	nn	n		nization Exempt F				OMB No. 1545-0047
Form	991	U	Under section 501(c), 527, or 494		dation	5) <b>ZUZU</b>		
Departme	nt of the	Treasury		ecurity numbers on this form a				Open to Public
Internal Re	evenue S	ervice		//Form990 for instructions and TUL 1, 2020 and e			021	Inspection
B Check	k if		organization	1011 1, 2020 and	anding U	D Employer i		ation number
Ad	Idress	AMED	ICAN ACADEMY OF AR	MC AND COTENCES				
Na	ange ime ange		ICAN ACADEMI OF AR	04-21	0365	51		
Init			and street (or P.O. box if mail is not di	E Telephone				
Fin	Contraction of the second		IRVING STREET	617-5		5000		
<b>ter</b> ate	min- ed	City or to	own, state or province, country, and	G Gross receipts	5	47,419,173.		
101	nended wrn		RIDGE, MA 02138	H(a) is this a g				
	nding		nd address of principal officer: DAV	ID W. OXTOBY				? Yes X No cluded? Yes No
I Tax-	exemt			) (insert no.) 4947(a)(1) o	or 527			list. See instructions
			AMACAD.ORG			H(c) Group ex		
				ssociation 🔲 Other 🕨	L Year	of formation: 17	80 M	State of legal domicile; MA
Part		Immary						
. 1			e the organization's mission or mos					F ARTS AND
Governance			S IS AN HONORARY M					
u u u			if the organization discount of the organi					ets. 18
80 90 4			ing members of the governing body ependent voting members of the go					17
			of individuals employed in calendar					68
Activities &			of volunteers (estimate if necessary)					700
- <u>}</u>			d business revenue from Part VIII, ca					1,545.
<			business taxable income from Form				7b	0.
						Prior Year		Current Year
8 ن	Cor	ntributions	and grants (Part VIII, line 1h)			13,226,4		22,283,692.
-∎ 9		-				852,7		751,776.
Bevenue 10			come (Part VIII, column (A), lines 3, 4			2,372,3		9,224,057.
			(Part VIII, column (A), lines 5, 6d, 8d			16,451,5	0.	0. 32,259,525.
- 12			<u>- add lines 8 through 11 (must equa</u> nilar amounts paid (Part IX, column			10,451,5	0.	0.
13			o or for members (Part IX, column (		Countries .		0.	0.
40			compensation, employee benefits		6,684,8	1	7,114,328.	
22.1			undraising fees (Part IX, column (A),		0.	0.		
per			ng expenses (Part IX, column (D), lir	LO.	121 6-5			
<u>ش</u> 17			es (Part IX, column (A), lines 11a-11d		6,059,0	38.	4,723,374.	
18	3 Tot	al expense:	s. Add lines 13-17 (must equal Part	IX, column (A), line 25)		12,743,9		11,837,702.
. 19	Rev	enue less e	expenses. Subtract line 18 from line	12		3,707,6		20,421,823.
Assets or Assets					Bé	ginning of Gurren		End of Year
tage 20						98,109,8		130,163,761.
<u></u>			(Part X, line 26)		3,146,7		3,328,008. 126,835,753.	
Part		ignature	iund balances. Subtract line 21 from Block	1 line 20	******	94,903,0	90.1	120,033,733.
and the second second	and the second s	0	declare that I have examined this return	including accompanying schedules	and statem	ents and to the be	st of my	knowledge and belief, it is
			Declaration of preparer (other than offic					initialities and consi, it is
	IN	Marh		- A.		May 12		
Sign		Signature	e of officer			Date		
Here				PERATING OFFICER				
-	1	Type or p	rint name and title	1				
			parer's name		Check 🗌	PTIN		
Paid	-		L. BOOTH	4/08/22				
Prepare			CBIZ MHM, LLC	<b>可</b> 反 <i>仰</i>	-	Firm's		26-3753134
Use Only	y   Fin	m's address	500 BOYLSTON STR BOSTON, MA 02116			Dhore	61	7-761-0600
Mayth		lieques this	return with the preparer shown abo			Phone	10.0 L	X Yes No
032001 1			or Paperwork Reduction Act Noti		ns.			Form 990 (2020)

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2020) AMERICAN ACADEMY OF ARTS AND SCIENCES	04-2103651	Page 2
Part III Statement of Program Service Accomplishments			
			. X
1			
		HICH WILLON M	
~		Yes	X No
з		Yes	X No
-			
4		measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, ar	nd
	revenue, if any, for each program service reported.		
4a			)
			ST .
	STUDIES HELP PIONEER NEW FIELDS THAT TRANSCEND DISCIPLIN	ARY BOUNDARL	65.
4b	(Code:) (Expenses \$1,058,892. including grants of \$) (Reve		
			s,
		AS THE RESEA	RCH
	AND WRITINGS OF ACADEMY MEMBERS.		
			_
4c			,
			TO .
			HER
		MESS, PUBLIC	
	AFFAIRS, AND PHILANTHROPY.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 1,808,491 including grants of \$ ) (Revenue \$	)	
4 <u>e</u>			
_		Form 9	<b>990 (</b> 2020)
032002			
	2		

Form	990	(2020)	
_			_

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? /f "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,		2	
	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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	NT COL
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X	36.60		
	as applicable.	219.23		-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>	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		77	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	115	Х	
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		77	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	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			v
	Schedule D, Parts XI and XII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?	101	v	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	X	X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	-	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	Δ
D	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			
		14b	х	
16	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	42	
15		15		x
16	torsign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		-1
10	• • • • • • • • • • • • • • • • • • • •	16		x
47	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,	10		
17		17		x
18	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- "		
10		18		X
10	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? <i>If</i> "Yes,"	10		**
19		19		x
20a	complete Schedule G, Part III	20a		X
zua b	THE REPORT OF THE STATE OF THE	20b		_
21	It "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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 12, if "Ves." complete Schedule I, Parts I and II	21		X

3

032003 12-23-20

Form 990 (2020)

Form 990 (2020)	AMERICAN			ARTS	AND	SCIENCES	
Part IV Checklist of R	equired Sched	iules (continue	ed)				

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 2? // "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	23	х	
<b>7</b> 4 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	2.5		10
240	last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>			1
	Schedule K. If "No," go to line 25a	24a	x	
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	-		
	any tax-exempt bonds?	24c		x
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
•	transaction with a disqualified person during the year? // "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? if "Yes," complete			
	Schedule L, Part I	25b	_	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	-	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	1000070	X
26	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	11.2	1 5	219
	instructions, for applicable filing thresholds, conditions, and exceptions):	5	C. A.	1
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? //	00-		v
	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	280		- <u>A</u>
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i>	28c		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	2.5		
30	contributions? If "Yes, " complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		-
<b>U</b>	Schedule N, Part II	32	1.11	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I	33		X
34	Was the organization ralated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•	Part V, line 1	34	x	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
ь	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 5D1(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	1
	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			1
	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	<u> </u>
Pa				-
	Check if Schedule O contains a response or note to any line in this Part V		1	
		-	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 32 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b		1.560	1.200
	Enter the humber of 1 offits with dated in the 12. Enter-offit not applicable	1	173	-
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4	x	CAULS.
	(gambling) winnings to prize winners?	1c		(2020)
032004	12-23-20	FOIT	, 550	(2020)

Form	990 (2020) AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103	651	P	age 5					
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		_	_					
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			R					
	filed for the calendar year ending with or within the year covered by this return	l. Taxi yaki		E.F.					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	-					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	14					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1.1							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Designed	X					
b	If "Yes," enter the name of the foreign country		100	ter i					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		1						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X					
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c	-	X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1	1.1.1						
	any contributions that were not tax deductible as charitable contributions?	6a	-	X					
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b	-	1 21					
7	Organizations that may receive deductible contributions under section 170(c).		a start	17					
	Did the 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					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	-					
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	4-							
	to file Form 8282?	7c	-	X					
d	If "Yes," indicate the number of Forms 8282 filed during the year7d	100	1.	77					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X					
f									
9	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	King and	200					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1014	0000	-					
	sponsoring organization have excess business holdings at any time during the year?	8	10000	( and the second					
9	Sponsoring organizations maintaining donor advised funds.	of Long	4-1						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	1000						
10	Section 501(c)(7) organizations. Enter:	N. W.	10	The second					
	Initiation fees and capital contributions included on Part VIII, line 12	1-1	n -	1000					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	$\left\{ -1 \right\}$	12	· ·····					
11	Section 501(c)(12) organizations. Enter:	NTEX.							
	Gross income from members or shareholders 11a								
D	Gross income from other sources (Do not net amounts due or paid to other sources against	20	See. 9						
10-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Sec. 1990. Co.	1 200					
		128	into i	CATE					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	14		(Friday)					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	1112	-					
а	Is the organization licensed to issue qualified health plans in more than one state?	138	1000	1000					
ι.	•	un.	12.1	(a 0					
a	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		1. 11	1.15					
-			Stero.						
	Enter the amount of reserves on hand	14a	-	X					
14a		14a	-	1 11					
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.40	-	-					
15		15		x					
	excess parachute payment(s) during the year?	15	WHITEH!						
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	1	X					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10		12					
_	in real completer of the state	1	1	1					

Form 990 (2020)

