL BE USED FOR CERTAIN SPECIFIC PURPOSES, IF RESTRICTIONS APPLY. OTHERWISE THE INCOME EARNED ON PRINCIPAL MAY BE USED FOR GENERAL PURPOSES.

THE ENDOWMENT FUNDS ARE USED TO GENERATE INCOME, BASED ON AN APPROVED SPENDING POLICY OF THE BOARD, TO SUPPORT PROGRAM AND ADMINISTRATIVE ACTIVITIES OF THE ACADEMY.

PART X, LINE 2:

EXPLANATION: "THE ACADEMY ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH ASC TOPIC, INCOME TAXES. THIS STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE CONSOLIDATED FINANCIAL STATEMENT REGARDING A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 5								
Part XIII Supplemental Information (continued)								
RETURN. THE ACADEMY HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX								
POSITIONS WHICH QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE								
CONSOLIDATED FINANCIAL STATEMENTS AT MARCH 31, 2014 AND 2013. THE								
ACADEMY'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY THE FEDERAL								
AND STATE JURISDICTIONS AND GENERALLY REMAIN OPEN FOR THE MOST RECENT								
THREE YEARS."								

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go Comp	Grants and Oth vernments, an lete if the organizatio	nd Individual n answered "Yes" Attach to Form	l s in the Ŭn i ' to Form 990, Pa m 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047 2013 Open to Public Inspection
Name of the organization	Informat	ion about Schedule I	(Form 990) and its	s instructions is a	t www.irs.gov/form99	0	Employer identification number
Name of the organization AMERICAN .	ACADEMY C	F ARTS AND	SCIENCES				04-2103651
Part I General Information on Grants a	nd Assistance					•	
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro- 	stance?						tion X Yes No
Part II Grants and Other Assistance to	Governments an	d Organizations in the	e United States. C	complete if the org	anization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than	5,000. Part II car	be duplicated if addit	ional space is need	ded.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITY							
HOLYOKE CENTER, SUITE 600, 1350							REIMBURSEMENT FOR COSTS
MASSACHUSETTS AVENUE - CAMBRIDGE,							RELATED TO INDEPENDENT
MA 02138	04-2103580	501(C)(3)	48,247.	0.			STUDY
PENNSYLVANIA STATE UNIVERSITY							
DEPARTMENT OF HISTORY, 108 WEAVER							REIMBURSEMENT FOR COSTS
BUILDING - UNIVERSITY PARK, PA	04 6000000	501 (2) (2)	48.885				RELATED TO INDEPENDENT
16802-5500	24-6000376	501(C)(3)	47,775.	0.			STUDY
SYRACUSE UNIVERSITY THE MAXWELL SCHOOL, 200 EGGERS HALI SYRACUSE, NY 13244	15-0532081	501(C)(3)	52,133.	0.			REIMBURSEMENT FOR COSTS RELATED TO INDEPENDENT STUDY
UNIVERSITY OF TEXAS							REIMBURSEMENT FOR COSTS
2100 COMAL STREET							RELATED TO INDEPENDENT
AUSTIN, TX 78712	74-6000203	501(C)(3)	40,608.	0.			STUDY
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organizations 			e line 1 table				<u>4.</u>
							_

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

Schedule I (Form 990) (2013)

AMERICAN ACADEMY OF ARTS AND SCIENCES

04-2103651

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INDEPENDENT STUDY GRANTS	8	142,208.	. 0.		

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

PART I, LINE 2:

EXPLANATION: THE ACADEMY OF ARTS AND SCIENCES VISITING SCHOLAR PROGRAM

PROVIDES RESIDENTIAL FELLOWSHIPS FOR JUNIOR FACULTY MEMBERS AND

POSTDOCTORAL SCHOLARS IN THE HUMANITIES AND SOCIAL SCIENCES. HOUSED AT THE

HEADQUARTERS OF THE ACADEMY, VISITING SCHOLARS PARTICIPATE IN

ACADEMY-SPONSORED CONFERENCES, SEMINARS, AND INFORMAL GATHERING WHILE

ADVANCING THEIR SCHOLARLY RESEARCH.

