#### EXTENDED TO MAY 15, 2020

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

2019 2018 and ending JUN 30, A For the 2018 calendar year, or tax year beginning JUL 1, D Employer identification number Check if C Name of organization Address AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Name change Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 617-576-5000 Final return/ 136 IRVING STREET 11,625,694. City or town, state or province, country, and ZIP or foreign postal code termin-ated G Gross receipts \$ Amended return H(a) Is this a group return CAMBRIDGE, MA 02138 F Name and address of principal officer: DAVID W. OXTOBY Yes X No for subordinates? ..... L Applica-H(b) Are all subordinates included? Yes No SAME AS C ABOVE I Tax-exempt status: X 501(c)(3) If "No," attach a list. (see instructions) 501(c) ( ) (insert no.) 4947(a)(1) or J Website: ► WWW.AMACAD.ORG H(c) Group exemption number L Year of formation: 1780 M State of legal domicile: MA K Form of organization: X Corporation Association Other > Trust Part I Summary Briefly describe the organization's mission or most significant activities: THE AMERICAN ACADEMY OF ARTS AND 1 SCIENCES IS AN HONORARY MEMBERSHIP SOCIETY THAT DRAWS UPON Activities & Governance Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 18 3 Number of voting members of the governing body (Part VI, line 1a) 17 Number of independent voting members of the governing body (Part VI, line 1b) 4 69 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 700 Total number of volunteers (estimate if necessary) 6 -46,428. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 -46,428.b Net unrelated business taxable income from Form 990-T, line 38 . **Prior Year Current Year** 13,617,893. 8,064,889. Contributions and grants (Part VIII, line 1h) Revenue 793,711. 870,156. Program service revenue (Part VIII, line 2g) 1,391,848. 2,083,228. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 16,494,832. 10,326,893. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 6,335,113. 6,738,105. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 5,171,859. 5,977,415. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 11,506,972. 12,715,520. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,987,860. -2,388,627.Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year OF 98,074,474. 97,930,457. Total assets (Part X, line 16) 2,949,966. 3,224,470. 21 Total liabilities (Part X, line 26) 95,124,508. 94,705,987. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ach 110011 Signature of officer Sign MARK ROBINSON, CHIEF OPERATING OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature

Form 990 (2018)

X Yes

No

Phone no. 617-761-0600

P01342395

26-3753134

02/19/20

Firm's EIN

500 BOYLSTON STREET

BOSTON, MA 02116

May the IRS discuss this return with the preparer shown above? (see instructions)

BRENDA L. BOOTH

Firm's address

Firm's name CBIZ MHM, LLC

Paid

Preparer

Use Only

Form 990 (2018)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		X
4	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		-	
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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		X
10	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	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	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		Х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С	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? If "Yes," complete Schedule D, Part VIII	11c		х
а	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		77	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		X
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	-	
,	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	5		
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X
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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			**
	Part IX, column (A), line 2? 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		77	
	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	04	Х	
	Schedule K. If "No," go to line 25a	24a	Δ	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		Х
	any tax-exempt bonds?	24c 24d	-	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		- 21
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	77
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	OFF		х
	Schedule L, Part I	25b		A
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		х
07	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20	-	
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		Х
00	of any of these persons? If "Yes," complete Schedule L, Part III	21		0.00
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):	28a	21-17-25	X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive more than \$25,000 in norcast contributions? If Tes, complete schedule in	25		
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 00		
31		31		Х
32	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? [f "Yes," complete	0,		-
02	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	
	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?			
•	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes, " complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt 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			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 12 5	en interes	i gadwa	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			177
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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filed for building filed for building for the Note.  3a Did the building file for the See in See in building for the See for the Did are current for the See for the Did are current for the See for t	the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, or the calendar year ending with or within the year covered by this return  ast one is reported on line 2a, did the organization file all required federal employment tax returns?  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  e organization have unrelated business gross income of \$1,000 or more during the year?  s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  time during the calendar year, did the organization have an interest in, or a signature or other authority over, a lial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). The organization a party to a prohibited tax shelter transaction at any time during the tax year?  In the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns?  2a 69  69  69  69  69  69  69  69  69  69	2b 3a 3b	X X X	No						
filed for building filed for building for the Note.  3a Did the building file for the See in See in building for the See for the Did are current for the See for the Did are current for the See for t	ast one is reported on line 2a, did the organization file all required federal employment tax returns?  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  e organization have unrelated business gross income of \$1,000 or more during the year?  s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  time during the calendar year, did the organization have an interest in, or a signature or other authority over, a lial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  the organization a party to a prohibited tax shelter transaction at any time during the tax year?	3a 3b	X							
b If at le Note. 3a Did the b If "Yes 4a At any financ b If "Yes See in 5a Was th b Did an c If "Yes 6a Does in any co	ast one is reported on line 2a, did the organization file all required federal employment tax returns?  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) e organization have unrelated business gross income of \$1,000 or more during the year?  5," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  1 time during the calendar year, did the organization have an interest in, or a signature or other authority over, a lial account in a foreign country (such as a bank account, securities account, or other financial account)?  5," enter the name of the foreign country:	3a 3b	X							
Note. 3a Did the b If "Yes 4a At any financ b If "Yes See in 5a Was th b Did an c If "Yes 6a Does to any co	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  e organization have unrelated business gross income of \$1,000 or more during the year?  s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  time during the calendar year, did the organization have an interest in, or a signature or other authority over, a lial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	3b	_							
3a Did the b If "Yes 4a At any finance b If "Yes See in 5a Was the b Did and c If "Yes 6a Does to any co	e organization have unrelated business gross income of \$1,000 or more during the year?  s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  time during the calendar year, did the organization have an interest in, or a signature or other authority over, a lial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	3b	_							
b If "Yes 4a At any financ b If "Yes See in 5a Was th b Did an c If "Yes 6a Does any co	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O time during the calendar year, did the organization have an interest in, or a signature or other authority over, a sial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). The organization a party to a prohibited tax shelter transaction at any time during the tax year?		X							
4a At any finance b If "Yes See in 5a Was th b Did an c If "Yes 6a Does to any co	time during the calendar year, did the organization have an interest in, or a signature or other authority over, a sial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:  structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  the organization a party to a prohibited tax shelter transaction at any time during the tax year?	4a								
financ b If "Yes See in 5a Was th b Did ar c If "Yes 6a Does to any co	ial account in a foreign country (such as a bank account, securities account, or other financial account)?  s," enter the name of the foreign country:   structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	4a		7.7						
See in Se	structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  ne organization a party to a prohibited tax shelter transaction at any time during the tax year?			X						
<ul><li>5a Was the</li><li>b Did and</li><li>c If "Yes</li><li>6a Does to any color</li></ul>	ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	1, (144)								
<ul><li>b Did an</li><li>c If "Yes</li><li>6a Does to any continue."</li></ul>		_		37						
c If "Yes 6a Does to any co	ly taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X						
6a Does t										
any co										
	the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	ontributions that were not tax deductible as charitable contributions?	6a		X						
b If "Yes	s," did the organization include with every solicitation an express statement that such contributions or gifts									
	not tax deductible?	6b	0.004,000	E 194						
-	nizations that may receive deductible contributions under section 170(c).		7 8 6	77						
	organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	X						
	s," did the organization notify the donor of the value of the goods or services provided?	7b								
c Did th	e organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	Form 8282?	7c		X						
	s," indicate the number of Forms 8282 filed during the year		Ta 400 .							
e Did th	e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
	e organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
g if the	organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_						
h If the	organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-						
8 Spons	soring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		Br 767	C. Sec.						
	oring organization have excess business holdings at any time during the year?	8	523W 1	- Gent F - 4						
9 Spon	soring organizations maintaining donor advised funds.	4500								
	e sponsoring organization make any taxable distributions under section 4966?	9a								
b Did th	e sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10 Section	on 501(c)(7) organizations. Enter:									
	ion fees and capital contributions included on Part VIII, line 12									
<b>b</b> Gross	receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
	on 501(c)(12) organizations. Enter:									
	income from members or shareholders									
<b>b</b> Gross	income from other sources (Do not net amounts due or paid to other sources against									
	nts due or received from them.)		1 3 466	15,55						
12a Secti	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b if "Ye	s," enter the amount of tax-exempt interest received or accrued during the year	1160	TV 1							
13 Secti	on 501(c)(29) qualified nonprofit health insurance issuers.	1,3584	1							
a Is the	organization licensed to issue qualified health plans in more than one state?	13a		-						
Note.	See the instructions for additional information the organization must report on Schedule O.									
<b>b</b> Enter	the amount of reserves the organization is required to maintain by the states in which the									
organ	ization is licensed to issue qualified health plans		1 2 m							
c Enter	the amount of reserves on hand									
	ne organization receive any payments for indoor tanning services during the tax year?	14a		X						
b If "Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								
15 Is the	organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
10 1116	ss parachute payment(s) during the year?	15		X						
		1. 7. 3.1. 2	1.4 (15)	-						
exces	s," see instructions and file Form 4720, Schedule N.	1000	14.94							
exces	s," see instructions and file Form 4720, Schedule N. organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						

