

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493211002060

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No 1545-0047

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009 A For the 2009 D Employer identification number B Check if applicable SOCIETY FOR SCIENCE & THE PUBLIC use IRS Address change 53-0196483 label or Doing Business As E Telephone number print or Name change type. See Specific (202) 785-2255 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 10,805,616 1719 N STREET NW Terminated tions. City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036 Amended return Application pending Name and address of principal officer Is this a group return for ELIZABETH M MARINCOLA affiliates? 1719 N STREET NW WASHINGTON, DC 20036 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 **Website:** ► www.societyforscience.org M State of legal domicile DE L Year of formation 1921 Part I Summary Briefly describe the organization's mission or most significant activities TO PROMOTE PUBLIC UNDERSTANDING OF SCIENCE Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. Total number of employees (Part V. line 2a) . . . 63 600 Total number of volunteers (estimate if necessary) . 384,279 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. -381,054 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 89,056,592 4,168,690 Program service revenue (Part VIII, line 2g) . 6,276,987 6,186,905 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -7,459,572 316,144 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 234,502 133,877 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 88,108,509 10,805,616 2,220,654 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . 1.954.710 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 4.797.091 5.235.800 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . Total fundraising expenses (Part IX, column (D), line 25) ► 506,777 Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 8,685,611 6,672,606 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 15,437,412 14,129,060 72,671,097 19 Revenue less expenses Subtract line 18 from line 12 . -3.323.444 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 106,869,988 103,574,911 Total liabilities (Part X, line 26) . . 9,085,052 8,401,468 22 97,784,936 95,173,443 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign ***** 2010-07-14 Here Signature of officer ELIZABETH M MARINCOLA PRESIDENT Type or print name and title Date Check if Preparer's identifying number Preparer's signature JENNY E HERRERA CPA Paid empolyed 🕨 🛘 Preparer's RUBINO & MCGEEHIN CHARTERED Firm's name (or yours EIN ▶ ıf self-employed), **Use Only** address, and ZIP + 4 6903 ROCKLEDGE DRIVE SUITE 1200 Phone no 🕨 (301) 564-3636 BETHESDA, MD 20817 May the IRS discuss this return with the preparer shown above? (see instructions) .

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

PROMOTING THE UNDERSTANDING AND APPRECIATION OF SCIENCE AND THE VITAL ROLE IT PLAYS ON HUMAN ADVANCEMENT

2	Did the organization undertake an the prior Form 990 or 990-EZ?		m services	during the ye	ear which wer	e not listed on	┌ Yes ┌	No
	If "Yes," describe these new servi	ces on Schedule O						
3	Did the organization cease conductors conduc	cting, or make signi	ficant char	iges in how it	conducts, an	y program	┌ Yes ┌	No
	If "Yes," describe these changes of	on Schedule O						
4	Describe the exempt purpose ach Section 501(c)(3) and 501(c)(4) allocations to others, the total ex	organizations and s	ection 494	7(a)(1) trust	s are require	d to report the a		ts and
4a	(Code) (Expens	ses \$ 6,254	,663 ınclud	ing grants of \$) (Revenue \$	5,64	14,562)
	SCIENCE NEWS - SCIENCE NEWS HAS E RESEARCH IN ALL FIELDS OF SCIENCE REACHING NEARLY 120,000 SUBSCRIBE	IT PUBLISHES CONCISE	, ACCURATE,	TIMELY ARTICLE	S THAT APPEAL	TO BOTH GENERAL	READERS AND S	CIENTISTS,
4b	(Code) (Expens	ses \$ 6,033	,063 includ	ing grants of \$	2,13	5,654) (Revenue \$	5	42,343)
	SCIENCE EDUCATION PROGRAMS - SPA SCIENTIFIC INGENUITY THRIVES SSP IS INDEPENDENT RESEARCH AND INQUIRY NEXT GENERATION CONFRONTS ITS CH OFFERED BY SSP - THE INTEL SCIENCE INSPIRATION TO PURSUE CAREERS IN 1	5 PROUD TO SUPPORT [*] '-BASED LEARNING SSF ALLENGES WITH THE CU TALENT SEARCH AND T	THE WORLD'S POFFERS OUF URIOSITY, TH THE INTEL INT	TOP YOUNG SC COMPETITIVE, E TOOLS AND TH ERNATIONAL SC	IENTIFIC MINDS EDUCATIONAL F IE CAPACITY TO	THROUGH ANNUAL PROGRAMS TO ASPII BUILD A BETTER W	. COMPETITIONS RING SCIENTISTS ORLD SCIENCE (THAT ENCOURAGE 5 - TO ENSURE OUR COMPETITIONS
4c	(Code) (Expens	ses \$ 456	,825 ınclud	ing grants of \$	8	5,000) (Revenue \$;	0)
	OUTREACH - THROUGH THE SSP FELLO' UNDER-RESOURCED STUDENTS, TO EN							
4d	Other program services (Descri	be in Schedule O)						
	(Expenses \$	ıncludıng grar	its of\$) (Reve	nue \$)
4e	Total program service expenses	- \$ 12,74	 4,551					
	- · ·						F	orm 990 (2009)