SC	HEDULE J	Compensation Information	I	OMB No.	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	13	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	IU	,
	tment of the Treasury	Attach to Form 990. See separate instructions.		Open to		ic
	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www irs gov/for		Inspe		
Nam	e of the organizatio		Employer id			mber
Do		AMERICAN ACADEMY OF ARTS AND SCIENCES s Regarding Compensation	04-2	10365	1	
Га	rt I Question	s Regarding Compensation			Vee	
10	Check the appropr	ate box(es) if the organization provided any of the following to or for a person listed in Form	990		Yes	No
ia		line 1a. Complete Part III to provide any relevant information regarding these items.	550,			
	X First-class or c		naluse			
	Travel for com					
		ation and gross-up payments I Health or social club dues or initiation fees				
		spending account Personal services (e.g., maid, chauffeur, c				
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b	Х	
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked in line 1a?		2	Х	
3		ny, of the following the filing organization used to establish the compensation of the organiza				
		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
		ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation					
		compensation consultant Compensation survey or study				
	X Form 990 of o	ther organizations Approval by the board or compensation c	ommittee			
4	During the year did	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				
4	organization or a re					
а	•	e payment or change-of-control payment?		4a		х
b		ceive payment from, a supplemental nonqualified retirement plan?		···		X
c		ceive payment from, an equity-based compensation arrangement?				X
-		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	, ,					
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed i	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	evenues of:				
а	The organization?			5a		X
b	Any related organiz	ation?		5 b		X
	If "Yes" to line 5a o	r 5b, describe in Part III.				
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	-				37
а	The organization?			<u>6a</u>		X
b		ation?		6b		X
_		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		-		v
•		es 5 and 6? If "Yes," describe in Part III		7		X
8		reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				x
0		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		
9	Regulations section	d the organization also follow the rebuttable presumption procedure described in		9		
ΙЦΛ		n 53.4958-6(c)? eduction Act Notice, see the Instructions for Form 990.		9 Ile J (Forr	n 000	2012
∟ПА		eduction Act Notice, see the instructions for Form 330.	Schedu	ne o (rorr	11 220	2013

Schedule J (Form 990) 2013

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of	N-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	in prior Form 990
(1) LESLIE BERLOWITZ	(i)	273,000.	0.	282,651.	52,607.	11,751.	620,009.	129,120.
FORMER PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.		0.
(2) MARY BRANDT	(i)	212,573.	0.	0.	32,051.	6,451.	251,075.	0.
DIR. OF EXTERNAL AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARK ROBINSON	(i)	201,477.	0.	0.	21,000.	13,363.	235,840.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.		0.
(4) PHYLLIS BENDELL	(i)	134,972.	Ο.	Ο.	21,525.	13,615.	170,112.	0.
EDITOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STEVEN W. DANSBY	(i)	135,529.	Ο.	Ο.	13,736.	6,671.	155,936.	0.
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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Part III Supplemental Information

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

PART I, LINE 1A:

EXPLANATION: DURING FISCAL YEAR 2014, THERE WERE ROUND TRIP TICKETS

PURCHASED THAT WERE EITHER FIRST CLASS OR UPGRADED TO FIRST CLASS DURING

THE YEAR. THE TRAVEL WAS FOR THE BOARD CHAIR, LOUIS CABOT. FIRST CLASS

TRAVEL IS ALLOWED UNDER THE POLICIES OF THE ACADEMY FOR CERTAIN OFFICERS IN

CERTAIN SITUATIONS. ALL FIRST CLASS TRAVEL FOR FISCAL YEAR 2014 MET THE

POLICY GUIDELINES.

DURING FISCAL YEAR 2014, THE ACADEMY HAD A MEMBERSHIP IN THE CEO'S NAME AT

THE CENTURY CLUB IN NEW YORK. THE CLUB WAS USED EXCLUSIVELY FOR ACADEMY

RELATED FUNCTIONS.