Form 990 (2018) AMERICAN ACADEMY OF ARTS AND SCIENCES U4-21U3651 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes in schedule 0. See instituctions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
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.	7		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17	14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the 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 reached 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 Revenue Code.)			
	The sector Bregotte memory was a person of the sector between the sect		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1. 1. 4
12a		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
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 approval by independent		100	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	.,		
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MARK ROBINSON - 617-576-5023			
	136 IRVING STREET, CAMBRIDGE, MA 02138			
_		-	000	(00.10)

# 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	(A)	(B)			((	<b>)</b>			(D)	(E)	(F)
Compensation   Comp			, de	Position		Reportable	Reportable	Estimated			
Weeker   Weeker   West   War   War		hours per	box	, unles	ss per	son is	s both	n an	compensation	compensation	amount of
NANCY C. ANDREWS		week	<u> </u>	cer an	dad	recto	r/trus	tee)			
CILAIR OF THE BOARD		1 '	rector						1		
CILAIR OF THE BOARD		1	or di	8			ated		, -	(W-2/1099-MISC)	
CILAIR OF THE BOARD			ustee	trust		9	suedi		(W-2/1099-MISC)		
CILAIR OF THE BOARD		1 ~	ual tr	ional		ploy	t con	١.			
CILAIR OF THE BOARD		1	ndivid	nstitul	Officer	ey eπ	Highes	orme			organizations
CHAIR OF THE BOARD	(1) NANCY C. ANDREWS		=	-	Ü	*	1 0	-			
REBIDENT (UNTIL 12-31-18)			Х		Х				0.	0.	0.
Color   Colo	(2) JONATHAN F. FANTON	40.00									_
VICE CHAIR OF BOARD	PRESIDENT (UNTIL 12-31-18)		Х		Х		L		576,481.	0.	28,920.
(1) ALAN M, DACHS	(3) DIANE P. WOOD	1.00									
VICE CHAIR OF BOARD	VICE CHAIR OF BOARD		X		Х		<u> </u>		0.	0.	0.
SECRETARY	(4) ALAN M. DACHS	1.00									
SECRETARY	VICE CHAIR OF BOARD		X	_	X	_	L	_	0.	0.	0.
CARL H. PFORZHEIMER III	(5) GERALDINE L. RICHMOND	1.00									_
TREASURER	SECRETARY		X		X	_		<u> </u>	0.	0.	0.
The state of the	(6) CARL H. PFORZHEIMER III	1.00			l						_
MEMBER         X         0.         0.         0.           (8) LOUSIE H. BRYSON         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (9) DAVID M. RUBENSTEIN         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (10) NANNERL O. KEOHANE         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (11) JOHN LITHGOW         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (12) VENKATESH NARAYANAMURTI         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (13) NATASHA TRETHEWEY         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (14) PAULINE YU         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (15) JOHN MARK HANSEN         0.         0.	TREASURER		X		X	_	_	<u> </u>	0.	0.	0.
MEMBER		1.00									
MEMBER         X         0.         0.         0.           (9) DAVID M. RUBENSTEIN         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (10) NANNERL O. KEOHANE         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (11) JOHN LITHGOW         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (12) VENKATESH NARAYANAMURTI         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (13) NATASHA TRETHEWEY         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (14) PAULINE YU         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (15) JOHN MARK HANSEN         1.00         0.         0.         0.           MEMBER         X         0.         0.         0.           (16) CHERRY A. MURRAY         1.00         0. </td <td></td> <td></td> <td>X</td> <td><u> </u></td> <td>_</td> <td>_</td> <td><u> </u></td> <td>_</td> <td>0.</td> <td>0.</td> <td>0.</td>			X	<u> </u>	_	_	<u> </u>	_	0.	0.	0.
MEMBER		1.00									_
MEMBER       X       0.       0.       0.         (10) NANNERL O. KECHANE       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (11) JOHN LITHGOW       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (12) VENKATESH NARAYANAMURTI       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (13) NATASHA TRETHEWEY       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (14) PAULINE YU       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (15) JOHN MARK HANSEN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (16) CHERRY A. MURRAY       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (17) SHIRLEY M. TILGHMAN       1.00       0.       0.       0.		1 00	X	_	⊢	_	┢	_	0.	0.	0.
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MEMBER       X       0.       0.       0.         (11) JOHN LITHGOW       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (12) VENKATESH NARAYANAMURTI       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (13) NATASHA TRETHEWEY       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (14) PAULINE YU       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (15) JOHN MARK HANSEN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (16) CHERRY A. MURRAY       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (17) SHIRLEY M. TILGHMAN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.		1 00	X	┝	-	<u> </u>	╀	-	0.	<u> </u>	0.
1.00		1.00	٠,,								_
MEMBER       X       0.       0.       0.       0.         (12) VENKATESH NARAYANAMURTI       1.00       X       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.       0.       0.         (13) NATASHA TRETHEWEY       1.00       X       0.		1 00	<u>^</u>	-	-		┼	-	0.	0.	0.
MEMBER   X   0. 0. 0.	, ,	1.00	١,,								1
MEMBER   X		1 00	ΙΔ.	-	-	-	╀	$\vdash$	0.	0.	0.
MEMBER		1.00	•						0		
MEMBER       X       0.       0.       0.         (14) PAULINE YU       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (15) JOHN MARK HANSEN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (16) CHERRY A. MURRAY       1.00       0.       0.       0.         (17) SHIRLEY M. TILGHMAN       1.00       0.       0.       0.       0.         MEMBER       X       0.       0.       0.       0.		1 00	1	┢	-	$\vdash$	$\vdash$	-	0.	0.	0.
(14) PAULINE YU     1.00       MEMBER     X       (15) JOHN MARK HANSEN     1.00       MEMBER     X       (16) CHERRY A. MURRAY     1.00       MEMBER     X       (17) SHIRLEY M. TILGHMAN     1.00       MEMBER     X       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.       0.     0.		1.00	$ \mathbf{x} $						0.	0.	0.
MEMBER       X       0.       0.       0.         (15) JOHN MARK HANSEN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (16) CHERRY A. MURRAY       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (17) SHIRLEY M. TILGHMAN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.       0.	(14) PAULINE YU	1.00	1	$\vdash$	1		$\top$	$\vdash$			
1.00   MEMBER   X   0. 0. 0.   0.   (16) CHERRY A. MURRAY   1.00   MEMBER   X   0. 0. 0.   0.   0.   (17) SHIRLEY M. TILGHMAN   1.00   MEMBER   X   0. 0. 0.   0.   0.   0.   0.   0.	MEMBER		x						0.	0.	0.
MEMBER     X     0.     0.     0.       (16) CHERRY A. MURRAY     1.00     X     0.     0.     0.       MEMBER     X     0.     0.     0.     0.       (17) SHIRLEY M. TILGHMAN     1.00     0.     0.     0.     0.       MEMBER     X     0.     0.     0.     0.	(15) JOHN MARK HANSEN	1.00					$\top$				
MEMBER X 0. 0. 0. (17) SHIRLEY M. TILGHMAN 1.00 0. 0. 0. 0. MEMBER X 0. 0. 0. 0.	MEMBER		X						0.	0.	0.
(17) SHIRLEY M. TILGHMAN 1.00 X 0. 0. 0.	(16) CHERRY A. MURRAY	1.00									
MEMBER 1.00 X 0. 0.	MEMBER		X						0.	0.	0.
	(17) SHIRLEY M. TILGHMAN	1.00									
	MEMBER		X						0.	0.	0.