Part IV	Checklist	of Rea	uired	Schedules
---------	-----------	--------	-------	-----------

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		Νο
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νo
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compli	ance
--------------------------------------------------------------	------

Be Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable Be Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0 C. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) withing its prize winners? Be Enter the number of employees reported on Form W-2, Transmittal of Wage and Tax. Statements filed for the calendar year ending with or within the year covered by this return. Statements filed for the calendar year ending with or within the year covered by this return. Statements filed for the calendar year ending with or within the year covered by this return. Statements filed for the calendar year ending with or within the year covered by this return. Statements filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 34. Yes introduced in the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. Statements filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 34. Yes If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 34. Yes If "Yes," the statement of the foreign country (such as a bank account, securities account, or other financial account)? Bif "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? Bif "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? Cif "Yes," to line 5a or 5b, did the organization file form 886-T, Disclosure by Tax-Exempl Entity Regarding Prohibited Tax Shelter Transaction? Cif "Yes," to line 5a or 5b, did the organization file form 886-T, Disclosure by Tax-Exempl Entity Regarding Prohibited Tax Shelter Transaction? Cif "Yes," to line 5a or 5b, did the organization file form 886-T, Disclosure by Tax-Exempl Entity Regar				Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter-0- if not applicable 1b 0 o C Did the organization comply with backup withholding rules for reportable payments to vanidars and reportable garing (gimmhing) withings to give entered? Enter the number of employees reported on Form W-3, Transmitted of Mage and Tar. Statements filled for the caledar year ending with or within the year covered by this return. Statements filled for the caledar year ending with or within the year covered by this return (see 2 o 3 o 17	la	of U.S. Information Returns. Enter -0- if not applicable		-	-
gamming (sambling) winnings to prize winners? Enter the number of employees reported on form W-3, Transmittal of Wage and Tax Statements filled for the calendar year ending with or within the year covered by this return. 5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 8 About 17 the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 8 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 8 A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign ocurity (such as a bank account, securities account, or other financial account)? 9 If Yea, "enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 10 If yea, "enter the name of the foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account)? 11 If Yea, "enter the name of the foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account)? 11 If Yea, and the organization and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 12 West the organization and party to a prohibited tax shelter transaction at any time during the tax year? 13 B Yea 14 Yea (17 Yea) (and the organization that it was or is a party to a prohibited tax shelter transaction at any time during the year (17 Yea) (and the organization has a manual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was receipt to the organization that was received for the year (17 Yea) (and the organization and you contributions under socion 170(c). 12 If Yea, "did the organiza	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
Statements filed for the calendar year ending with or within the year covered by this return. It let least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) B of the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? B If If Yes, fines it filed a Form 990-T for this year? If Yes, provide an explanation in Schedule 0. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a historical accountly. B If Yes, fines the filed a Form 990-T for this year? If Yes, provide an explanation in Schedule 0. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a historical accountly accountly. B If Yes, fines the did a Form 980-T for this year? B If Yes, fines the the amount of the foreign Country. B If Yes, fines the calendar year, did the organization have a bank account, securities a ceumit, or other financial accountly. B If Yes, fines the calendar year, did the organization file foreign Bank and Financial Accounts. B Was the organization aparty to a prohibited tax shelter transaction? C If Yes, fines the fine foreign Country. B D If Yes, fines the fine foreign Country. B D If Yes, fines the fine foreign Country. B D If Yes, fines the organization file form 886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? C If Yes, fines the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell are not tax deductible? Organization shell any receive deductible Contributions under section 170(c). B D If Yes, fines the amount on the whole yes that are normally greater than \$100,000, and did the organization shell and the first prohibition of the year of the payor? The Yes of the or	c		1 c	Yes	
bit fall least one is reported on line 2a, did the organization file all required foderal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bit fall so form \$1.000 or more during the year covered by this return? a A trany time during the calendar year, did the organization have an interest in or a signiture or other authority over, a financial account; or other financial account; or other financial account; or the foreign country (such as a bank account, securities account, or other financial account; or other financial accounts; or other accounts of the financial accounts; or other accounts; or other accounts of the financial accounts; or other	2a	Statements filed for the calendar year ending with or within the year covered by this			
a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?. 3	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	2b	Yes	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts if If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts if Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a No D in dany taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," the ine 5 so F5, bid the organization has foreign account the second organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deduct tible contributions under section 170(c). Bid the organization account payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization on thify the donor of the value of the goods or services provided? If "Yes," did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization and partly in the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file a Form 1088-C as required? Sponsor	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	32	Vac	