032005 12-23-20

Form 990 (2020)
-----------------

### AMERICAN ACADEMY OF ARTS AND SCIENCES

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

	Check if Schedule O contains a response or note to any line in this Part VI						X					
Sec	tion A. Governing Body and Management											
		4	1			Yes	No					
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	18			10					
	If there are material differences in voting rights among members of the governing body, or if the governing					1982	1.0					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				-571	23	( ÷. )					
ь												
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?	**********		. 1	2	223	X					
3	Did the organization delegate control over management duties customarily performed by or under th	e direct	t supervision			1	1					
	of officers, directors, 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 wa:	s filed?		4		X					
5												
6	Did the organization have members or stockholders?											
7a												
	more members of the governing body?			. I	7a	X						
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	lders, or		2.11							
	persons other than the governing body?			.	7b	X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye						1					
а	The governing body?			. [	8a	Х						
b	Each committee with authority to act on behalf of the governing body?				8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			1								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9	_	x					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re											
-	Chornes (This Section B requests information about policies not required by the Internal Hevenue Code.)											
10a	Did the organization have local chapters, branches, or alfiliates?			ſ	10a		No					
5	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 bod				11a	Х						
	<ul> <li>b Describe in Schedule O the process, if any, used by the organization to review this Form 990.</li> </ul>											
12a												
Ь	the second s											
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? // *				12b	X	-					
	in Schedule O how this was done				12c	x						
13	Did the orgenization have e written whistleblower policy?				13	X						
					14	X	-					
14	Did the organization have e written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and epprove				17		500					
15			dependent		A	1	P 1					
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				15a	X						
a	The organization's CEO, Executive Director, or top management official				15b	X						
D	Other officers or key employees of the organization				100	**	1000					
46-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	mantin	ith a			1000						
108	Did the organization invest in, contribute essets to, or participate in a joint venture or similar arrange				16-	-	x					
	taxable entity during the year?				16a	1						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in initiative terms to explanate the grant term of the grant terms of terms of the grant terms of terms				- 11							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga				461	1 and 1	-					
Con	exempt status with respect to such arrangements?			æ	16b		1					
	tion C. Disclosure	-		_		-						
17	List the states with which a copy of this Form 990 is required to be filed MA	1.000		1001			h / a					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	ina 990	F1 (Section 501(c	)(3)s	oniy)	avana	lDi <del>C</del>					
	for public inspection. Indicate how you made these available. Check all that apply.		:									
	X Own website X Another's website X Upon request Other (explai				-							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or	onflict o	of interest policy,	and	tinano	cial						
	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 bo	oks an	d records 🕨 🚬	_			_					
	MARK ROBINSON - 617-576-5023			-								
_	136 IRVING STREET, CAMBRIDGE, MA 02138	_		_		000						
032008	5 12-23-20				Form	1990	(2020)					
	6											

2020.05092 AMERICAN ACADEMY OF ARTS 261100\_1

		OF ARTS AND		04-21036	51 Page 7
Part VII Compensation of Officers,	Directors, T	rustees, Key Emplo	oyees, Highest Co	mpensated	
Employees, and Independe	nt Contracte	ors			
Check if Schedule O contains a resp	onse or note to	any line in this Part VII	_,,		
Section A. Officers, Directors, Trustees, Key	Employees, a	nd Highest Compensate	ad Employees		
1a Complete this table for all persons required				vith or within the organiz	ation's tax year.
• List all of the organization's current office Enter -0- in columns (D), (E), and (F) if no competence			ls or organizations), reg	ardless of amount of co	mpensation.
List all of the organization's current key e	mployees, if any	. See instructions for de	finition of "key employe	e."	
• List the organization's five current highest able compensation (Box 5 of Form W-2 and/or E	compensated e lox 7 of Form 10	mployees (other than an 199-MISC) of more than \$	officer, director, trustee 100,000 from the organ	e, or key employee) who nization and any related	received report- organizations.
• List all of the organization's former officer reportable compensation from the organization			ated employees who re	ceived more than \$100,	000 of
• List all of the organization's former direct more than \$10,000 of reportable compensation	ors or trustees from the organia	that received, in the cap ation and any related or	pacity as a former direct ganizations.	or or trustee of the orga	nization,
See instructions for the order in which to list the	persons above				
Check this box if neither the organization	nor any related	organization compensate	ad any current officer, d	irector, or trustee.	
(A)	(B)	(C)	(ח)	(E)	(F)

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not ch	Posi	tion nore	then d	one	Reportable	Reportable	Estimated
	hours per	box,	unless person is both an cer and a director/trustee)				i an	compensation	compensation	amount of
	week	<u> </u>			ecio	70.05		from	from related	other
	(list any	irecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for related	e or d	59 19			sated		(W-2/1099-MISC)	(44-271033-141130)	organization
	organizations	ruste	al trus		yee	uad uu		((12,,000,000))		and related
	below	Individual trustee or director	lastitutional trustee	F	key employee	Set CO	9			organizations
	line)	indivi	lastil	Officer	Key e	Highest compensated employea	Former			
(1) DAVID W. OXTOBY	40.00									-
PRESIDENT		X		Х				554,385.	0.	43,499.
(2) MARK ROBINSON	40.00						1			
CHIEF OPERATING OFFICER				Х				266,292.	0.	<u>48,685.</u>
(3) GINGER SAARIAHO	40.00	[								
CHIEF ADVANCEMENT OFFICER		]				Х		233,086.	<u>0.</u>	45,726.
(4) TANIA MUNZ	40.00									
CHIEF PROGRAMS OFFICER		]				X		209,814.	0.	20,407.
(5) PHYLLIS BENDELL	40.00	]								
DIR. OF PUBLISHING						X		17 <u>8,414</u> .	0.	<u>50,160.</u>
(6) ALISON FRANKLIN	40.00									
CHIEF COMMUNICATION OFFICER						X		<u>194,564.</u>	0.	<u>19,898.</u>
(7) LAURIE MCDONOUGH	40.00									
DIR. OF MEMBER ENGAGEMENT						X		153,875.	0.	16,207.
(8) NANCY C. ANDREWS	4.00					ĺ	1		_	
CHAIR OF THE BOARD		x		Х		<u> </u>	ļ	0.	0.	0.
(9) DIANE P. WOOD	1.00							]		
VICE CHAIR OF BOARD		X		х				0.	0.	0.
(10) STEPHEN B. HEINTZ	1.00									
VICE CHAIR OF BOARD	_	X		X		<b> </b>	<u> </u>	0.	0.	0.
(11) GERALDINE L. RICHMOND	1.00									
SECRETARY		X		X		<u> </u>		0.	0.	0.
(12) CARL H. PFORZHEIMER III	1.00	[								
TREASURER		X		X	ļ			0.	0.	0.
(13) KWAME ANTHONY APPIAH	1.00									
MEMBER		X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(14) LOUSIE H. BRYSON	1.00	Į					Į			
MEMBER		X						0.	0.	<u>0.</u>
(15) DAVID M. RUBENSTEIN	1.00	l								
MEMBER		X	<u> </u>	ļ		<u> </u>	<u> </u>	0.	0.	0.
(16) NANNERL O. KEOHANE		4								
MEMBER		X			<u> </u>	┨	┢	0.	0.	0.
(17) DEBORAH F. RUTTER	1.00	1								
MEMBER		X						0.	0.	0.
032007 12-23-20					-					Form 990 (2020)

7

Form 990 (2020) AMERICAN	ACADEMY	C	)F	AR	TS	5 A	ND	SCIENCES	04-2103	3651	Page 8
Part VII Section A. Officers, Directors, Trus	stees, Key Emp	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)		
(A) Name and title	(B) (C) Average hours per week officer and a director/trustee)						an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estima amour othe	ated nt of
	(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)	compen from organiz and rel organiza	the ation ated
(18) JEANNETTE M. WING MEMBER	1.00	x						0.	0.		0.
(19) NATASHA TRETHEWEY MEMBER	1.00	x						0.	0.		0.
(20) PAULINE YU MEMBER	1.00	x						0.	0.		0.
(21) JOHN MARK HANSEN MEMBER	1.00	x						0.	0.		0.
(22) CHERRY A. MURRAY MEMBER	1.00	x						0.	0.		0.
(23) SHIRLEY M. TILGHMAN MEMBER	1.00	x						0.	0.		0.
(24) LARRY JAY SHAPIRO MEMBER	1.00	X						0.	0.		0.
	1										
1b Subtotal c Total from continuation sheets to Part V								1,790,430.	0.		0.
<ul><li>d Total (add lines 1b and 1c)</li><li>2 Total number of individuals (including but in</li></ul>							> re	1,790,430. eceived more than \$100,	0 . 000 of reportable	244,	
compensation from the organization			_	-	-					Ye	19 s No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for										3	x
4 For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab	le co	ompe	ensat	tion	n and	oth	ner compensation from t	he organization	4 X	
5 Did any person listed on line 1a receive or rendered to the organization? <i>If "Yes," contract on the organization</i>	accrue comper	nsati	ion fi	romi	any	unn	elate	ed organization or individ	dual for services	5	x
Section B. Independent Contractors			-				-				_
1 Complete this table for your five highest control the organization. Report compensation for											
(A) Name and busines	seddress							(B) Description of s	services	(C) Compensa	tion
CHAPMAN CONSTRUCTION 84 WINCHESTER ST., NEWTO	N, MA 02	46	1				_	CONSTRUCTION	/DESIGN	557,	092.
IDEALIST CONSULTING 4076 N MISSISSIPPI AVE, PORTLAND, OR 97227							INFORMATION TECHNOLOGY		503,	835.	
SHIELD GEO SERVICES 2003, 20/F, TOWER 5, HON	G KONG,	CH	IIN	A	_			CONTRACT EMP	LOYMENT	312,	873.
KIRKWOOD PRINTING COMP 904 MAIN STREET, WILMING	FON, MA	01	.88	7	_	_		PRINTING SER DOCUMENT	VICES	267,	354.
NORTHEAST DOCUMENTS 100 BRICKSTONE SQUARE, A							4	PRESERVATION		227,	070.
2 Total number of independent contractors \$100,000 of compensation from the organ	second data and the second	ot III	mite		14		sied	abovej who received m	ore than	Form 99	0 /00001
										LOLUI 23	√ (2020)