832007 12-31-18

Form 990 (2018)

Part VII Section A. Officers, Directors, (A)	(B)	,,		(0		,,,,,,,		(D)	(E)		(F)	
Name and title	Average hours per week	box	not cl	Posi heck r ss per	nore son is	than o s both or/trust	an	Reportable compensation from	Reportable compensation from related	am	timated nount cother	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	frorga orga	pensat om the anization d relate unization	on ed
18) LARRY JAY SHAPIRO	1.00	x						0.	0.			0.
MEMBER	40.00	Λ						0.	0.			0.
(19) DAVID W. OXTOBY PRESIDENT (AS OF 1-1-19)	40.00	х		х				0.	0.			0.
(20) MARK ROBINSON	40.00			Х				239,269.	0.	1	5,00	1
CHIEF OPERATING OFFICER (21) CORY DIAMOND	40.00		-	Δ		-	-	239,209.	0.	4.	5,00	1 -
CHIEF ADVANCEMENT OFFICER	40.00					х		175,490.	0.		8,94	4
(22) PHYLLIS BENDELL	40.00											
OIR. OF PUBLISHING						X		166,322.	0.	4	6,75	54
(23) STEVEN DANSBY	40.00											
DIRECTOR OF FINANCE						X		160,814.	0.	2	5,95	59
(24) JOHN RANDELL SR. PROGRAM DIRECTOR	40.00					х		157,681.	0.	1	7,39	94
(25) ALISON FRANKLIN	40.00					-	-				, ,	
CHIEF COMMUNICATION OFFICER		_				X		177,083.	0.	1	3,45	57
		-										
1b Sub-total							-	1,653,140.	0.	18	6,42	29
c Total from continuation sheets to F								0.	0.			0
d Total (add lines 1b and 1c)								1,653,140.	0.	18	6,42	29
2 Total number of individuals (including							o re	eceived more than \$100,0	000 of reportable			_
compensation from the organization	<u> </u>				-							1
3 Did the organization list any former of	officer director or tr	ıısta	o ka	ov or	mole	11/00	orl	nighest compensated em	polovee on		Yes	No
line 1a? If "Yes," complete Schedule										3		X
4 For any individual listed on line 1a, is											8 8	
and related organizations greater tha			-							4	Х	
5 Did any person listed on line 1a recei												
and the the second section 0	·				-							v

Section B. Independent Contractors

rendered to the organization? If "Yes," complete Schedule J for such person

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

(A) Name and business address	(B) Description of services	(C) Compensation
LATTICE BUS APPLICATIONS		
22 PINE PLAIN RD, BOXFORD, MA 01921	WEB DESIGN/DATABASE	284,000.
POD, LLC, 678 MASSACHUSETTS AVE, STE 401,		
CAMBRIDGE, MA 02139	WEB DESIGN	267,168.
SPAGNOLO GISNESS & ASSOC.	CONSTRUCTION	
200 HIGH STREET, FLOOR 2, BOSTON, MA 02110	MANAGEMENT	207,151.
CASABLANCA SERVICES, INC.	LANDSCAPING/SNOW	
4 BENNETT ST., EVERETT, MA 02149	REMOVAL/CONSTRUCTION	160,192.
JOHN TESSITORE		
50 PARMENTER RD, FRAMINGHAM, MA 01701	PROGRAM CONSULTING	158,594.
2 Total number of independent contractors (including but not limited to those list \$100,000 of compensation from the organization ▶ 11	ed above) who received more than	
\$100,000 of compensation from the organization		- 000 «

Form 990 (2018)