a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? D If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. A Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? Does the organization a party to a prohibited tax shelter transaction by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or girls were not tax deductible? Does the organization nuclude with every solicitation an express statement that such contributions or girls were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Does the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? To be a different payor? If "Yes," indicate the number of Forms 8.28.2 fleid during the year. Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? To be order organizations of qualified intellectual property, did the organization file Form 8.89 as required? For ontitioutions of cars, boats, airplanes, and other vehicles, did the organization file Form 10.98.C as a frequired? Sponsoring organizations maintaining donor advised fun	h				
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line S or Sb, did the organization file Form 88.86-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c If "Yes" to line S or Sb, did the organization file Form 88.86-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c If "Yes" to line S or Sb, did the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization solicit any contributions that were not tax deductible? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 6 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? 6 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? 7 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? 7 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? 7 Did the organization make any taxable did unity the during the year of the value of the goods or services provided? 7 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization mak		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1 03	Νο
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line \$a or \$b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? a Does the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," and the organization notify the donor of the value of the goods or services provided? To Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year. Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? For contributions of qualified intellectual property, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Sponsoring organization make any taxable distributions under section 4966? 9a Did the organization make any taxable distributions under section 4966? 9b Did the organization make any taxable distributions under section 4966? 9c Section 501(c)(7) or	Ь	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 2 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 3 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 4 Organizations that may receive deductible contributions under section 170(c). 5 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? 5 Did the organization notify the donor of the value of the goods or services provided? 6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 8 For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 9 For all contributions on faviled intellectual property, did the organization file a Form 1098-C as required? 9 For other buttons on the sum of the vehicles, did the organization file a Form 1098-C as required? 9 For other buttons on faviled and other vehicles, did the organization file a Form 1098-C as required? 9 For other buttons on faviled and other vehicles, did the organization file a Form 1098-C as required? 9 For other buttons of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 9 For other buttons of cars, boats, airplanes, and other vehicles, did the or	ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
Prohibited Tax Shelter Transaction?	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
organization solicit any contributions that were not tax deductible? Organization solicit any contributions that were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? Did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of fangible personal property for which it was required to file Form \$282? Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To be provided to the payor? To be provided to the payor? To contributions of qualified intellectual property, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, and some advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Section 501(c)(12) organizations. Enter Gross income from members or shareholders Section 501(c)(12) organizations. Enter Section 501(c)(12) organizations. Enter Section 501(c)(10) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? To be the amount of tax-exempt interest received or accrued during the	c		5c		
were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 82822 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 70 For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 71 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 4966? Sponsoring organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Section 501(c)(12) organizations. Enter Gross income from members or shareholders Forsis income from other sources (Do not net amounts due or paid to other sources against amounts due received from them) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b 15c If "Yes," enter the amount of tax-exempt interest received or accrued during the	а	organization solicit any contributions that were not tax deductible?	6a		Νo
a 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year		were not tax deductible?	6b		
services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. B Did the organization make any time during the year? 8 Sponsoring organizations maintaining donor advised funds. B Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter 1 In Initiation fees and capital contributions included on Part VIII, line 12 1 Oga For sill contributions included on Part VIII, line 12 1 Oga For sill contributions organizations. Enter 1 Section 501(c)(12) organizations. Enter 1 Section 501(c)(12) organizations. Enter 1 For contributions organizations. Enter 1 For contributions organizations maintaining donor advised funds. 1 In Initiation fees and capital contributions included on Part VIII, line 12 1 For sill contributions			_	v	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		services provided to the payor?			
file Form 8282?			/b	Yes	
benefit contract?		file Form 8282?	7c		Νo
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	_				
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?					
required?	_		/g		
the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	••		7h		
a Did the organization make any taxable distributions under section 4966?	3	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	8		
b Did the organization make a distribution to a donor, donor advisor, or related person?	ı	Sponsoring organizations maintaining donor advised funds.			
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	а	Did the organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	0	Section 501(c)(7) organizations. Enter			
facilities 1 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
a Gross income from members or shareholders	Ь	facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		1 1			
against amounts due or received from them)					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the	Ь	· · · · · · · · · · · · · · · · · · ·			
1126	.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b	126			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b