032008 12-23-20

10220408 143399 261100

		(2020) AMERICAN ACADI	EMY OF AR	TS AND SCI	ENCES	04-2103	651 Page 9
Par	τγι	III Statement of Revenue Check if Schedule O contains a response of	or note to any line	in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
2 5	1 a	a Federated campaigns1a		10 1 10 Ko	The of the of	1	
ran		b Membership dues 1b	939,651.	alles sealing	13- 15 al		
5 M		c Fundraising events1c		a the second		121-2-23	A TRANS
Contributions, Gifts, Grants and Other Similar Amounts	c	d Related organizations 1d			A Standing	2 3 2 3 3 3	1 Merel
inilian ini	e	e Government grants (contributions)			- Alter - State		and the state
tion Br.S	f	f All other contributions, gifts, grants, and			Stand and the	12-244 半台桥	
ig d		similar amounts not included above 1f	21,344,041.		Sec. 3 2	JA' AND A	
ont o		g Noncash contributions included in lines 1a-1f	-	22,283,692.	2		July 1 and 1
0 m	1	h Total. Add lines 1a-1f	Business Code	22,283,032.			
	2 :	a CATERING OPERATIONS	900099	602,942.	602,942.		1 - 2 - 1 - 1
vice		SALES PUBLICATIONS	511120	148,834.	148,834.		
Ser		c					
m		d					
Program Service Revenue	é	e					
ě	1	All other program service revenue					
		g Total. Add lines 2a-2f		751,776.	F - 12 - 12 - 3	Files II II II	A second second
	3	Investment income (including dividends, interes other similar amounts)		444,841.		1,545.	443,296
	4	Income from investment of tax-exempt bond pr					
	5	Royalties	(ii) Personal		and the second street s		
	~		(ii) r ersonar		1. #1. 2. A.S.	1	1. 200
- 1		a Gross rents 6a b Less: rental expenses6b			A W SHEET	10 m 1	Part Indian I
		c Rental income or (loss) 6c			A CAL	1-1-2 1 M	1 12 3
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				E MAR MILLE
		assets other than inventory 7a 23,938,864.				State State	the second second
	t	b Less: cost or other basis			100-1	4.202	Contraction of the second
e		and sales expenses			P & Wilson 1 -		WE TE WALL
Revenue	(	c Gain or (loss) 7c 8,779,216.		F10	Varia la como		100
æ		d Net gain or (loss)	<b>&gt;</b>	8,779,216.	1		8,779,216
Other	8 8	a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See			and the second		
		Part IV, line 188a			1	Carlor Territ	Piter I State
		b Less: direct expenses				1	LEUV, L'ST
		c Net income or (loss) from fundraising events	▶				
		a Gross income from garning activities. See				1.27 - 17	Contraction of
		Part IV, line 19 9a		253171	The Comercia	The Ast No.	C Stray
	1	b Less: direct expenses 9b				1.	
	(	c Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns			S07 00-08-18		I.S. Stark
		and allowances 10a			and the second	19:	
		b Less: cost of goods sold10b			E BAN - P - DO'T-		
-		c Net income or (loss) from sales of inventory			Manager 1 and 1 and 1	-	
9			Business Code		dance out and the second		
ueon	11 :						
scellaneo Revenue.		b					
Miscellaneous Revenue		cd All other revenue					
Σ		e Total, Add lines 11a-11d				The Aller	
	12	Total revenue. See instructions		32,259,525.	751,776.	1,545.	9,222,512
032009							Form 990 (202)

## Form 990 (2020) AMERICAN ACADEMY OF ARTS AND SCIENCES Part IX Statement of Functional Expenses

04-2103651 Page 10

6b,	(A) [			
	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
rganizations				
ine 21 🛄				
stic			and the second	
n			111 - A -	
			1000 - 1000 - W	
	908 006	236 170	629 339	42,497
	900,000.	230,170+	045,555.	44,457
	4 827,488,	3,684,436,	349,431,	793,621
	1,01,71001			
	483.218.	329.895.	71.340.	81,983
				61,324
				62,767
		1		
	5,922.	4,370.	765.	787
	58,500.	43,173.	7,558.	7,769
rt IV, line 17			al in the	
	17,187.	11,663.	2,042.	3,482
of line 25,				
s on Sch O.)	2,007,272.	1,709,561.	131,771.	165,940
		0		
				18 575
	345,497.	263,889.	34,043.	47,565
	100 000	156 600	00.000	00.007
			20,263.	20,827
	254.	254.		
	70 420	70 401	12	14
				6,349
	47,004.	55,275.	0,170.	0,545
	994 581	758 691	98 169	137,721
		67,989.		10,188
	00,0051	0775051		1
te 24e. If column (A)			Person La K	
	247.891.	227.460.	320.	20,111
		167,514.	12,767.	41,221
	169,107.			20,693
	118,006.	71,988.	7,503.	38,515
	120,536.	102,010.	9,560.	8,966
rough 24e 1		8,735,512.	1,529,850.	1,572,340
organization				
combined				
icitation.				
	extic in and foreign 16	estic n and foreign 16 ectors, 908,006. ualified (1)) and 3) 4,827,488. include 483,218. 479,340. 416,276. 5,922. 58,500. 58,500. 717,187. of line 25, s on Sch 0.) 13,101. 345,497. 197,697. 254. expenses officials ings 70,428. 47,804. 197,697. 254. expenses officials ings 70,428. 47,804. 197,697. 254. expenses officials ings 70,428. 47,804. 994,581. 88,089. rered te 24e. If column (A) te 0.) PLONS VG 247,891. VG 221,502. 169,107. 118,006. 120,536. trough 24e 11,837,702.	stic n and foreign 16 ectors, 908,006. 236,170. ualified (1)) and 3) 4,827,488. 3,684,436. include ibutions) 483,218. 329,895. 479,340. 359,950. 416,276. 299,742. 5,922. 4,370. 58,500. 43,173. 17,187. 11,663. of line 25, s on Sch O.) 2,007,272. 1,709,561. 13,101. 3,506. 345,497. 263,889. 197,697. 156,607. 254. 254. 254. 254. expenses officials 70,428. 70,401. 47,804. 35,279. 416,276. 299. 197,697. 156,607. 254. 254. 254. 254. 254. 254. 254. 254. 197,697. 156,607. 254. 254. 254. 254. 254. 254. 254. 254. 254. 254. 197,697. 156,607. 254. 254. 254. 254. 255. 25. 25. 25. 25. 25. 25. 25. 25. 25.	estic n and toreign 16 16 17 17 17 187 11 163 20 17 1340. 16 17 17 187 11 163 20 17 156 107 20 263 10 10 10 10 10 10 10 10 10 10 10 10 10

10

032010 12-23-20

Form 990 (2020)

Form 990 (2020)
Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
-	-		2,412,072.	1	6,125,052
	1	Cash · non-interest-bearing	2,834,825.	2	3,160,735
	2	Savings and temporary cash investments	7,601,569.		14,567,324
	3	Pledges and grants receivable, net		3	1,040,762
	4	Accounts receivable, net	34,683.	4	1,040,762
	5	Loans and other receivables from any current or former officer, director,	1 2 1		
		trustee, key employee, creator or founder, substantial contributor, or 35%			
1		controlled entity or family member of any of these persons		5	The second second second
	6	Loans and other receivables from other disqualified persons (as defined	2.11		1000
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net	11 700	7	10.001
	8	Inventories for sale or use	11,709.	8	12,301
	9	Prepaid expenses and deferred charges	131,667.	9	365,823
	10a	Land, buildings, and equipment: cost or other		1	14
		basis. Complete Part VI of Schedule D 10a 23, 413, 985.	Mar Start	246	And a state
	ь	Less: accumulated depreciation 10b 12,641,347.	10,883,155.		
	11	Investments - publicly traded securities	37,218,626.	11	52,958,667
	12	Investments - other securities. See Part IV, line 11	24,655,778.	12	27,587,777
	13	Investments - program-related. See Part IV, line 11	the Contract of the	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	12,325,745.	15	13,572,682
1	16	Total assets. Add lines 1 through 15 (must equal line 33)	98,109,829.	16	130,163,761
1	17	Accounts payable and accrued expenses	847,681.	17	1,165,236
	18	Grants payable		18	
н	19	Deferred revenue		19	
1	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,	A STORE AND A	1000	W. DEPENDENT CO
		trustee, key employee, creator or founder, substantial contributor, or 35%		1	121112 25 300
		controlled entity or family member of any of these persons	and a first of the local data and the local data an	22	
	23	Secured mortgages and notes payable to unrelated third parties	2,299,052.	23	2,162,772
4	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	20	parties, and other liabilities not included on lines 17-24). Complete Part X		1	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	3,146,733.	26	3,328,008
+	20	Organizations that follow FASB ASC 958, check here  X	English and a start of the		
		and complete lines 27, 28, 32, and 33.			
	07	Net assets without donor restrictions	33,717,682.	27	39,415,711
	27		61,245,414.	28	87,420,042
	28	Net assels with donor restrictions	01,210,111	20	0171207011
		Organizations that do not follow FASB ASC 958, check here		1) Tra	AVE - I SPA
	00	and complete lines 29 through 33. Conited stock or text principal, or surrout funds	and the second second second	29	1. <u>1.</u> - 1 1 1 1 1
	29	Capital stock or trust principal, or current funds		30	
	30	Paid in or capital surplus, or land, building, or equipment fund		31	
	31	Retained earnings, endowment, accumulated income, or other funds	94,963,096.	31	126,835,753
1	32	Total net assets or fund balances	98,109,829.		130,163,761
	33	Total liabilities and net assets/fund balances	30,103,049.	33	Form <b>990</b> (20