Part VIII Statement of Revenue

Total revenue			Check if Schedule O conta	ains a response	or note to any line	in this Part VIII			
Description						(A)	Related or exempt function	business	Revenuè excluded from tax under
Business Code  2 a CATERING OPERATIONS  5 SALES POELICATIONS  5 11120  211,042.  21,043.  370,156.  370,15	nts Its	1 a	Federated campaigns	1a		vije Borovenista			E Wall a Walle
Business Code  2 a CATERING OPERATIONS  5 SALES POELICATIONS  5 11120  211,042.  21,043.  370,156.  370,15	irar	b	Membership dues	1b	986,950.				
Business Code 90099 659,114.  511120 211,042. 21,042. 21,04	s, G	С	Fundraising events						
Business Code 90099 659,114.  511120 211,042. 21,042. 21,04	ar is	d	Related organizations	1d					算器 自在表现上
Business Code  2 a CATERING OPERATIONS  5 SALES POELICATIONS  5 11120  211,042.  21,043.  370,156.  370,15	imi	е	Government grants (contributi	ions) 1e	2				e ena
Business Code  2 a CATERING OPERATIONS  5 SALES POELICATIONS  5 11120  211,042.  21,043.  370,156.  370,15	tior S	f	All other contributions, gifts, grant	ts, and					
Business Code  2 a CATERING OPERATIONS  5 SALES POELICATIONS  5 11120  211,042.  21,043.  370,156.  370,15	혈		similar amounts not included above	ve 1f	7,077,939.				
Business Code 90099 659,114.  511120 211,042. 21,042. 21,04	da	g	Noncash contributions included in lines	1a-1f: \$					
2 a CATERINO OPERATIONS  900099	ပို့ မြ	h	Total. Add lines 1a-1f		▶	8,064,889.			
Second   S									
g Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f a Gross amount from sales of inventory b Less: cost or other basis and sales expenses 1, 299, 801, c Gain or (loss) 344, 835, d Net gain or (loss) 5 A Gross income from fundraising events (not including \$	9	2 a							
g Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f a Gross amount from sales of inventory b Less: cost or other basis and sales expenses 1, 299, 801, c Gain or (loss) 344, 835, d Net gain or (loss) 5 A Gross income from fundraising events (not including \$	e Zi	b	SALES PUBLICATIONS		511120	211,042.	211,042.		
g Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f a Gross amount from sales of inventory b Less: cost or other basis and sales expenses 1, 299, 801, c Gain or (loss) 344, 835, d Net gain or (loss) 5 A Gross income from fundraising events (not including \$	Nua	С							
g Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f a Gross amount from sales of inventory b Less: cost or other basis and sales expenses 1, 299, 801, c Gain or (loss) 344, 835, d Net gain or (loss) 5 A Gross income from fundraising events (not including \$	ev	d							
g Total. Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f a Gross amount from sales of inventory b Less: cost or other basis and sales expenses 1, 299, 801, c Gain or (loss) 344, 835, d Net gain or (loss) 5 A Gross income from fundraising events (not including \$	. og	е							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalties 6 a Gross rents 6 b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 1, 298, 901. 2 Gain or (loss) 344, 835. 344, 835. 344, 835. 344, 835. 344, 835. 344, 835. 344, 835. 3544, 835. 36 Royalties  1, 093, 441. 1, 0	4	f	All other program service reve	nue			- P. V. B. C.		
1,047,013.   -46,428.   1,093,441.	$\rightarrow$	g				870,156.			
A   Income from investment of tax-exempt bond proceeds   Royalties   (i) Real   (ii) Personal		3							
Total Royalties						1,047,013.		-46,428.	1,093,441.
(i) Real   (ii) Personal   (ii) Personal   (iii) Person		4	Income from investment of tax	x-exempt bond p	roceeds				
Barrier   Barr		5	Royalties						S 2000
b Less: rental expenses c Rental income or (loss)  7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 1, 298, 801. c Gain or (loss)  8 a Gross income from fundralsing events (not including \$\frac{1}{2}\$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d				(i) Real	(ii) Personal				
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 1,298,801. 344,835. d Net gain or (loss) 8 a Gross income from fundralising events (not including \$					-				
Table   Tabl		b	Less: rental expenses						
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 1, 298, 801. c Gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 5 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b		С	Rental income or (loss)						
assets other than inventory b Less: cost or other basis and sales expenses  c Gain or (loss)  d Net gain or (loss)  8 a Gross income from fundralsing events (not including \$		d	Net rental income or (loss)						
b Less: cost or other basis and sales expenses		7 a	Gross amount from sales of	(i) Securities	(ii) Other				
and sales expenses 1,298,801. c Gain or (loss) 344,835. d Net gain or (loss) of oscincome from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities IO a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d			assets other than inventory	1,643,636.					
C Gain or (loss)  344,835.  d Net gain or (loss)  8 a Gross income from fundralsing events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d b		b	Less: cost or other basis						and the second
d Net gain or (loss)			and sales expenses						
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		С	Gain or (loss)	344,835.					
including \$ of contributions reported on line 1c). See Part IV, line 18		d	Net gain or (loss)			344,835.			344,835.
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d		8 a	including \$	of					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d	Ř		Part IV, line 18	a					
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19  b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d	the	b							
9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d	0				•				
Part IV, line 19  b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d								The County of	
b Less; direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less; cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d			• •						
c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d		b							
10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d							and the last the second second	American State of Sta	
and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d	-			•					
b Less: cost of goods sold b c Net income or (loss) from sales of inventory    Miscellaneous Revenue    Business Code    11 a									
C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a  b  C  d All other revenue  e Total. Add lines 11a-11d	i	b					And the second s		
Miscellaneous Revenue  Business Code  11 a  b  c  d All other revenue  e Total. Add lines 11a-11d					<b>&gt;</b>			100	Control Special Section
11 a					Business Code	A STATE OF THE STA	Carles of the Section of the Section		
b		11 a					And the second s		
c d All other revenue e Total. Add lines 11a-11d									
d All other revenue e Total. Add lines 11a-11d		C							
e Total. Add lines 11a-11d		d							
		9							May 18 may 18 mg 1
						10,326,893.	870 156.	-46 428	1,438,276

Section	n 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response			piete column (A).	X
Do no	t include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D) Fundraising
	, 9b, and 10b of Part VIII.	Total expenses	expenses	Management and general expenses	expenses
1 0	Grants and other assistance to domestic organizations				
a	nd domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	ndividuals. See Part IV, line 22				
	Grants and other assistance to foreign			in the second second	
	organizations, foreign governments, and foreign			The same of the sa	
	ndividuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				The April 19 19 19 19
	Compensation of current officers, directors,	004 000	216 706	C40 1F4	25 060
	rustees, and key employees	894,000.	216,786.	642,154.	35,060.
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 650 061	2 460 066	121 720	757 170
	Other salaries and wages	4,658,864.	3,469,966.	431,720.	757,178.
	Pension plan accruals and contributions (include	364,076.	258,688.	39 666	65 722
	section 401(k) and 403(b) employer contributions)	428,796.	322,722.	39,666. 39,336.	65,722. 66,738.
	Other employee benefits	392,369.	278,793.	56,731.	56,845.
	Payroll taxes	392,309.	270,755.	30,731.	30,043.
	Fees for services (non-employees):				
	Management	36,893.	21,019.	12,474.	3,400.
	_egal	58,000.	42,100.	9,091.	6,809.
	Accounting	30,000.	42,100.	3,031.	0,003.
	obbying Professional fundraising services. See Part IV, line 17		Area and a second		
	nvestment management fees	13,153.	8,552.	1,773.	2,828.
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	1,573,727.	1,164,658.	272,625.	136,444.
	Advertising and promotion	257.	257.		
	Office expenses	85,711.	57,206.	20,915.	7,590.
	nformation technology	95,427.	64,831.	10,643.	19,953.
	Royalties				
	Occupancy	150,723.	117,472.	19,012.	14,239
	Travel	840,728.	679,937.	157,867.	2,924.
18	Payments of travel or entertainment expenses				
1	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,038,295.	944,171.	61,625.	32,499
20	nterest	90,773.	65,888.	14,228.	10,657
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,011,006.	768,612.	124,639.	117,755
	nsurance	87,979.	66,539.	12,258.	9,182
24	Other expenses. Itemize expenses not covered	And the second section of the section of the section of the second section of the secti			
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
	PRINTING AND PUBLICATIO	203,042.	163,622.	4,377.	35,043
	POSTAGE AND SHIPPING	194,573.	127,512.	19,083.	47,978
	TELEPHONE	122,799.	100,995.	11,731.	10,073
	SUPPLIES	115,015.	75,109.	11,774.	28,132
	All other expenses	259,314.	214,213.	19,317.	25,784
	Total functional expenses. Add lines 1 through 24e	12,715,520.	9,229,648.	1,993,039.	1,492,833
	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)				Form <b>990</b> (201