	dovernance, management, and bisclosure for each fee response to lines 2 anough h	, 0
	below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances,	
	processes, or changes in Schedule O. See instructions.	
Section	n A. Governing Body and Management	
		_

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	4		
ь		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		N o
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	. 7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at thorganization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		ı	
		Г	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form	1? 11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give ris to conflicts?	e 12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	. 14	Yes	

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS, KY, ${\tt LA} \; , {\tt MA} \; , {\tt MD} \; , {\tt ME} \; , {\tt MI} \; , {\tt MN} \; , {\tt MO} \; , {\tt MS} \; , {\tt NC} \; , {\tt ND} \; , {\tt NH} \; , {\tt NJ} \; ,$ NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

15 Did the process for determining compensation of the following persons include a review and approval by

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

If "Yes" to line a or b, describe the process in Schedule O (See instructions)

independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

- Own website Another's website Vpon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 GREGORY MITCHELL 1719 N STREET NW WASHINGTON.DC 20036 (202) 785-2255

15a

15b

16a

16b

Yes

Yes

Νo

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- ◆ List all of the organization's current key employees See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did n	ot compens	ate any	curre	ent o	r for	mero	ffice	r, director, trustee	or key employee	
(A) Name and Title	(B) Average hours	Posit t	(C non (hat a	chec)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Former Highest compensated employee Key employee Officer		Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DUDLEY R HERSCHBACH CHAIRMAN	3 00	Х		х				1,000	0	0
JENNIFER YRUEGAS VICE-CHAIRMAN	3 00	Х		х				0	0	0
GAYLE WILSON SECRETARY	3 00	Х		Х				0	0	0
MICHELA ENGLISH TREASURER	3 00	Х		Х				0	0	0
DEBORAH BLUM TRUSTEE	1 00	Х						0	0	0
ROBERT W FRI TRUSTEE	1 00	Х						0	0	0
S JAMES GATES JR TRUSTEE	1 00	Х						0	0	0
H ROBERT HORVITZ TRUSTEE	1 00	Х						0	0	0
TOM LEIGHTON TRUSTEE	1 00	Х						0	0	0
ALAN LESHNER TRUSTEE	1 00	Х						0	0	0
STEPHANIE PACE MARSHALL TRUSTEE	1 00	Х						0	0	0
ANNE PETERSEN TRUSTEE	1 00	Х						0	0	0
ROBERT W SHAW JR TRUSTEE	1 00	Х						0	0	0
FRANK WILCZEK TRUSTEE	1 00	Х						0	0	0
ELIZABETH M MARINCOLA PRESIDENT	40 00			Х				307,390	0	40,707
GREGORY L MITCHELL CHIEF FINANCIAL OFFICER	40 00			х				147,776	0	31,311
THOMAS SIEGFRIED EDITOR-IN-CHIEF SN	40 00					х		141,671	0	27,369

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Key employee Officer Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
MICHELE GLIDDEN DIR - SCIENCE EDUCATION	40 00					х		127,710	0	18,844
HARRY A ROTHMANN DIR INTERNAL OPERATIONS	40 00					х		124,949	0	28,394
JENNIFER CARTER DIRECTOR OUTREACH	40 00					Х		131,019	0	28,289
RICHARD BATES DIR EXTERNAL AFFAIRS	40 00					х		107,312	0	26,513
					<u> </u>		<u> </u>	1,088,827	0	201,427