032011 12-23-20

Form	990 (2020) AMERICAN ACADEMY OF ARTS AND SCIENCES	04-2	2103651	Pag	e 12
Pa	t XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				X
			32,259	5	) E
1	Total revenue (must equal Part VIII, column (A), line 12)	1			
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,837		
Э	Revenue less expenses. Subtract line 2 from line 1	3	20,421		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	94,963		
5	Net unrealized gains (losses) on investments	5	10,962	4, II	./.
6	Donated services and use of facilities	6			
7	Investment expenses	7		_	
8	Prior period adjustments	8		-	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	488	3,71	17.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	126,835	5,75	53.
Pa	t XII Financial Statements and Reporting			1	_
	Check if Schedule O contains a response or note to any line in this Part XII	******			
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accruai C Other			1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Scheduk	€O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	( _ = - ) ·	1 21	- 1
	separate basis, consolidated basis, or both:		1 2 11	200	
	Separate basis Consolideted basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by en independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa			1	10
	consolideted basis, or both:		100	г .	
	Separate basis X Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2e or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audît.			
Ū	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc			Sec.	-
20	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S				
Jd	Act and OMB Circular A-133?		3a		x
F	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	uired audit			
b	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		ЗЬ		
_	or addits, explain why on ocheodie O and describe any steps taken to undergo such addits			000	

Form 990 (2020)

032012 12-23-20

SCHEDULE A (Form 990 or 990-EZ)		Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section							
Department of the Treasury Internal Revenue Service		I947(a)(1) nonexempt cha ► Attach to Form 990 or F jov/Form990 for instructio	orm 990-	EZ.	oformation.	Open to Public Inspection			
Name of the organization	AMERICAN ACAD				Employe	r identification number			
Part I Reason for	r Public Charity Status	<ul> <li>(All organizations must c</li> </ul>	omplete t	nis part.) S	See instructions.				
	ivate foundation because it is								
1 🔲 A church, conve	ntion of churches, or associa	tion of churches described	in sectio	on 170(b)(	1)(A)(i).				
2 A school descril	ped in section 170(b)(1)(A)(ii)	, (Attach Schedule E (Form	1 990 or 9	90-EZ).)					
	cooperative hospital service or				ið.				
	rch organization operated in c	÷			•	r the hospital's name,			
city, and state:		•							
5 An organization	operated for the benefit of a d	college or university owned	or operat	ed by a go	overnmental unit descrit	bed in			
section 170(b)	(1)(A)(iv), (Complete Part II.)								
6 A federal, state,	or local government or govern	nmental unit described in	section 1	70 <b>(b)(1)(</b> A)	(v).	•			
7 X An organization	that normally receives a subs	tantial part of its support fr	om a gove	emmental	unit or from the general	public described in			
section 170(b)(	1)(A)(vi). (Complete Part II.)		_		_				
8 A community tr	ust described in section 170(	b)(1)(A)(vi). (Complete Par	t (I.)						
	esearch organization describe			ed in conju	unction with a land-gran	t college			
	a non-land-grant college of ag								
university:		, ,							
10 An organization	that normally receives (1) mor	re than 33 1/3% of its supp	ort from c	ontributio	ns, membership fees, a	nd gross receipts from			
activities related	I to its exempt functions, subj	ect to certain exceptions; a	and (2) no	more than	33 1/3% of its support	from gross investment			
income and unr	elated business taxable incorr	ne (less section 511 tax) fro	m busines	sses acqui	red by the organization	after June 30, 1975.			
See section 50	9(a)(2). (Complete Part III.)								
11 An organization	organized and operated exclu	usively to test for public sat	iety. See	section 5	09(a)(4).				
12 An organization	organized and operated exclu	usively for the benefit of, to	perform t	he functio	ns of, or to carry out th	e purposes of one or			
-	ported organizations descri	•			-				
	h 12d that describes the type								
a 🔄 Type I. A sup	porting organization operated	, supervised, or controlled	by its sup	ported org	anization(s), typically by	/ giving			
	organization(s) the power to	•		-					
	You must complete Part IV,								
b 🔲 Type II. A sup	porting organization supervis	ed or controlled in connect	ion with it	s supporte	ed organization(s), by ha	wing			
control or mar	agement of the supporting of	rganization vested in the sa	ame perso	ns that co	ntrol or manage the sup	ported			
	). You must complete Part I	-	•						
	ionally integrated. A support		ín connec	tion with, a	and functionally integra	ted with,			
its supported	organization(s) (see instruction	ns). You must complete I	Part IV, Se	ections A,	D, and E.				
	unctionally integrated. A su					ization(s)			
that is not fun	ctionally integrated. The organ	nization generally must sat	isfy a distr	ibution rea	puirement and an attent	iveness			
	see instructions). You must c								
	x if the organization received	-							
	tegrated, or Type III non-funct				51				
f Enter the number of a	supported organizations								
	information about the support					a			
(i) Name of supporte		(iii) Type of organization	in your povern	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other			
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
						1			
						1			
				1		-			
	Contraction of the			1					
					Sec. Sec.				
Total	(11 C C C C C C C C C C C C C C C C C C		-			100 million			

#### Schedule A (Form 990 or 990-EZ) 2020 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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	16624043.	13617893.	8064889.	13226443.	22283692.	73816960.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
з	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge			( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			
4	Total, Add lines 1 through 3	16624043.	13617893.	8064889.	13226443.	22283692.	73816960.
	The portion of total contributions	201		in the state of		1	
-	by each person (other than a		Str. 1	and the state		5 X	
	governmental unit or publicly	100 12 20 20	14-1-2		1. N	La Carta	
	supported organization) included		1	17. 19 11 - XI	1.	1 1- 1.2.	
	on line 1 that exceeds 2% of the	1. 2. 1. 1. 1. 1.	1 martin	· · · · · · · · · · · · · · · · · · ·		1. 1. The second	
	amount shown on line 11,	the second second	1			1	
	column (f)	5 10 m	here and the sta	12	1.5 1.5 1.1 1	3/	26482790.
6	Public support. Subtract line 5 from line 4,		1	111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.51, 5	1 1 1000	47334170.
	ction B. Total Support	1 - 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1					ETUTIO.
-	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	16624043.			13226443	22283692	73816960.
	Gross income from interest.	±0024040.	23027033.	0004000.	192201191	222030521	15010500.
0	dividends, payments received on						
	securities loans, rents, royalties,	1001343.	1080305.	10/7013	933,764.	444,841.	4507266.
	and income from similar sources	1001343.	1080303.	1047013.	955,704.	444,041.	4507200.
9	Net income from unrelated business		5. – C				
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain					1	
	or loss from the sale of capital						
	assets (Explain in Part VI.)	and the second second					00001000
11	Total support. Add lines 7 through 10					the state of the s	78324226.
12		•	/				,203,182.
13	First 5 years. If the Form 990 is for th		rst, second, third, f	ourth, or fifth tax y	year as a section 5	i01(c)(3)	_
-	organization, check this box and stor				<u></u>		
	tion C. Computation of Publi						(0.42
	Public support percentage for 2020 (I					14	60.43 %
	Public support percentage from 2019						69.59 %
16a	33 1/3% support test - 2020. If the c	-					
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2019. If the $\sigma$						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re, Explain in Part	VI how the organi	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
Ь	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circun	nstances test, cheo	k this box and st	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	llifies as a publicly	supported organi	zation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s

Schedule A (Form 990 or 990-EZ) 2020

032022 01-25-21

## Schedule A (Form 990 or 990 EZ) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) 04-2103651 Page 3

(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.)

Section A. Public Support						
Galendar year (or fiscal year beginning in) 🏲	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not			1.000			
include any "unusual grants.")		1			· · · · · · · · · · · · · · · · · · ·	
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to			· · · · · · · · · · · · · · · · · · ·			
or expended on its behalf						
5 The value of services or facilities						1
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons		· · · · · · · · · · · · · · · · · · ·				
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		1.		1		
c Add lines 7a and 7b		1				
8 Public support. (Subtract line 7c from line 6.)	2					
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨 📘	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6			1			
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975					1	
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is		1				
regularly carried on						
12 Other income. Do not include gain	1					
or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)			· · · · · · · · · · · · · · · · · · ·			
14 First 5 years. If the Form 990 is for the	e organization's f	first, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizati	on,
check this box and stop here						
Section C. Computation of Public	Support Pe	rcentage	_			
15 Public support percentage for 2020 (lin	ne 8, column (f),	divided by line 13,	column (f)		15	
16 Public support percentage from 2019					16	
Section D. Computation of Invest	tment Incom	e Percentage	_			
17 Investment income percentage for 202	20 (line 10c, colu	ımn (f), divided by	ine 13, column (I))	,	17	
18 Investment income percentage from 2						
19a 33 1/3% support tests - 2020. If the						7 is not
more than 33 1/3%, check this box an						<b>&gt;</b> L
b 33 1/3% support tests - 2019. If the						
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization						
032023 01-25-21				Sc	hedule A (Form 99	0 or 990-EZ) 20
		19	5			

#### Schedule A (Form 990 or 990-EZ) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 4 Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 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.
- 2 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)? # "Yes," answer lines 3b and 3c 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")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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? If "Yes," answer lines 5b and 5c 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).
- 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 line 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.)