Part	^	Check if Schedule O contains a response or note to any line in this Part X			-	
		Check if Schedule O contains a response of note to any line in this rait X		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		298,498.	1	480,996.
	2	Savings and temporary cash investments		7,452,622.	2	3,662,277.
		Pledges and grants receivable, net		10,595,509.	3	7,729,154.
		Accounts receivable, net		64,147.	4	17,228.
	5	Loans and other receivables from current and former officers, directors,			13 = 1	
		trustees, key employees, and highest compensated employees. Complete				
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined up				
	•	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib	1			
		employers and sponsoring organizations of section 501(c)(9) voluntary				
		employees' beneficiary organizations (see instr). Complete Part II of Sch L	VO		6	Constitution State of the last the
2	-					
2	7	Notes and loans receivable, net		7,080.	7	7,937.
1	8	Inventories for sale or use		122,035.	8	127,546.
	9	Prepaid expenses and deferred charges		122,033.	9	127,340.
1	10a	Land, buildings, and equipment: cost or other	CO1			
		basis. Complete Part VI of Schedule D 10a 20,554,6	601.	0 560 304		10 000 007
	b	Less: accumulated depreciation 10b 10,552,		9,562,324.	10c	10,002,027.
-	11	Investments - publicly traded securities		38,374,067.	11	38,591,902.
1	12	Investments - other securities. See Part IV, line 11		20,757,431.	12	25,804,939.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		10,840,761.	15	11,506,451.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		98,074,474.	16	97,930,457.
	17	Accounts payable and accrued expenses		401,064.	17	796,858.
	18	Grants payable			18	
	19	Deferred revenue			19	
1	20	Tax-exempt bond liabilities			20	
1	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
0 2	22	Loans and other payables to current and former officers, directors, trustee	es,			
Ë		key employees, highest compensated employees, and disqualified persor	ns.			
Liabilities		Complete Part II of Schedule L			22	
۱ =	23	Secured mortgages and notes payable to unrelated third parties		2,548,902.	23	2,427,612.
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Part X	of			
		Schedule D			25	
1	26	Total liabilities. Add lines 17 through 25		2,949,966.	26	3,224,470.
		Organizations that follow SFAS 117 (ASC 958), check here X	and			
		complete lines 27 through 29, and lines 33 and 34.				
š	27	Unrestricted net assets		31,107,899.	27	33,524,371
au i	28	Temporarily restricted net assets			28	0.
Ba	29			64,016,609.	29	61,181,616
pur '	20	Organizations that do not follow SFAS 117 (ASC 958), check here		Control of the Contro	23	
=		and complete lines 30 through 34.				
o s	30		1700	the paragraph or making the same	30	
ser	30	Capital stock or trust principal, or current funds				
As	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
<u>o</u>	32			05 124 E00	32	04 705 007
	33	Total net assets or fund balances		95,124,508.		94,705,987
	34	Total liabilities and net assets/fund balances		98,074,474.	34	97,930,457

Form 990 (2018)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 04-2103651 AMERICAN ACADEMY OF ARTS AND SCIENCES Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. \_\_\_\_ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

09340219 143399 261100

Schedule A (Form 990 or 990-EZ) 2018

2018.05050 AMERICAN ACADEMY OF ARTS

Schedule A (Form 990 or 990-EZ) 2018 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	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	7043866.	7538975.	16624043.	13617893.	8064889.	52889666.				
2	Tax revenues levied for the organ-										
2	ization's benefit and either paid to										
	or expended on its behalf										
_											
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge	7043866.	7538075	16624043.	13617893	806/889	52889666.				
	Total. Add lines 1 through 3	7043000.	1330313.	10024045.	13017093.	0004009.	52005000.				
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)			A STAN WAR			15233810.				
	Public support. Subtract line 5 from line 4.						37655856.				
Sec	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
7	Amounts from line 4	7043866.	7538975.	16624043.	13617893.	8064889.	52889666.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	183,630.	772,795.	1001343.	1080305.	1047013.	4085086.				
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)										
11	Total support. Add lines 7 through 10						56974752.				
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	3,694,503.				
	First five years. If the Form 990 is for			d, fourth, or fifth to	ax year as a section	n 501(c)(3)					
	organization, check this box and stop	p here					<b>&gt;</b>				
Se	ction C. Computation of Publi	ic Support Per	centage								
14	Public support percentage for 2018 (I	ine 6, column (f) di	vided by line 11, o	column (f))		14	66.09 %				
15	Public support percentage from 2017	Schedule A, Part	II, line 14			15	63.83 %				
16a	33 1/3% support test - 2018. If the	organization did no	ot check the box of	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	ox and				
	stop here. The organization qualifies										
k	33 1/3% support test - 2017. If the										
	and stop here. The organization qual										
172											
	7a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization										
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization										
1											
	b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the										
	organization meets the "facts-and-circ						▶ [ ]				
10	Private foundation. If the organization										
10	r i vate roundation. Il the organization	on did not check a	DOV OIL HILE 19' 16	a, 100, 17a, 01 17			0 or 000 FZ) 2019				

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

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5							
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	2 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						
Cal	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	b Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	c 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						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				1	504(3/2)	
14	First five years. If the Form 990 is for						. []
50	check this box and stop here	c Support Do	rcentage				
_			Total	(0)		l ar	0/
	Public support percentage for 2018 (li					15	<u>%</u>
16	Public support percentage from 2017 ection D. Computation of Inves					16	%
_				in a 10 and man (6)		47	0/
	Investment income percentage for 20					17	%
18						18	%
19	a 33 1/3% support tests - 2018. If the						_
	more than 33 1/3%, check this box an						
	b 33 1/3% support tests - 2017. If the line 18 is not more than 33 1/3%, chec	-					
00							
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 190, check t	inis box and see in	STRUCTIONS	