\$100,000 in reportable compensation from the organization -8

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5	103	Νο

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
QUAD GRAPHICS 75 REMITTANCE DR 6400 CHICAGO, IL 60675	MAGAZINE PRINTING	672,087
PUBLISHER SERVICE ASSOCIATES 1000 COMMERCE PARK DR WILLIAMSPORT, PA 17701	MAGAZINE FULFILLMENT SERVICES	591,049
NAHAN PRINTING NW 7973 PO BOX 1450 MINNEAPOLIS, MN 55485	PRINTING & MAILING SERVICES	403,059
FREEMAN PO BOX 650036 DALLAS, TX 752650036	CONVENTION SERVICES	390,959
ROOSEVELT PAPER COMPANY PO BOX 8500 PHILADELPHIA, PA 191785175	PAPER SUPPLIER	382,532
2 Total number of independent contractors (including but not limited to those listed above)) who received more than	

\$100,000 in compensation from the organization \blacktriangleright 12

Form 99			C. Danielania					Page 9
Part V	/ • • • • • • • • • • • • • • • • • • •	Statement o	от кечепие		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats a	1a	Federated cam	paigns 1a					
gra our	ь	Membership du	es 1b					
ts,	c		ents 1c					
<u> </u>	d e	Related organiz Government grants	zations 1d s (contributions) 1e	24,500				
ons sin	f	_	ons, gifts, grants, and 1f	4,144,190				
Contributions, gifts, grants and other similar amounts	g	sımılar amounts no Noncash contri	ot included above butions included in					
a Co	h	lines 1a-1f \$ _ Total. Add lines	s 1a-1f	▶	4,168,690			
				Business Code				
Program Serwce Revenue	2a	SCIENCE NEWS		511,120	5,260,283	5,260,283		
₽æ	b	SCIENCE EDUCATI	ON PROG	611,710	542,343	542,343		
46.e	С	SCIENCE NEWS		541,800	384,279		384,279	
Ser	d							
Ē	e	^ II athar progra						
Đ _O	f	All other progra	am service revenue					
	g		s 2a-2f	+	6,186,905			
	3		ome (including dividender)	· · · · · · · · · · · · · · · · · · ·	316,144			316,144
	4		stment of tax-exempt bond	· · · ⊢	,			,
	5	Royalties		• [97,254			97,254
			(ı) Real	(II) Personal				
	6a	Gross Rents Less rental						
	Ь	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7a b	Gross amount from sales of assets other than inventory Less cost or	(I) Securities	(II) O ther				
		other basis and sales expenses						
	С	Gain or (loss)						
	d 8a	Net gain or (los Gross income f	ss)					
Other Revenue	b	events (not inc \$		events 🏲				
	9a	Gross income f	rom gamıng actıvıtıes					
	Ь		ne 19 a penses b					
	С		(loss) from gaming activ	vities				
	10a	Gross sales of returns and allo						
	ь		oods sold b	·				
	С	Net income or ((loss) from sales of inve					
	11a	LIST RENTAL	s Kevenue	Business Code 900,099	36,623			36,623
	ь	LIST KENTAL		, 1	,			,
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		36,623			
	12	Total revenue.	See Instructions	•	10,805,616	5,802,626	384,279	450,021