032024 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

No Yes

1

2

3a

Зb

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

2020.05092 AMERICAN ACADEMY OF ARTS 261100 1

# Schedule A (Form 990 or 990-EZ) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 5 Part IV Supporting Organizations (continued)

Pai	TIV Supporting Organizations (continued)	-		-
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			1
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	-	-	-
	11c below, the governing body of a supported organization?	11a	-	
	A family member of a person described in line 11a above?	11b		1
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	110		-
Sec	detail in Part VI. tion B. Type I Supporting Organizations	1 TIC		-
	ton 21 Jpc : cappening signature		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> <b>Part VI</b> <i>how the supported organization(s) effectively oparated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>	1		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	-	-
2	Did the organization operate for the benefit of any supported organization other than the supported		-	1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		-	4
600	supervised, or controlled the supporting organization.	2	-	
Sec	tion C. Type II Supporting Organizations	-	1	-
	. The state of the second state of the state		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			<u> -</u>
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			101
	or management of the supporting organization was vested in the same persons that controlled or managed	1	-	-
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1.		
	ten brim ijpe in experimit eigen		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	-	100	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-	1 - 1	the state
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	1	-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-	1	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	-		_
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a		11	-
	significant voice in the organization's investment policies and in directing the use of the organization's	1	1	P .
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	-	L-	-
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see i		7 <u>5).</u>	
2	Activities Test. Answer lines 2a and 2b below.	-	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		11	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined	12.1		
	that these activities constituted substantially all of its activities.	2a	-	-
þ	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	-		-
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in		-	1-
	these activities but for the organization's involvement.	2b	-	-
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	125	-	1 -
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	(	1000	1 -
	trustees of each of the supported organizations? If "Yas" or "No" provide details in Part VI.	3a	-	-
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Dat		-
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	

17

Schedule A (Form 990 or 990-EZ) 2020

032025 01-25-21

2020.05092 AMERICAN ACADEMY OF ARTS 261100\_1

1	t V Type III Non-Functionally Integrated 509(a)(3) Supportin Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 ( explain in	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E	
Secti	on A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		A
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	10		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):		and the second	0.0
2	Acquisition indebtedness applicable to non-exempt-use assets	2		1. P
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		1
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	ion C - Distributable Amount	1		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		-

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

instructions).

### Schedule A (Form 990 or 990 EZ) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 7

Par		inter and a state	mzations (contin		Current Year
	on D - Distributions Amounts paid to supported organizations to accomplish exer	mot ourooses		11	Susent ledi
1	Amounts paid to supported organizations to accomplish exer Amounts paid to perform activity that directly furthers exemp				
2		r pulposes of supported		2	
~	organizations, in excess of income from activity	of supported executivetiens		3	
3	Administrative expenses paid to accomplish exempt purpose	is of supported organizations		4	
4	Amounts paid to acquire exempt-use assets	5			
5	Qualified set-aside amounts (prior IRS approval required - pro				
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	8			
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	E - Distribution Allocations (see instructions)  (i)  (ii)  (iii)  Underdistributions  Pre-2020		ns	(iii) Distributable Amount for 2020	
1	Distributable amount for 2020 from Section C, line 6			31	
2	Underdistributions, if any, for years prior to 2020 (reason-	14		6	
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				DR 1 10 11 1
a	From 2015	27 3 2 3 4			
b	From 2016	The strength of			and the state
c	From 2017				and a lite
d	From 2018				and the second s
	From 2019		CALL C HEA	1.00	Real Print
	Total of lines 3a through 3e			11	
_	Applied to underdistributions of prior years			10	
-	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)		-	1566	
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		D. C. T. Martin		
4	Distributions for 2020 from Section D,		CONTRACTOR OF STREET	10000	10
	line 7: \$			100	
a	Applied to underdistributions of prior years			1	
-	Applied to 2020 distributable amount				
-	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
Č	any. Subtract lines 3g and 4a from line 2. For result greater	Jer 2011 84			
	than zero, explain in Part VI. See instructions.	55 11		6	
6	Remaining underdistributions for 2020. Subtract lines 3h		12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1000	
0	and 4b from line 1. For result greater than zero, explain in			1000	
		and the second second		- /	
-	Part VI. See instructions.				1
'	Excess distributions carryover to 2021. Add lines 3j				
0	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
-	Excess from 2019				
e	Excess from 2020		· · · · · · · · · · · · · · · · · · ·	-	

Schedule A (Form 990 or 990-EZ) 2020

032027 01-25-21

Schedule A	(Form 990 or 99	90-EZ) 2020	AMERIC.	AN	ACADEMY	OF	ARTS	AND	SCIENCE	S 04	-21(	)3651	Page 8
Part VI	Supplemer	ntal Inforr	nation. Pro	vide 1	the explanation	s requ	uired by Pr	art II. line	e 10; Part II, line	17a or 17b:	Part III.	line 12:	
	Part IV Section	n Allines 1	2 3h 3c 4h	4 c 5	5a 6 9a 9b 9r	: 11a	11b and	11c: Pa	rt IV. Section B.	lines 1 and 2	': Part I	V. Section	C,
	line 1; Part IV,	Section D, I	ines 2 and 3;	Part I	V, Section E, lit	nes 1c	, 2a, 2b, 3	3a, and 3	b; Part V, line 1 his part for any a	; Part V, Sect	ion B, I	ine 1e; Pa	irt V,
	Section D, line	es 5, 6, and (	8; and Part V,	Secti	ion E, lines 2, 5	, and 6	5. Also co	mplete ti	his part for any a	additional info	ormatio	n.	
	(See instructio	ins.)											
												_	
													· · · · ·
						-							
											-		
				_								-	
								_					
		-											
	-					-	-						
<u>.                                    </u>												_	

Schedule A (Form 990 or 990-EZ) 2020

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

### 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

2020

Employer identification number

Name of the organization

Organization type (check one):

AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCES
MUDICICIAN	ACHDERT	OT.	THUYD		DOTHION

04-2103651

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	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 crueity to children or animals. Complate 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., setting 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., setting \$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 certify that it doesn't meat the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

- E. ( C. )	HEDULE D		plemental Financial Statements					
Departr	ment of the Treasury I Revenue Service	Part IV, line 6, 7, 8, 9, 10,	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. 90 for instructions and the latest information.	Open to Pu Inspection	blic			
-	e of the organizatio			Employer identification m	umber			
	Sec. Sub-	AMERICAN ACADEMY OF		04-210365:	1			
Par	tl Organiza	tions Maintaining Donor Advised	d Funds or Other Similar Funds or Ac	counts. Complete if the				
	organization	answered "Yes" on Form 990, Part IV, line	e 6.					
			(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at er	d of year						
2		contributions to (during year)						
3	••	grants from (during year)						
4		end of year			-			
5			writing that the assets held in donor advised fund	ds				
5	-		exclusive legal control?		No			
6			dvisors in writing that grant funds can be used o					
0	-	-	r donor advisor, or for any other purpose conferr					
					No			
Par	impermissible priva	tion Easements Complete State and	panization answered "Yes" on Form 990, Part IV,	line 7	INU			
100000+1100				, me 7.	-			
1		ervation easements held by the organization						
		of land for public use (for example, recreation	,	orically important land area				
	8	natural habitat	Preservation of a certi	ified historic structure				
		of open space		tot a deservation of the				
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form of e co	a summary second s				
	day of the tax year			Held at the End of the T	ax Year			
а	Total number of co	nservation easements		2a				
b	Totel acreage resti	icted by conservation easements		2b				
C	Number of conservation	ation easements on a certified historic stru	ucture included in (a)	20				
d	Number of conserv	ation easements included in (c) acquired a	after 7/25/06, and not on a historic structure					
	listed in the Nation	al Register		2d				
3			eased, extinguished, or terminated by the organi	ization during the tax				
	vear 🕨							
4	Number of states v	where property subject to conservation eas	sement is located 🕨					
5		ion have a written policy regarding the per						
-		procement of the conservation easements it		Yes	No			
6			handling of violations, and enforcing conservation					
			······································					
7	Amount of avpans		lling of violations, and enforcing conservation ea	sements during the year				
'	Amount of expens	rs incorred in monitoring, inspecting, nano	ining of violations, and entereing concervation ea	comento danng the your				
~	Deer verk erner	which accompany reported on list O(d) show	e satisfy the requirements of section 170(h)(4)(B)	V0				
₿					No			
_								
9		-	on easements in its revenue and expense statem					
	and the second se	the second se	note to the organization's financial statements th	lat describes the				
		ounting for conservation easements.	Art Historical Transuran or Other	Similar Acasta				
Pa			Art, Historical Treasures, or Other S	Similar Assets.				
-		the organization answered "Yes" on Form						
1a			8, not to report in its revenue statement and bal					
	of art, historical tre	asures, or other similar assets held for put	blic exhibition, education, or research in furtheral	nce of public				
	sarvice, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items.					
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balance	e sheet works of				
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furtherance	e of public service,				
		ng amounts relating to these items:						
	·							
2			asures, or other similar assets for financial gain,	provide				
-		ints required to be reported under FASB A						
	•			▶ \$				
a b								
				Schedule D (Form 99	2020			
		eduction Act Notice, see the Instructions	5 IVI FUTIT 330.	Schedule D (Form 9)	ioj zvzl			
03205	1 12-01-20		26					