(Form 990) Complete if the organization answere explanations, and	n 990) ment of the Treasury I Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990. See separate instructions. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990										
Name of the organization AMERICAN ACADEMY OF ARTS AND S	SCIENCES							identif 103		n nun	nber
Part I Bond Issues SEE PART VI FOR COLUM	INS (A) AN	D (F)	CONTI	NUATIONS							
(a) Issuer name (b) Issuer EIN (c) CUSIP #	(d) Date issued	d) Date issued (e) Issue price (f) Description of p			on of purpose	n of purpose (g) Defe			behalf suer	(i) Po finar	
						Vee	Na				
MASSACHUSETTS HEALTH AND				REFINANC	F. OF	Yes	No	Yes	No	Yes	INO
A EDUCATIONAL FACILITIES 04-245601157586ELD1	08/01/09	3 374					x		Х	х	
		5,574	, 414.		11110 17111		- 23				
В											
c											
D											
Part II Proceeds	•			•			1				
	A			В	С				D		
1 Amount of bonds retired	8	5,831.									
2 Amount of bonds legally defeased											
3 Total proceeds of issue											
4 Gross proceeds in reserve funds		8,852.									
5 Capitalized interest from proceeds											
6 Proceeds in refunding escrows											
7 Issuance costs from proceeds											
8 Credit enhancement from proceeds											
9 Working capital expenditures from proceeds											
10 Capital expenditures from proceeds											
11 Other spent proceeds											
12 Other unspent proceeds											
13 Year of substantial completion	2	009									
	Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a current refunding issue?	Х										
15 Were the bonds issued as part of an advance refunding issue?		Х									
16 Has the final allocation of proceeds been made?	Х										
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X										
Part III Private Business Use											
	A			В	Ç				D		
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No		Yes		No	
which owned property financed by tax-exempt bonds?		X									
2 Are there any lease arrangements that may result in private business use of											
bond-financed property?		Х									

³³²¹²¹ 10-09-13 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule K (Form 990) 2013

AMERICAN ACADEMY OF ARTS AND SCIENCES

04-2103651

Page 2

Part III Private Business Use (Continued)								
		Ą		В		C		D
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
business use of bond-financed property?		Х						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by		•				•		•
entities other than a section 501(c)(3) organization or a state or local government	3	5.00 %		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5	3.	5.00 %		%		%		%
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed				1				
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1.141-12 and 1.145-2?	Х							
Part IV Arbitrage			•					
		4		В		C		D
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?				1				
a Rebate not due yet?	Х							
b Exception to rebate?		X						
c No rebate due?		X						
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate				1				
computation was performed								
3 Is the bond issue a variable rate issue?	Х							
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?		x						
b Name of provider		1		1				1
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Schedule K (Form 990) 2013

AMERICAN ACADEMY OF ARTS AND SCIENCES

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Part IV Arbitrage (Continued)								
	A		E	3	0	;	[)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of section 148?		х						
Part V Procedures To Undertake Corrective Action								
	A	1	E	3	0	;	C)
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								
regulations?		Х						
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	e K (see instr	uctions).					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: MASSACHUSETTS HEALTH AND EDUCAT	IONAL F	FACILIT	IES AU	THORITY				
(F) DESCRIPTION OF PURPOSE:								
REFINANCE OF PRE-EXISTING TAX EXEMPT DISTRIBUTIO	N							

SCHEDULE L	
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(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Open To Public Inspection

OMB No. 1545-0047

Department of the freasury
Internal Revenue Service

Att	ach	to	F	or	m 9	90 or	Form	99	0-EZ.	See	e se	epara	ite i	instructions.

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

.

Name of th	e organization							Employer identification number
		AMERICAN						04-2103651
Part I	Excess Be	enefit Transact	ions (section 5	601(c)((3) and sec	tion 501	(c)(4) organizations only).	