## Part IV | Supporting Organizations

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

Section	A	IΙΑ	Supp	orting	Orga	nizations

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

	Yes	No
1	7111	
C		, eq. (
2		
3a		
3b		
	1 7 7	
3c	KVII ().	
4a	10000	
4b		
4c	27 985	
40		
		A CONTRACT
5a		
1278	100	14.4
5b		_
5c	14	67.74
6		
7		
8		in the
0-		
9a		
9b		
9c		
_10a		
10b		

	_		
Schedule A (Form	990	or 990-E	Z) 2018

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2018

d Excess from 2017
e Excess from 2018

261100\_1

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Employer identification number

04-2103651 AMERICAN ACADEMY OF ARTS AND SCIENCES Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ > \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

AMERICAN ACADEMY OF ARTS AND SCIENCES

Employer identification number 04-2103651

Par	···		s or Accounts. Complete if the
***	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(4) 25:15: 42:152	(5)
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	riting that the assets held in donor advi-	sed funds
Ĭ	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or o		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the orga	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ucation) Preservation of a his	storically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic struc	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired aff		
	listed in the National Register		
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation ease		-
5	Does the organization have a written policy regarding the period	-	
	violations, and enforcement of the conservation easements it h		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing consequ	ation agamenta during the year
7	S     S	ing of violations, and enforcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170	0(b)(4)(B)(i)
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization		
	conservation easements.		o
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	0 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public exhil		
	the text of the footnote to its financial statements that describe	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of po	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(iii) A		
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financi	ial gain, provide
	the following amounts required to be reported under SFAS 11		
a	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		

832051 10-29-18

Schedule D (Form 990) 2018

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

		AN ACADEMY O					03651	
Part	III Organizations Maintaining	Collections of Art,	<b>Historical Trea</b>	asures, or Oth	er Simila	r Assets	(continue	d)
3	Using the organization's acquisition, access	sion, and other records,	check any of the fo	ollowing that are a	significant u	use of its co	ollection ite	ms
	(check all that apply):							
a	X Public exhibition	d	X Loan or exch	ange programs				
b	X Scholarly research	е	Other					
С	X Preservation for future generations							
4	Provide a description of the organization's	collections and explain	how they further the	e organization's ex	empt purpo	se in Part 2	XIII.	
5	During the year, did the organization solicit	or receive donations of	art, historical treas	ures, or other simil	ar assets			_
	to be sold to raise funds rather than to be n							X No
Part		-	e if the organization	n answered "Yes" o	on Form 990	D, Part IV, I	ine 9, or	
	reported an amount on Form 990, P							
1a	Is the organization an agent, trustee, custo	dian or other intermedia	ary for contributions	or other assets no	t included		_	
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XI	I and complete the follo	owing table:					
							Amount	
С	Beginning balance				1c			
	Additions during the year							
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on	Form 990, Part X, line 2	21, for escrow or cu	stodial account lial	oility?		Yes	No
b	If "Yes," explain the arrangement in Part XI							
Par	t V Endowment Funds. Complete	e if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back		
1a	Beginning of year balance	51,760,736.	47,631,151.	40,977,679	. 42,	598,328.	37,69	6,888.
b	Contributions	1,116,661.	2,161,782.	3,319,242		677,282.	5,05	1,000.
C	Net investment earnings, gains, and losses	2,362,262.	4,045,943.	5,596,988		513,457.	37	6,783.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	2,216,720.	2,078,140.	2,262,758	. 1,	784,474.	52	26,343.
f	Administrative expenses							
	End of year balance	E2 000 000	51,760,736.	47,631,151	. 40,	977,679.	42,59	8,328.
2	Provide the estimated percentage of the co	irrent year end balance	(line 1g, column (a)	) held as:				
а	Board designated or quasi-endowment	10.04	_%					
b	Permanent endowment ► 67.89	%						
С	Temporarily restricted endowment ▶	22.07 %						
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.						
3a	Are there endowment funds not in the pos	session of the organizat	tion that are held ar	nd administered for	the organiz	zation		
	by:							es No
	(i) unrelated organizations						3a(i) 2	
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organi	zations listed as require	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of t		vment funds.					
Par	t VI Land, Buildings, and Equip	ment.						
	Complete if the organization answe	red "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part	X, line 10.			
	Description of property	(a) Cost or ot basis (investm			) Accumulation depreciation		(d) Book v	alue
1a	Land							
	Buildings		13,38	8,985. 6	,010,1	.05.	7,378	880.
	Leasehold improvements		71	4,109.	361,2	19.		890.
	Equipment		6,01	1,833. 4	,181,2	250.	1,830	583.
	Other		43	9,674.				674.
_	. Add lines 1a through 1e. (Column (d) mus					1 1	0,002	

edule	D (For	m 990	2018 (	AM.
	-			

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) MULTI-STRATEGY FUNDS	12,544,452.	END-OF-YEAR MARKET	VALUE
(B) HEDGE FUNDS - DOMESTIC		•	
(C) EQUITIES	8,777,139.	END-OF-YEAR MARKET	
(D) PRIVATE EQUITY FUNDS	4,483,348.	END-OF-YEAR MARKET	VALUE
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	25,804,939.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) OTHER ASSETS			43,776.
(2) DUE FROM AFFILATES			8,150,957.
	RPETUAL TRUST		2,841,684.
(4) PREPAID LAND LEASE			470,034.
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line  Part X Other Liabilities.	15.)	<b>&gt;</b>	11,506,451.
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	(	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

(9)

THE AMERICAN ACADEMY OF ARTS AND SCIENCES' COLLECTION OF WORKS OF ART,
HISTORICAL DOCUMENTS AND OBJECTS CHRONICLE THE ACADEMY'S HISTORY,
MEMBERSHIP, PROGRAMS AND PUBLICATIONS FOR MORE THAN 240 YEARS. THE

COLLECTION INCLUDES PUBLICATIONS, WORKS OF ART, SCIENTIFIC INSTRUMENTS AND

832054 10-29-18

261100 1

# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

Open to Public Inspection

Name of the organization

Employer identification number

AMERICAN ACADE	MY OF ARTS	S AND SC	TENCES	04-210365	51
			side the United States. Complete		
Form 990, Par					
_	-		ds to substantiate the amount of its grant		
the grantees' eligibility	y for the grants or a	assistance, and t	the selection criteria used to award the gr	rants or assistance?	Yes No
	scribe in Part V the	e organization's	procedures for monitoring the use of its g	grants and other assistance outs	ide the
United States.	(The following Dort	I line 2 table or	an be duplicated if additional space is nee	edad )	
3 Activities per Region. (a) Region	(b) Number of	(c) Number of		(e) If activity listed in (d)	(f) Total
(a) Negion	offices in the region	employees, agents, and independent contractors in the region	(by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	is a program service, describe specific type of service(s) in the region	expenditures for and investments in the region
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS	The state of the s	6,168,508.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	0	0	INVESTMENTS		3,086,119.
H					
		i i			
					0.054.505
3 a Subtotal	0	0			9,254,627.
b Total from continuation sheets to Part I		0			0.
c Totals (add lines 3a					
and 3b)		0			9,254,627.
LHA For Paperwork Red	uction Act Notice.	see the Instruc	ctions for Form 990.	Schedule F	(Form 990) 2018

Schedule F	(Form 990) 2018	AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCES	3 04-2103651	
Part II	Grants and Other Ass	istance to Organizat	ions or Entities	Outs	ide the Ur	nited Sta	ates. Complete	if the organization answered "Yes" on Form 990, Part IV, line 15, for a	any
	recipient who received	more than \$5,000. Pa	rt II can be dup	licated	d if additio	nal spac	e is needed.		