-		N ACADEMY O					03651	
Par							(continue	20)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that mal	ke signifik	cant use of its		
	collection items (check all that apply):							
а	X Public exhibition	d	X Loan or exc					
ь	X Scholarly research	e	Other					
С	X Preservation for future generations							
4	Provide a description of the organization's co						XIII.	
5	During the year, did the organization solicit o						-	
1447	to be sold to raise funds rather than to be ma						Yes	X No
Par	t IV Escrow and Custodial Arrange		te if the organizatio	n answered "Yes	on Forr	n 990, Part IV,	line 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi						7.	
	on Form 990, Part X?			*********	***********	L	Yes	No No
ь	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:		Г	T		
	1				ŀ		Amount	
	Beginning balance					10		
	Additions during the year					<u>1d</u>		
e	Distributions during the year			******		<u>1e</u>	-	
f	Ending balance					1f		
2a	Did the organization include an amount on F						Yes	No
	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete			and the second sec			Live .	
		(a) Current year	(b) Prior year	(c) Two years ba		Three years back		
<b>1</b> a	Beginning of year balance	52,392,892.	53,022,939.	51,760,73		47,631,151.		77,679.
ь	Contributions	5,958,052.	2,164,793.	1,116,66		2,161,782.	-	19,242.
¢	Net investment earnings, gains, and losses	15,331,851.	-299,838.	2,362,26	52.	4,045,943.	5,5	96,988.
d	Grants or scholarships				-	_		
e	Other expenditures for facilities							
	and programs	2,522,549.	2,495,002.	2,216,72	10.	2,078,140.	2,2	62,758.
f	Administrative expenses				-			
g	End of year balance	71,160,246.	52,392,892.		39.	51,760,736.	47,6	31,151.
2	Provide the estimated percentage of the curr		(line 1g, column (a)	)) held as:				
	Board designated or quasi-endowment	8,9200	_%					
	Permanent endowment > 59.2000							
c	Term endowment > 31.8800	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered f	or the or	ganization	-	-
	by:							es No
	(i) Unrelated organizations						3a(i)	x
	(ii) Related organizations							X
ь	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere			1			_	
	Description of property	(a) Cost or of	1 1 1		c) Accur		(d) Book	value
		basis (investm	ient) basis	(other)	deprec	iation		
<b>1</b> a	Land				and the			
	Buildings					2,498.	8,387	
	Leasehold improvements			4,109.		1,444.		,665.
	Equipment				5,55'	7,405.	2,107	
	Other		3	4,573.				,573.
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X. column (B). line 1	0c.)		▶ 1	0,772	,638.
						Schedul	e D (Form !	990) 2020

	on Form 990, Part IV, line 1		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market value
I) Financial derivatives			
2) Closely held equity interests			
3) Other	7 556 015	END OF VEND	MADUED MALTE
(A) MULTI-STRATEGY FUNDS	7,556,815.	END-OF-YEAR	MARKET VALUE
(B) HEDGE FUNDS - DOMESTIC (C) EQUITIES	11,734,283.	FND_OF_VEAD	MARKET VALUE
(D) PRIVATE EQUITY FUNDS	8,296,679.		MARKET VALUE
(E)	0,250,0151		Maddar Vindon
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	27,587,777.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			the second se
Part IX Other Assets.			
Complete if the organization answered "Yes" of		1d. See Form 990, Part X,	
Complete if the organization answered "Yes" ( (a)	on Form 990, Part IV, line 1 Description	1d. See Form 990, Part X,	(b) Book value
Complete if the organization answered "Yes" (a) (a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c		1d. See Form 990, Part X,	(b) Book value 38 , 268
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES	Description	1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PER		1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" (a) (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PER (4) PREPAID LAND LEASE	Description	1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" ( (a) ( (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PER (4) PREPAID LAND LEASE (5)	Description	1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" ( (a) ( (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PER (4) PREPAID LAND LEASE (5) (6)	Description	1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BÊNEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7)	Description	1d. See Form 990, Part X,	(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" ( (a) ( (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BÊNEFICIAL INTEREST IN PER (4) PREPAID LAND LEASE (5) (6) (7) (8)	Description	1d. See Form 990, Part X,	
Complete if the organization answered "Yes" ( (a) ( (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9)	Description		(b) Book value 38,268 9,863,293 3,216,576 454,545
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BÊNEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	Description		(b) Book value 38,268 9,863,293 3,216,576
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" ( (1) Description of liability	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) (9) (9) (9) (1) (6) (7) (8) (9) (9) (6) (7) (8) (9) (9) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" ( (a) Description of liability	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) ( (a) ( (a) ( (a) ( (a) ( (a) ( (a) ( (b) ( (c) ( (c	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) [ (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2)	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) [ (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3)	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (6) (7) (8) (9) otal. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" ( (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) fotal. (Column (b) must equal Form 990, Part X. col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" ( (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.
Complete if the organization answered "Yes" ( (a) (1) OTHER ASSETS (2) DUE FROM AFFILATES (3) BENEFICIAL INTEREST IN PEF (4) PREPAID LAND LEASE (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990. Part X col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" ( (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description RPETUAL TRUST		(b) Book value 38, 268 9, 863, 293 3, 216, 576 454, 545 13, 572, 682 Part X, line 25.

Schedule D (Form 990) 2020

032053 12-01-20

	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			-	
1				1	42,797,490.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	10,962,117.		
ь	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	20			
d	Other (Describe in Part XIII.)	2d	324,594.	1	
е	Add lines 2a through 2d	*******	******	2e	11,286,711.
3	Subtract line 2e from line 1			з	31,510,779.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIII.)	4b	748,746.	1	
C	Add lines 4a and 4b			40	748,746.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	32,259,525.
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)           t XII         Reconciliation of Expenses per Audited Financial Statemen           Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	nts W	ith Expenses per	5 Retur	32,259,525. n.
5 Par 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         t XII         Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements	nts W	ith Expenses per	5	32,259,525.
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         t XII         Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nts W	ith Expenses per	5 Retur	32,259,525. n.
5 Par 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         t XII         Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	nts W	ith Expenses per	5 Retur	32,259,525. n.
5 Par 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements       Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities       Prior year adjustments	nts W	ith Expenses per	5 Retur	32,259,525. n.
5 Par 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>XII</b> Reconciliation of Expenses per Audited Financial Statement         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses	2a 2b 2c	ith Expenses per	5 Retur	32,259,525. n.
5 Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements	2a 2b 2c 2d	ith Expenses per l	5 Retur	32,259,525. n. 11,691,898.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements	2a 2b 2c 2d	ith Expenses per	5 Retur	32,259,525. n. 11,691,898.
5 Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d	ith Expenses per	5 Retur	32,259,525. n. 11,691,898.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	ith Expenses per	5 Retur	32,259,525. n. 11,691,898.
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a	ith Expenses per l	5 Retur	32,259,525. n. 11,691,898.
5 Pat 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, Jine 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	ith Expenses per l	5 Retur	32,259,525. n. 11,691,898. 0. 11,691,898.
5 Pat 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	ith Expenses per l	5 Retur	32,259,525. n. 11,691,898.

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

#### PART III, LINE 1A:

THE ACADEMY DOES NOT CAPITALIZE COLLECTIONS THAT HAVE BEEN ACQUIRED
THROUGH PURCHASE OR DONATION. PURCHASES OF COLLECTION ITEMS ARE RECORDED
AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE
ACQUIRED. PURCHASES, SALES AND INSURANCE RECOVERIES WHEN APPLICABLE ARE
CONSIDERED INVESTING ITEMS IN THE CONSOLIDATED STATEMENT OF CASH FLOWS.
PART III, LINE 4:
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 032054 12-01-20 Schedule D (Form 990) 2020 29

----

Schedule D (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page 5
Part XIII Supplemental Information (continued)

MANUSCRIPTS DATING FROM THE EARLIEST YEARS OF THE COUNTRY.

PART V, LINE 4:

ACADEMY-DESIGNATED ENDOWMENTS HAVE NO EXTERNAL RESTRICTIONS BUT HAVE DESIGNATED LIMITATIONS INITIATED BY THE ACADEMY. THESE LIMITATIONS MAY BE CANCELED AT THE DIRECTION OF THE ACADEMY'S BOARD OF DIRECTORS. THESE ENDOWMENTS INCLUDE, AMONG OTHER THINGS, "FUND FOR MAJOR REPAIRS" WHICH IS AN ACADEMY-DESIGNATED RESERVE FUND FOR MAJOR PROPERTY AND EQUIPMENT ADDITIONS AND REPAIRS.

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

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

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

PART X, LINE 2:

10220408 143399 261100

THE ACADEMY ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN THAT A RECOGNITION

THRESHOLD AND MEASUREMENT STANDARD IS APPLIED TO A TAX POSITION TAKEN OR

032055 12-01-20

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651 Page	5_
Part XIII   Supplemental Information (continued)	
EXPECTED TO BE TAKEN IN A TAX RETURN. THE ACADEMY HAS DETERMINED THAT ITS	_ <b>-</b>
TAX STATUS AS AN EXEMPT ENTITY AND ITS DETERMINATIONS TO CLASSIFY INCOME	_
AS RELATED OR UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITIONS; HOWEVER,	
THE ACADEMY HAS DETERMINED THAT SUCH TAX POSITONS DO NOT RESULT IN AN	_
UNCERTAINTY REQUIRING RECOGNITION. THE ACADEMY IS NOT CURRENTLY UNDER	<b></b> •
EXAMINATION BY ANY TAXING JURISDICTION AND ITS INFORMATION RETURNS ARE	_
GENERALLY SUBJECT TO EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.	_
PART XI, LINE 2D - OTHER ADJUSTMENTS:	_
INCREASE IN BENEFICIAL INTEREST IN PERPETUAL TRUST 488,717.	
INTERCOMPANY LOSS ON FINANCIAL STATEMENTS	
TOTAL TO SCHEDULE D, PART XI, LINE 2D 324,594.	_
	_
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
INTERCOMPANY REVENUES NOT ON FINANCIAL STATEMENTS602,942.	_
EXPENSES NETTED AGAINST REVENUES 145,804.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B 748,746.	_
	_
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
EXPENSES NETTED AGAINST INTEREST INCOME145,804.	_
	_
Schedule D (Form 990) 20	20

032055 12-01-20

SCHEDULE F (Form 990)			ivities Outside the Uni n answered "Yes" on Form 990, Part IV			OMB No. 1545-0047
Department of the Treasury	b.Co.to.	in nou/Fe	Attach to Form 990. orm990 for instructions and the latest in	formation		Open to Public
Name of the organization	- GO 10 V	www.iis.gov/re		normation.		entification number
				- 1	04 0100	0651
AMERICAN ACADEM			side the United States. Complete	e if the organ	04-2103	
Form 990, Part I		•		an the organ		
			ds to substantiate the amount of its grant the selection criteria used to award the g			Yes 🗌 No
United States.		-	procedures for monitoring the use of its g		her assistance	outside the
3 Activities per Region. (1 (a) Region	(b) Number of	I, line 3 table ca (c) Number of	an be duplicated if additional space is nee (d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices in the region	employees, agents, and independent contractors in the region	(by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	gram service, e specific type (s) in the region	expenditures for and investments
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0	INVESTMENTS			15,022,228.
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	0	INVESTMENTS			18,924,599.
SOUTH ASIA	0	0	INVESTMENTS			3,814,414.
			1			-
					_	
		-		-		
3 a Subtotal	0	0				37,761,241.
b Total from continuation						
sheets to Part 1 c Totals (add lines 3a	0	0				0.
and 3b)	0					37,761,241.