Complete if the organization answered "Yes" on Form 990. Part IV. line 25a or 25b, or Form 990-EZ. Part V. line 40b.

	in answered	103 011101111000,1	art iv,	1110 204 01 20	55, 61 1 0111 550 EZ, 1 art V	, 1110 400.			
1 (a) Name of disqualified person	1	b) Relationship between disqualified				ion of transaction			
(a) Name of disqualmed person	perso	person and organization			(c) Description of transact	UT	Yes	No	
LESLIE BERLOWITZ	FORMER	PRESIDENT	& C	EXCESS	COMPENSATION	PAID	IN		Х
2 Enter the amount of tax incurred by	y the organiza	ation managers or dis	squalifi	ed persons d	uring the year under				
section 4958						▶ \$		26,	934.

3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	▶ \$	S	0.
---	---	------	---	----

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or n the zation?	(e) Original principal amount	(f) Balance due	(g) defa	In ault?	(h) Ap by bo comm	proved ard or hittee?	(i) W agreei	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
Total					> \$							

Part III

Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990 or 990-EZ) 2013

SEE	PART	V	FOR	CONTINUATIONS
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Schedule L (Form 990 or 990 EZ) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 2 Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART I, EXCESS BENEFIT TRANSACTIONS:

(A) NAME OF PERSON: LESLIE BERLOWITZ

(B) RELATIONSHIP WITH DISQUALIFIED PERSON: FORMER PRESIDENT & CEO

(RESIGNED ON 7/31/13)

(C) DESCRIPTION OF TRANSACTION: EXCESS COMPENSATION PAID IN 2013. SEE

NARRATIVE EXPLANATION BELOW.

SCHEDULE L, PART I, LINE 1

LESLIE C. BERLOWITZ RESIGNED FROM HER POSITION AS PRESIDENT OF THE

ACADEMY ON JULY 31, 2013. AS PART OF A NEGOTIATED SETTLEMENT FOR HER

RESIGNATION AND SURRENDER OF CLAIMS, SHE RECEIVED A PAYMENT OF ACCRUED

SALARY, DEFERRED COMPENSATION, UNUSED VACATION DAYS, AND HEALTH

INSURANCE PREMIUMS. PAYMENTS RELATED TO DEFERRED COMPENSATION AND

UNUSED VACATION DAYS THAT ACCRUED IN PRIOR YEARS WERE NOT FACTORED INTO

THE CALCULATION OF EXCESS COMPENSATION FOR 2013. OF THE AMOUNT PAID IN

2013, WE ESTIMATE THAT \$107,737 WAS EXCESS COMPENSATION.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

plete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN ACADEMY OF ARTS AND SCIENCES

rm990 Inspection Employer identification number 04-2103651

OMB No. 1545-0047

Open to Public

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

MULTIDISCIPLINARY STUDIES OF COMPLEX AND EMERGING PROBLEMS. CURRENT

ACADEMY RESEARCH FOCUSES ON SCIENCE AND GLOBAL SECURITY, SOCIAL POLICY,

THE HUMANITIES AND CULTURE, AND EDUCATION.

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

OFFICIALS. THE PRINCIPAL ACTIVITY OF THE ACADEMY IS TO SPONSOR

INTERDISCIPLINARY STUDIES ON TOPICS IN THE PUBLIC INTEREST. REPORTS OF

SUCH PROJECTS APPEAR IN THE ACADEMY'S QUARTERLY JOURNAL, "DAEDALUS",

AND IN OTHER PUBLICATIONS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PROJECT PUBLICATIONS AND COMMUNICATIONS - COMPRISES THE PUBLISHING OF THE QUARTERLY JOURNAL, "DAEDALUS", THE QUARTERLY MAGAZINE, "BULLETIN", BOOKS AND OTHER OCCASIONAL PAPERS RELATED TO THE PROJECTS, STUDIES AND OTHER WORK OF THE ACADEMY. ACADEMY PUBLICATIONS EFFORTS ALSO INCLUDE COMMUNICATION ACTIVITIES TO THE ACADEMY MEMBERS, PUBLIC OFFICIALS AND OTHER INTERESTED PARTIES.

EXPENSES \$ 869,186. INCLUDING GRANTS OF \$ 0. REVENUE \$ 134,538.