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			4					
by the IRS, or for which	n the grantee or coun	sel has provided a sect	ecognized as charities by th ion 501(c)(3) equivalency let	ter				

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method o valuation (book, FMV appraisal, oth
					!		

### AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Schedule F (Form 990) 2018 Part IV | Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign X Yes No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Yes X No Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)

the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To X Yes No Certain Foreign Corporations (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a

qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund X Yes (see Instructions for Form 8621)

Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain X Yes No Foreign Partnerships (see Instructions for Form 8865)

Did the organization have any operations in or related to any boycotting countries during the tax year? // 6 "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)

Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"

Schedule F (Form 990) 2018

Yes X No

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# SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2018

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

AMERICAN ACADEMY OF ARTS AND SCIENCES

Employer identification number 04-2103651

**Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. X First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X 1b reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract X Compensation committee X Compensation survey or study X Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X a Receive a severance payment or change-of-control payment? ..... X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X a The organization? X b Any related organization? 5<sub>b</sub> If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? b Any related organization? X If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2018

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benents	(6)(1)-(0)	reported as deferred on prior Form 990
(1) JONATHAN F. FANTON	(i)	576,481.	0.	0.	27,500.	1,420.	605,401.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	239,269.	0.	0.	24,940.	20,061.	284,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CORY DIAMOND	(i)	175,490.	0.	0.	0.	8,944.	184,434.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PHYLLIS BENDELL	(i)	166,322.	0.	0.	26,775.	19,979.	213,076.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STEVEN DANSBY	(i)	160,814.	0.	0.	16,157.	9,802.	186,773.	0.
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOHN RANDELL	(i)	157,681.	0.	0.	15,810.	1,584.	175,075.	0.
SR. PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ALISON FRANKLIN	(i)	177,083.	0.	0.	11,772.	1,685.	190,540.	0.
CHIEF COMMUNICATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
1	(i)			·				
	(ii)							,
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	(ii)							
1	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
DURING FISCAL YEAR 2019, THERE WERE TRIP TICKETS PURCHASED THAT WERE EITHER
FIRST CLASS OR UPGRADED TO FIRST CLASS FOR THE ACADEMY PRESIDENT. FIRST
CLASS TRAVEL IS ALLOWED UNDER THE POLICIES OF THE ACADEMY AND ALL FIRST
CLASS TRAVEL FOR FISCAL YEAR 2019 MET THE POLICY GUIDELINES.

### SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

#### Supplemental Information on Tax-Exempt Bonds

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

2018
Open to Public Inspection

Employer identification number Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Part I **Bond Issues** SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS (a) Defeased (h) On behalf (i) Pooled (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose of issuer financing No Yes No Yes Yes No MASSACHUSETTS HEALTH AND REFINANCE OF A EDUCATIONAL FACILITIES A 04-2456011 57586ELD1 08/01/09 3,374,212. PRE-EXISTING TAX-X X X B C Part II Proceeds D В C Amount of bonds retired 3,374,212. Amount of bonds legally defeased 33,742. Total proceeds of issue 33,742. Gross proceeds in reserve funds Capitalized interest from proceeds Proceeds in refunding escrows Issuance costs from proceeds Credit enhancement from proceeds Working capital expenditures from proceeds Capital expenditures from proceeds 10 Other spent proceeds 11 Other unspent proceeds 2009 Year of substantial completion Yes No Yes No Yes No Yes No Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, X if issued prior to 2018, a current refunding issue)? Were the bonds issued as part of a refunding issue of taxable bonds (or, if Х issued prior to 2018, an advance refunding issue)? X Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the X final allocation of proceeds?

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

Schedule K (Form 990) 2018

Par	t III   Private Business Use								
		Α			В		С		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?		X						
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		X						
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?								
С	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		.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		.00 %		%		%		%
6			.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								
	of		%		%		%		%
С	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				1 1				
	Regulations sections 1.141-12 and 1.145-2?	X							
Par	t IV Arbitrage								
			Α		В		Ç		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?								
	Rebate not due yet?		X						
	Exception to rebate?		X						
	No rebate due?	X							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed								
3	Is the bond issue a variable rate issue?	X			li				

Part IV Arbitrage (Continued)									
	Α			3	(	С	D		
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No	
hedge with respect to the bond issue?		X							
b Name of provider									
c Term of hedge									
d Was the hedge superintegrated?									
e Was the hedge terminated?									
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X							
<b>b</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?		X							
7 Has the organization established written procedures to monitor the requirements of									
section 148?		X							
Part V Procedures To Undertake Corrective Action									
	Α		E	3	(			)	
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No	
federal tax requirements are timely identified and corrected through the voluntary								1	
closing agreement program if self-remediation isn't available under applicable	l i								
regulations?		X							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions						
SCHEDULE K, PART I, BOND ISSUES:									
(A) ISSUER NAME: MASSACHUSETTS HEALTH AND EDUCATI	ONAL FA	CILITI	ES AUTH	HORITY					
(F) DESCRIPTION OF PURPOSE:	<u> </u>								
REFINANCE OF PRE-EXISTING TAX-EXEMPT BOND ISSUE									
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			M-L						
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## **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

Inspection

Name of the organization

AMERICAN ACADEMY OF ARTS AND SCIENCES

Employer identification number 04-2103651

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DISTINGUISHED SCHOLARS IN EVERY RELEVANT ART AND SCIENCE TO CONDUCT
SERIOUS ANALYSES OF ISSUES OF PRACTICAL CONCERN TO THE NATION. THE
ACADEMY EXAMINES POLICY CHALLENGES AND SCHOLARLY QUESTIONS THAT CANNOT
BE EASILY ADDRESSED BY SCHOLARS OR PROFESSIONS IN ISOLATION.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TEND TO ADVANCE THE INTEREST, HONOR, DIGNITY, AND HAPPINESS OF A FREE,
INDEPENDENT, AND VIRTUOUS PEOPLE." THE ACADEMY CURRENTLY UNDERTAKES A
BROAD ARRAY OF ACTIVITIES IN FIVE PROJECT CATEGORIES: SCIENCE,
ENGINEERING, AND TECHNOLOGY; GLOBAL SECURITY AND INTERNATIONAL AFFAIRS;
EDUCATION AND THE DEVELOPMENT OF KNOWLEDGE; THE HUMANITIES, ARTS, AND
CULTURE; AND AMERICAN INSTITUTIONS, SOCIETY, AND THE PUBLIC GOOD.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
MEMBERSHIP AND ELECTIONS - CONSISTS OF ACTIVITIES RELATED TO THE
MAINTAINING OF THE HONORARY SOCIETY AND ELECTING FELLOWS TO THE
ACADEMY.
EXPENSES \$ 432,815. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
ARCHIVES
EXPENSES \$ 293,907. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
COMMUNICATIONS
EXPENSES \$ 845,117. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