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

Schedule F (Form 990) 2020

032071 12-03-20

#### Schedule F (Form 990) 2020

#### AMERICAN ACADEMY OF ARTS AND SCIENCES

#### 04-2103651

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space 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)

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2020

#### Schedule F (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

#### 04-2103651

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(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 of valuation (book, FMV, appraisal, other)
					-		
				2 2			
				<u> </u>		<u> </u>	

Schedule F (Form 990) 2020

# Schedule F (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>if</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No No
2	Did the organization have an interest in a foreign trust during the tax year? <i>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 Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	No
4	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 (see Instructions for Form 8621)	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "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)	Yes	X No

Schedule F (Form 990) 2020

Schedule F	(Form 990) 2020	AMERICAN	ACADEMY OF	ARTS A	ND SC	IENCES	04-2103651	Page 5
Part V	Supplementa	I Information						
			Part I, line 2 (monito	riog of funds):	Part I. line	3. column (f) (accou	unting method; amounts of	
	i tovide trie intern	adon required by r	ian), Doct II, line 1 (r		thad): Dart	III (accounting mot	hod); and Part III, column (c)	
	investments vs. e	xpenditores per reg	ion), Part II, Ille I (a	- alata thia non	though Fait	in (accounting met	mody, and t art in, column (c)	
	(estimated numbe	er of recipients), as a	applicable. Also cor	npiete triis par	t to provide	any additional inte	ormation. See instructions.	
				_				
<u> </u>								
		_						
							Schodula E (Form	0001 2020

36

Schedule F (Form 990) 2020

032075 12-03-20

901	EDULE J	1	OMB No. 1545-0047				
	m 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		2020				
`	Compensated Employees		2020				
Decar	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.     Attach to Form 990.						
	I Rovenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	-	Inspe	source 10	Cold.		
Nam	e of the organization	Employer ide			nber		
De	AMERICAN ACADEMY OF ARTS AND SCIENCES	04-21	0305	<u> </u>			
Pa	rt I Questions Regarding Compensation		_	Yes	No		
	out that the following the property of the following to or for a parton listed on Form	000	1.45	res	INO		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	550,	1. 1.	11. 18	1.00		
		alusa	15.7	J	k		
			1000	6 6	10		
	Travel for companions Payments for business use of personal results of Tax indemnification and gross-up payments Health or social club dues or initiation fees		1	and			
			19.10	0.0	340		
	Discretionary spending account	r, ener	10.00	2	121		
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		den 1	245	11.5		
D	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b	X			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		A	- 11	5		
-	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х			
			14	(ARA)	0		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's		1-1	1997			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization		10000	2013	-		
	establish compensation of the CEO/Executive Director, but explain in Part III.		(35)	1. 15	120		
	X Compensation committee Written employment contract		200		1		
	Image: State of the state		1	1	en l		
	Form 990 of other organizations	ommittee	1.2.3				
			1	1-12			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		-	1.	A T		
	organization or a related organization:		21	12			
а	Receive a severance payment or change-of-control payment?	******	4a	-	X		
b	Participate in or receive payment from a supplemental nonqualified retirement plan?		. 4b	-	X		
с	Participate in or receive payment from an equity-based compensation arrangement?		. 4c		X		
	If "Yes" to any of lines 4a c, list the persons and provide the applicable amounts for each item in Part III.			807			
			C. Wester	3	in la		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		1	pl a	1		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n	No.	1	2)		
	contingent on the revenues of:		101	1	x		
а	a The organization?						
b	Any related organization?		5b	-	X		
	If "Yes" on line 5a or 5b, describe in Part III.		100	F N	10.1		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	in	-		-		
	contingent on the net earnings of:		6a	200	x		
а	a The organization?						
b	b Any related organization?						
	If "Yes" on line 6a or 6b, describe in Part III.		0		1-1		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		<u>6</u>		77		
	not described on lines 5 and 6? If "Yes," describe in Part III	******	. 7	-	X		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ne					
				-	X		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		+	-	11 73		
	Regulations section 53.4958-6(c)?		9	L			

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

Schedule J (Form 990) 2020

032111 12-07-20

#### Schedule J (Form 990) 2020

#### 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES 04-2103651

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-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Devents				
(1) DAVID W. OXTOBY	(0)	554,385.	0.	0.	28,500.	14,999.	597,884.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) MARK ROBINSON	(i)	266,292.	0.	0.	26,635.	22,050.	314,9 <u>77</u> .	0.	
CHIEF OPERATING OFFICER	(ii)	0.	0.	Ü.	0.	0.	0.	0.	
(3) GINGER SAARIAHO	(i)	233,086.	0.	0.	23,676.	22,050.	278,812.	0.	
CHIEF ADVANCEMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) TANIA MUNZ	(i)	209,814.	0.	0.	11,344.	9,063.	230,221.	0.	
CHIEF PROGRAMS OFFICER	(ii)	0.	0.	Ο.	0.	0.	0.	0.	
(5) PHYLLIS BENDELL	(i)	178,414.	Ö.	0.	28,146.	22,01 <u>4</u> .	228,574.	0.	
DIR. OF PUBLISHING	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ALISON FRANKLIN	(i)	194,564.	0.	0.	18,546.	1,352.	214,462.	0.	
CHIEF COMMUNICATION OFFICER	. (ii)	0.	0.	0	0.	0.	0.	0.	
(7) LAURIE MCDONOUGH	(i)	153,875.	0.	0.	15,016.	1,191.		0.	
DIR. OF MEMBER ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
-	(i)						i		
	(0)								
	(i)								
	(ii)								
	(i)				_				
	<u>(iii)</u>								
	(i)							<u> </u>	
	(ii)							<u>-</u>	
	(i)								
	<u>(ii)</u>							<u> </u>	
	(i)								
	(ii)								
	(i)							<u> </u>	
	(ii)							<u> </u>	
	(i)							<u> </u>	
	(ii)				<u> </u>			<u> </u>	
	(i)				ļ				
	(ii)	_			<u> </u>				

.

Page 3

#### 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 2021, 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 2021 MET THE POLICY GUIDELINES.

Schedule J (Form 990) 2020

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service	m 990) Timent of the Treasury Explanations, and any additional information in Part VI.										OMB No. 1545-0047 2020 Open to Public Inspection			
Name of the organization	AMERICAN AC									oyer ide 4 - 21			umber	
Part   Bond Issues		E PART VI			(F) C(	ONTII	NUATIONS							
(a) Issuer name		(b) Issuer EIN (c) CUSIP #		(d) Date issued	(e) Issue price		(f) Description of purpose		(g) Defeased (h				) Pooled inancing	
									Yes	No Y	(es	No Y	es No	
MASSACHUSETTS HEALTH AN							REFINANCE OF							
A EDUCATIONAL	FACILITIES A	04-2456011	57586ELD1	08/01/09	3,374,	212.	PRE-EXIS	TING TAX-		x	_	X	X	
В							_						_	
c														
						-	1							
D									_				-1	
Part II Proceeds												_		
				A			B	C				D		
1 Amount of bonds re	etired	*****				_				_				
2 Amount of bonds le	egally defeased				4,212.	_		10		-				
3 Total proceeds of is		4,212.						_						
4 Gross proceeds in I		4,212.	_					_						
5 Capitalized interest	from proceeds	····							_	-				
6 Proceeds in refund	ing escrows								-	-	_			
7 Issuance costs from												_		
8 Credit enhancemer	nt from proceeds										_			
9 Working capital exp	penditures from proceeds									_	_		_	
10 Capital expenditure	es from proceeds					_			_	_				
11 Other spent procee	ds									-		_		
12 Other unspent proc	ceeds										_			
13 Year of substantial				2	009						_	_		
				Yes	No	Yes	No	Yes	No	)	es	_	No	
	sued as part of a refunding 18, a current refunding iss			x										
	sued as part of a refunding													
	8, an advance refunding is:				x									
16 Has the final alloca	v													
<ul> <li>16 Has the final allocation of proceeds been made?</li> <li>17 Does the organization maintain adequate books and records to support the final allocation of proceeds?</li> </ul>				x										

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

Schedule K (Form 990) 2020

# Schedule K (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

Page 2

Part III Private Business Use				_				
1 Was the exception a partner is a partnership, as a member of as U.C.		A No	Yes	B	Yes	C No		)   N.
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	X	tes	No	res	NO	Yes	No
which owned property financed by tax-exempt bonds?		<u>^</u>				ł		
2 Are there any lease arrangements that may result in private business use of		x						
bond-financed property?		<u> </u>	i					
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?		<u> </u>	-					
c Are there any research agreements that may result in private business use of								
bond-financed property?		X						<b></b>
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		%		%		%		
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		
6 Total of lines 4 and 5		%		%		%		
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		%		%		%		
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all		[						
nongualified bonds of the issue are remediated in accordance with the								
requirements under Regulations sections 1.141-12 and 1.145-2?	х							
Part IV Arbitrage								
		A		В		c		
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?		,I						J
a Rebate not due yet?		X						
b Exception to rebate?		X		· · ·				
c No rebate due?	X							
If "Yes" to line 2c, provide in Part VI the date the rebate computation was						•		·
performed     Jes the bond issue a variable rate issue?	X	·		1				

032122 12-01-20

Schedule K (Form 990) 2020

# Schedule K (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

04-2103651

Page 3

Part IV Arbitrage (continued)								
		A		в		;	C	ł
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 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								
		<u>A</u>		B	c	;		,
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instr	uctions,					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: MASSACHUSETTS HEALTH AND EDUCATI	ONAL F.	ACILITI	ES AUTH	HORITY				
(F) DESCRIPTION OF PURPOSE:								
REFINANCE OF PRE-EXISTING TAX-EXEMPT BOND ISSUE								

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service Name of the organization 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.