MEMBERSHIP AND ELECTIONS - CONSISTS OF ACTIVITIES RELATED TO THE

MAINTAINING OF THE HONORARY SOCIETY AND ELECTING FELLOWS TO THE

ACADEMY.

FORM 990, PART VI, SECTION A, LINE 4:

EXPLANATION: THE ACADEMY MADE 2 SETS OF CHANGES TO ITS BYLAWS SINCE IT

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES	Employer identification number $04-2103651$
FILED ITS FISCAL 2013 FORM 990. THE FIRST SET OF CHANGES	CLARIFIED THE
BOARD OF DIRECTORS' AUTHORITY, ESTABLISHED THE POSITION O	F PRESIDENT,
ESTABLISHED 3 YEAR TERMS FOR ITS OFFICERS AND IDENTIFIED	10 GOVERNANCE
COMMITTEES.	

THE SECOND SET OF BYLAW CHANGES, DATED OCTOBER 8, 2014, PROVIDED ADDITIONAL CLARIFICATION OF THE VARIOUS GOVERNING BODIES, INCREASED THE MINIMUM NUMBER OF BOARD OF DIRECTORS MEETINGS, PROVIDED FLEXIBILITY IN CREATING AN EXECUTIVE COMMITTEE AND FURTHER CLARIFIED THE TERMS OF OFFICE OF THE BOARD AND GOVERNANCE COMMITTEES.

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

EXPLANATION: THE ACADEMY'S MEMBERSHIP CONSISTS OF FELLOWS, ELECTED FROM CITIZENS OR RESIDENTS OF THE UNITED STATES OF AMERICA, AND FOREIGN HONORARY MEMBERS, ELECTED FROM CITIZENS OR RESIDENTS OF OTHER NATIONS. THE ACADEMY'S MEMBERS ARE ORGANIZED IN VARIOUS CLASSES BASED ON THE ARTS, SCIENCES, AND PROFESSIONS IN WHICH THESE MEMBERS ARE PROFICIENT.

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

EXPLANATION: FELLOWS IN GOOD STANDING MAY NOMINATE AND VOTE FOR OFFICERS, DIRECTORS, AND COUNCIL MEMBERS.

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

EXPLANATION: THE FORM 990 IS REVIEWED BY MEMBERS OF SENIOR STAFF, THE CHAIR OF THE BOARD, THE TREASURER AND THE AUDIT COMMITTEE. THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE FINAL FORM OF THE RETURN BEFORE FILING.

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES	Employer identification number 04-2103651
EXPLANATION: CONFLICT OF INTEREST STATEMENTS ARE UPDATED	ANNUALLY BY THE
BOARD, TRUSTEE, AND PROJECT FELLOWS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: THE ACADEMY'S COMPENSATION COMMITTEE CONSIST	ED OF THE CHAIR OF
THE BOARD, CHAIR OF THE FINANCE COMMITTEE, AND CHAIR OF T	HE NOMINATING &
GOVERNANCE COMMITTEE AND MET ANNUALLY TO REVIEW THE PERFO	RMANCE AND
DETERMINE THE SALARY OF THE PRESIDENT & CEO ON BEHALF OF	THE BOARD.
THE COMMITTEE UTILIZED 990 FORMS OF LIKE ORGANIZATIONS TO	DETERMINE
APPROPRIATENESS OF STAFF SALARIES. THE SALARY BUDGET FOR	EACH FISCAL YEAR
WAS APPROVED BY THE FINANCE COMMITTEE.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ACADEMY'S GOVERNING DOCUMENTS, CONFLICT	OF INTEREST POLICY
AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
EDITING:	
PROGRAM SERVICE EXPENSES	46,250.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	46,250.
BUILDING AND GROUNDS REPAIRS AND MAINTENANCE:	
PROGRAM SERVICE EXPENSES	291,829.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0 .
09-04-13 Scheo	dule O (Form 990 or 990-EZ) (2013)

Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES	Employer identification number $04 - 2103651$
TOTAL EXPENSES	291,829.
SECURITY SERVICES:	
PROGRAM SERVICE EXPENSES	61,598.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	61,598.
PROGRAM CONSULTING:	
PROGRAM SERVICE EXPENSES	520,213.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	520,213.
AGENCY PLACEMENT:	
PROGRAM SERVICE EXPENSES	15,000.
MANAGEMENT AND GENERAL EXPENSES	494.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	15,494.
OTHER:	
PROGRAM SERVICE EXPENSES	500,599.
MANAGEMENT AND GENERAL EXPENSES	117,833.
FUNDRAISING EXPENSES	44,136.
TOTAL EXPENSES	662,568.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,597,952.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: 332212 09-04-13

Schedule O (Form 990 or Name of the organization					Page Employer identification number
	AMERICAN	ACADEMY O	F ARTS AN	D SCIENCES	04-2103651
INCREASE IN E	BENEFICIAL	INTEREST	IN PERPET	UAL TRUST	158,587
FORM 990, PAF	RT XII. LIN	IE 2C			
					PROGEGG
SAPLANATION:	THE ACADEN	IY DID NOT	CHANGE I	TS OVERSIGHT	PROCESS.
-					

SCHEDULE R	
(Earm 000)	

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.
 See separate instructions.

OMB No. 1545-0047

. Inspection

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

Name of the organization

AMERICAN ACADEMY OF ARTS AND SCIENCES

Employer identification number 04 - 2103651

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

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

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) (e) Exempt Code section status (if sec		(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No

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

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partn	l or Percentage ^{ing} ownership r?
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	10

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	contr	i) ction b)(13) rolled tity?
		country)				233613		Yes	No
NORTON'S WOODS, INC 04-3388917			AMERICAN						
136 IRVING STREET			ACADEMY OF						
CAMBRIDGE, MA 02138	EVENT SERVICES	MA	ARTS AND	C CORP	216,349.		100.00%		Х

332162 09-12-13

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES

Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b,	or 36.
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	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
	During the tax year, did the organization engage in any of the following transaction		0				
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				. 1 a		X
b	Gift, grant, or capital contribution to related organization(s)				. 1 b		X
С	Gift, grant, or capital contribution from related organization(s)				. 1 c		X
	Loans or loan guarantees to or for related organization(s)						X
е	Loans or loan guarantees by related organization(s)				. 1 e		X
f	Dividends from related organization(s)				. 1f		X
	Sale of assets to related organization(s)						X
h	Purchase of assets from related organization(s)				. 1h		X
i	Exchange of assets with related organization(s)				. 1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				. 1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)						X
I	Performance of services or membership or fundraising solicitations for related orga						X
m	Performance of services or membership or fundraising solicitations by related orga	anization(s)			. 1 m	x	X
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						
ο	Sharing of paid employees with related organization(s)				. 10		X
р	Reimbursement paid to related organization(s) for expenses				. 1 p		X
q	Reimbursement paid by related organization(s) for expenses				. 1q		X
r	Other transfer of cash or property to related organization(s)				. 1 r		X
	Other transfer of cash or property from related organization(s)						X
2	If the answer to any of the above is "Yes," see the instructions for information on v	vho must complete t	his line, including covered	relationships and transaction thresholds.			
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction	Amount involved	Method of determining amount	nvolved		
		type (a-s)					
			FFO 44.0				
<u>(1)</u>	NORTON WOODS, INC.	N	552,413.	FAIR MARKET VALUE			
(2)							
(3)							
<u>(4)</u>							
(5)							
(0)							
<u>(6)</u>							

Schedule R (Form 990) 2013 AMERICAN ACADEMY OF ARTS AND SCIENCES

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are a partners 501(c) orgs.) (3) ?	(f) Share of total income	(g) Share of end-of-year assets	(I Dispr tion alloca	h) ropor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener manag partn Yes	al or F ging ler?	(k) ^D ercentage ownership

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013	AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCES	04-	-2103651	Page 5
Dart VII Cumplemental Inform	n ati a n								

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME OF RELATED ORGANIZATION:

NORTON'S WOODS, INC.

DIRECT CONTROLLING ENTITY: AMERICAN ACADEMY OF ARTS AND SCIENCES