Employer identification number Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 VISITING SCHOLARS EXPENSES \$ 435,179. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 6: THE ACADEMY'S MEMBERSHIP CONSISTS OF FELLOWS, ELECTED FROM CITIZENS OR RESIDENTS OF THE UNITED STATES OF AMERICA, AND INTERNATIONAL 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: FELLOWS IN GOOD STANDING MAY NOMINATE AND VOTE FOR OFFICERS, DIRECTORS, AND COUNCIL MEMBERS. FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS HAVE THE RIGHT TO VOTE ON THE PRESIDENT'S APPOINTMENT BY THE BOARD, AFTER THE FIRST 5 YEAR PERIOD, FOR ANY SUBSEQUENT 5 YEAR PERIODS. FORM 990, PART VI, SECTION B, LINE 11B: 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 IS PROVIDED, REVIEWS AND APPROVES THE FINAL FORM OF THE RETURN BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE ACADEMY ANNUALLY UPDATES ITS CONFLICT OF INTEREST DECLARATIONS OF THE BOARD OF DIRECTORS, OFFICERS, MEMBERS OF A COMMITTEE WITH GOVERNING BOARD-DELEGATED POWERS AND MANAGEMENT STAFF. THE ANNUAL STATEMENTS ARE REVIEWED BY STAFF, AND A REPORT FROM MANAGEMENT IDENTIFYING POTENTIAL Schedule O (Form 990 or 990-EZ) (2018) 832212 10-10-18

261100 1

2018.05050 AMERICAN ACADEMY OF ARTS

Employer identification number Name of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 CONFLICTS THAT MAY REQUIRE FURTHER REVIEW IS PROVIDED TO THE CHAIR OF THE ACADEMY'S AUDIT COMMITTEE, WHO IS RESPONSIBLE FOR REVIEWING THE STATEMENTS AND REFERRING POTENTIAL CONFLICTS TO THE GOVERNING BOARD OR APPROPRIATE COMMITTEE FOR RESOLUTION CONSISTENT WITH THE ACADEMY'S CONFLICT OF INTEREST POLICY. FORM 990, PART VI, SECTION B, LINE 15: THE ACADEMY'S COMPENSATION COMMITTEE CONSISTS OF FIVE MEMBERS OF THE BOARD OF DIRECTORS INCLUDING THE CHAIR, THE TWO VICE-CHAIRS AND THE TREASURER. THE COMMITTEE MEETS ANNUALLY TO REVIEW AND DETERMINE THE SALARY OF THE PRESIDENT AND TO REVIEW THE SALARIES OF OTHER OFFICERS. THE COMPENSATION SETTING PROCEDURES USED DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY OUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. THERE WAS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING FOR DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENTS. FORM 990, PART VI, SECTION C, LINE 19: THE ACADEMY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: CONSULTING: PROGRAM SERVICE EXPENSES 748,531. MANAGEMENT AND GENERAL EXPENSES 214,636. FUNDRAISING EXPENSES 92,726. TOTAL EXPENSES 1,055,893.

240.

FUNDRAISING EXPENSES

MANAGEMENT AND GENERAL EXPENSES

## SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Name of	the organization  AMERICAN ACADE	MY OF ARTS AND SO	CIENCES			Employer ident	ification n	umber
Part I	Identification of Disregarded Entities. Complete	te if the organization answered "Y	es" on Form 990, Part IV, line 33	3.				
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	(e) eme End-of-year	assets Direc	(f) t controlling entity	g
Part II	Identification of Related Tax-Exempt Organiza organizations during the tax year.	tions. Complete if the organization	on answered "Yes" on Form 990	), Part IV, line 34, b	pecause it had one o	or more related tax-e	cempt	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
					501(c)(3))		Yes	No

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.

	T						Т		T	T	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General o	Percentage ownership
of related organization		(state or	entity	(related, unrelated,	income	end-of-year	alloca	ations?	amount in box	managing partner?	ownership
		foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Voc No	1
		Courts y)		300110113 0 12 0 1 1)			165	NO	1000)	Tesive	
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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	512( cont	(i) ction (b)(13) trolled tity?
		country)						Yes	No
NORTON'S WOODS, INC 04-3388917			AMERICAN				1		
136 IRVING STREET			ACADEMY OF						1
CAMBRIDGE, MA 02138	EVENT SERVICES	MA	ARTS AND	C CORP	357,249.	0.	100%	X	
PERMANENT SCIENCE FUND TR U/DECL -			AMERICAN						
04-6091592, BNY MELLON, NA - P.O. BOX 185,	7		ACADEMY OF						
PITTSBURGH, PA 15230-0185	TRUST	MA	ARTS AND	TRUST	120,000.	0.	100%	X	
	-								
	-								
-	-								

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

						_	T
	: 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						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled en	tity			1a		X
b	Gift, grant, or capital contribution to related organization(s)				1b		X
С	Gift, grant, or capital contribution from related organization(s)				1c		X
	Loans or loan guarantees to or for related organization(s)				1d		X
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f		X
g	Sale of assets to related organization(s)		•••••		1g		X
h	Purchase of assets from related organization(s)			***************************************	1h		X
Ĺ	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)				1k		Х
1	Performance of services or membership or fundraising solicitations for related or	1 11 (1					X
m	Performance of services or membership or fundraising solicitations by related org	ganization(s)			1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	ation(s)			1n	X	
							Х
р	Reimbursement paid to related organization(s) for expenses				1p		X
q	Reimbursement paid by related organization(s) for expenses				1q		Х
r	Other transfer of cash or property to related organization(s)				1r	Х	
	Other transfer of cash or property from related organization(s)				1s		Х
	f the answer to any of the above is "Yes," see the instructions for information on						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amoun	t involved		
1) N	ORTON'S WOODS, INC.	N	659,114.	FAIR MARKET VALUE		-	
2) P	ERMANENT SCIENCE FUND TR U/DECL	S	120,000.	FAIR MARKET VALUE			
3)							
4)							
5)							
6)							
/							

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

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

(a) Name, address, and EiN of entity	(b) Primary activity	(c)	(e) Are all partners se 501(c)(3) orgs.?  Yes No	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	(j) General or managing partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2018 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 5 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
NAME OF RELATED ORGANIZATION:
PERMANENT SCIENCE FUND TR U/DECL
DIRECT CONTROLLING ENTITY: AMERICAN ACADEMY OF ARTS AND SCIENCES