AMERICAN ACADEMY OF ARTS AND SCIENCES

Employer identification number 04-2103651

OMB No. 1545-0047

**Open to Public** 

Inspection

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 ELECTIONS - ACTIVITIES INVOLVED IN ANNUAL ELECTION OF NEW

MEMBERS TO THE ACADEMY

EXPENSES \$ 508,100. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

ARCHIVES - ACTIVITIES RELATED TO STORING AND MAINTAINING ACADEMY

HISTORICAL DOCUMENTS

EXPENSES \$ 617,280. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

COMMUNICATIONS - ACTIVITIES RELATED TO COMMUNCATION OF ACADEMY ACTIVITY

TO MEMBERS AND PUBLIC

EXPENSES \$ 648,764. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020

 032211
 11-20-20
 4.3

VISITING SCHOLARS - ACTIVITIES RELATED TO THE ACADEMY'S SCHOLARS

PROGRAMS

EXPENSES \$ 34,347. 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

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

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization           AMERICAN ACADEMY OF ARTS AND SCIENCES	Employer identification number
BOARD-DELEGATED POWERS AND MANAGEMENT STAFF. THE ANNUAL S	TATEMENTS ARE
REVIEWED BY STAFF, AND A REPORT FROM MANAGEMENT IDENTIFYIN	G POTENTIAL
CONFLICTS THAT MAY REQUIRE FURTHER REVIEW IS PROVIDED TO T	HE CHAIR OF THE
ACADEMY'S AUDIT COMMITTEE, WHO IS RESPONSIBLE FOR REVIEWIN	G THE STATEMENTS
AND REFERRING POTENTIAL CONFLICTS TO THE GOVERNING BOARD O	R APPROPRIATE
COMMITTEE FOR RESOLUTION CONSISTENT WITH THE ACADEMY'S CON	FLICT 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. THESE PROCEDURES USED DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. THERE WAS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING FOR DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENTS.

45

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

MANAGEMENT AND GENERAL EXPENSES

FUNDRAISING EXPENSES

TOTAL EXPENSES

032212 11-20-20

1,553,200.

1,362,242.

85,383.

105,575.

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 9	990-EZ) 2020						Page 2
Name of the organization							Employer identification number
Ū	AMERICAN	ACADEMY	OF	ARTS	AND	SCIENCES	04-2103651

INFORMATION TECHNOLOGY:	
PROGRAM SERVICE EXPENSES	81,651.
MANAGEMENT AND GENERAL EXPENSES	10,605.
FUNDRAISING EXPENSES	14,822.
TOTAL EXPENSES	107,078.
EDITING/PHOTOGRAPHY:	
PROGRAM SERVICE EXPENSES	38,012.
MANAGEMENT AND GENERAL EXPENSES	600.
FUNDRAISING EXPENSES	1,340.
TOTAL EXPENSES	39,952.
BUILDING REPAIRS:	
PROGRAM SERVICE EXPENSES	144,004.
MANAGEMENT AND GENERAL EXPENSES	25,210.
FUNDRAISING EXPENSES	25,913.
TOTAL EXPENSES	195,127.
TRANSACTION FEES:	
PROGRAM SERVICE EXPENSES	63,229.
MANAGEMENT AND GENERAL EXPENSES	9,973.
FUNDRAISING EXPENSES	18,290.
TOTAL EXPENSES	91,492.
CONTRACT LABOR:	
PROGRAM SERVICE EXPENSES	18,973.
MANAGEMENT AND GENERAL EXPENSES	0.
032212 11-20-20 46	Schedule O (Form 990 or 990-EZ) 2020

ame of the organization AMERICAN ACADEMY OF ARTS AND SCIENCES	Employer identification numb 04-2103651
UNDRAISING EXPENSES	0.
OTAL EXPENSES	18,973.
	10,9,9
PROGRAM SERVICE EXPENSES	1,450.
IANAGEMENT AND GENERAL EXPENSES	0.
UNDRAISING EXPENSES	0.
OTAL EXPENSES	1,450.
OTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,007,272.
ORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	488,717.

Schedule O (Form 990 or 990-EZ) 2020

SCHEDULE R (Form 990)	Compl	Related Organization ete if the organization answere	ns and Unrelated Pa d "Yes" on Form 990, Part IV, I ttach to Form 990.	<b>rtnerships</b> line 33, 34, 35b, 3	6, or 37.		OMB No. 154 202 Open to F	20
Department of the Treasury Internal Revenue Service Name of the organization		Go to www.irs.gov/Form99	0 for instructions and the late:	st information.		Employer i	Inspect	tion
AM	ERICAN ACADE	MY OF ARTS AND SC	CIENCES	-		04-2:	103651	
Part I Identification of Disrega	rded Entities. Complete	e if the organization answered "Y	es" on Form 990, Part IV, line 33	3.				
(a) Name, address, and EIN of disregarded e		<b>(b)</b> Primary activity	(c) Legal domicile (state c foreign country)	(d) or Total inco	(e) me End-of-year a	issets E	(f) Direct controllin entity	ıg
(a) Name, address, ar	ax year. nd EIN	tions. Complete if the organizatio (b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct contro	lling cor	(g) 5 12(b)(13) htrolled
of related organiz	ation		foreign country)	section	status (if section 501(c)(3))	entity	Yes	No
For Paperwork Reduction Act Not						0.1	fule R (Form 9	

032161 10-28-20 LHA

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(	)	(k)
Name, address, and EIN of related organization	Primary activity	Legel domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disprop	antionata		Gene		orcontana
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
	_											
		ļ										
	_						1					
	_											
	_											
						_ <b>_</b>						
	_					-					1	
	_							ļ				
								1				
			<u> </u>	l						-		
		]							]			
							1					

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	<b>(d)</b> 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	Sec 512( cont	(i) tilon (b)(13) trolled tily?
		country)		oruusij		833513		Yes	No
NORTON'S WOODS, INC 04-3388917			AMERICAN						
136 IRVING STREET			ACADEMY OF						
CAMBRIDGE, MA 02138	EVENT SERVICES	MA	ARTS AND	C CORP	0.		100%	X	
PERMANENT SCIENCE FUND TR U/DECL -			AMERICAN						
04-6091592, BNY MELLON, NA - P.O. BOX 185,			ACADEMY OF						
PITTSBURGH, PA 15230-0185	TRUST	MA	ARTS AND	TRUST	120,000.		100%	<u>X</u>	<b>!</b>
	_								
	_			_					
									Γ
	_								
		╂────		1	/				$\square$

# Schedule R (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

(5)

(6)

032163 10-28-20

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

Note: Complete line 1 if any entity is listed in Parts II, II						Yes	No		
1 During the tax year, did the organization engage is					10				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, (	or (iv) rent from a controlle	d entity			1a	-	X		
<ul> <li>B Gift, grant, or capital contribution to related organ</li> </ul>	ization(s)	********			1b		X		
c Gift, grant, or capital contribution from related org							X		
d Loans or loan guarantees to or for related organiz	ation(s)	*****			1d		X		
e 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)						1	X		
i Exchange of assets with related organization(s)							X		
j Lease of facilities, equipment, or other assets to n	elated organization(s)				1j		X		
					I	1	12		
<b>k</b> Lease of facilities, equipment, or other assets from	n related organization(s)				1k		X		
Performance of services or membership or fundra							XX		
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
					1	-	1		
p Reimbursement paid to related organization(s) for	expenses				1p		X		
q Reimbursement paid by related organization(s) for							X		
۲ ······	************************************	*****			2.1		18		
r Other transfer of cash or property to related organ	nization(s)				1r		X		
s Other transfer of cash or property from related or						X			
2 If the answer to any of the above is "Yes," see the						-			
(a) Name of related organizat		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining an					
(1) NORTON'S WOODS, INC.		N	602,942.	FAIR MARKET VALUE					
(2) PERMANENT SCIENCE FUND TR	U/DECL	S	120,000.	0. FAIR MARKET VALUE					
(3)									
(4)						_			

# Schedule R (Form 990) 2020 AMERICAN ACADEMY OF ARTS AND SCIENCES

### <sup>7</sup> Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Ara all pariners ser 501(c)(3) orgs.? Yes No	(g) Share of end-of-year assets	(h Dispro tion allocat <b>Yes</b>	) opor- ale ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genoral o managing puriner? Yes NO	(k) Percentage ownership
					1					
								_		
										·
					1					

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 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

Schedule R (Form 990) 2020

032165 10-28-20

52