	990 (2009)				Page 10
Part	IX Statement of Functional Expenses				
_	Section 501(c)(3) and 501(c)(4) organizations m			(5)	
	ll other organizations must complete column (A) but are not required to	complete columi	ns (B), (C), and (B)	(D). (C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $,$ line 21 $$	327,000	327,000		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,512,437	1,512,437		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	381,217	381,217		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	528,184	294,455	220,327	13,402
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,590,823	2,743,550	637,743	209,530
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	319,569	245,844	55,022	18,703
9	Other employee benefits	512,945	391,043	92,696	29,206
10	Payroll taxes	284,279	210,984	 	15,550
11	Fees for services (non-employees)	204,279	210,304	37,743	13,330
a	Management				
а ь	-	49.251		40.351	
-	Legal	48,251		48,251	
C L	Accounting	48,510		48,510	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	12,303		12,303	
g	Other	473,651	249,182	 	151,284
12	Advertising and promotion	98,374	98,374	 	
13	Office expenses	3,387,064	3,064,515	· · ·	24,170
14	Information technology	423,059	376,123	45,732	1,204
15	Royalties				
16	Occupancy	136,038		136,038	
17	Travel	790,678	748,050	38,498	4,130
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	898,883	895,656	3,227	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	58,702		58,702	
23	Insurance	73,046	13,627	59,419	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	OVERHEAD ALLOCATION	0	982,208	-1,021,806	39,598
ь	LIST RENTAL	182,013	182,013		
С	MISCELLANEOUS	42,034	28,273	13,761	
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	14,129,060	12,744,551	877,732	506,777
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	,,	, ,	,,,,,,	,,,,,
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet								
					(A) Beginning of year		(B) End of year			
	1	Cash—non-interest-bearing			241	1	106			
	2	Savings and temporary cash investments			1,686,985	2	1,080,401			
	3	Pledges and grants receivable, net			86,360,720	3	82,727,133			
	4	Accounts receivable, net			131,600	4	477,545			
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and						
		Schedule L				5				
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		1 4958(f)(1)) and						
		Schedule L				6				
ssets	7	Notes and loans receivable, net			7					
8	8	Inventories for sale or use			15,035	8	16,903			
⋖	9	Prepaid expenses and deferred charges			39,841	9	116,102			
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	2,493,380						
	ь	Less accumulated depreciation	10b	1,961,517	412,423	10c	531,863			
	11	Investments—publicly traded securities		18,223,143	11	18,624,858				
	12	Investments—other securities See Part IV, line 11				12				
	13	Investments—program-related See Part IV, line 11				13				
	14	Intangible assets		14						
	15	Other assets See Part IV, line 11		15						
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	106,869,988	16	103,574,911					
	17	Accounts payable and accrued expenses .			519,342	17	342,898			
	18	Grants payable				18				
	19	Deferred revenue			5,386,014	19	5,362,470			
	20	Tax-exempt bond liabilities				20				
<u>ē</u> ,	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21				
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified								
ä		persons Complete Part II of Schedule L		•		22				
	23	Secured mortgages and notes payable to unrelated third parties				23				
	24	Unsecured notes and loans payable to unrelated third parties				24				
	25	Other liabilities Complete Part X of Schedule D			3,179,696	25	2,696,100			
	26	Total liabilities. Add lines 17 through 25			9,085,052	26	8,401,468			
Ş		Organizations that follow SFAS 117, check here \blacktriangleright $\overline{\mbox{$ec V$}}$ and comp	let e l	ines 27						
Fund Balance		through 29, and lines 33 and 34.			0.500.005		0.507.040			
<u>8</u>	27	Unrestricted net assets			8,582,835		8,587,212			
ă	28	Temporarily restricted net assets			89,202,101	28 29	86,586,231			
Ĕ	29		ermanently restricted net assets							
丑		Organizations that do not follow SFAS 117, check here ► ar	id con	ıplet e						
10	20	lines 30 through 34.				30				
Assets	30 31	Paid-in or capital surplus, or land, building or equipment fund	apital stock or trust principal, or current funds							
551	32	Retained earnings, endowment, accumulated income, or other fu			31 32					
	33	Total net assets or fund balances	iiius		97,784,936		95,173,443			
Net										
l	34	Total liabilities and net assets/fund balances			106,869,988	34	103,574,911			

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

SOCIETY FOR SCIENCE & THE PUBLIC

		53-0196483			
Pa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instru	ctions		
The	organı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	Г	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).			
2	\sqcap	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	\sqcap	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A hospital's name, city, and state)(iii).Ente	r the	
5	Г	An organization operated for the benefit of a college or university owned or operated by a governmental un	nt describe	- d ın	
		section 170(b)(1)(A)(iv). (Complete Part II)			
6	Г	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from t described in section 170(b)(1)(A)(vi) (Complete Part II)	he general	public	
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9	Ţ	An organization that normally receives (1) more than 331/3% of its support from contributions, members	hip fees, ar	nd aros	i S
-	•	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more th		_	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) if			
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
10	Г	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).			
11	r	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to car one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See see the box that describes the type of supporting organization and complete lines 11e through 11h		a)(3).	Check
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)			
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III sucheck this box	upporting o	rganız	ation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?			
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)		Yes	No
		and (III) below, the governing body of the the supported organization?	11g(i)		
		(ii) a family member of a person described in (i) above?	11g(ii)		
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		
h		Provide the following information about the supported organization(s)			
		(:::)			

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e lon in ted in erning	(v) Did you not organizati col (i) of suppor	ion in your	Is the organizat	(vi) Is the organization in col (i) organized in the US?	
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averagest	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,859,325	3,599,915	2,693,433	4,627,306	41	0,089	14,190,068
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	7,645,141	7,097,486	6,789,520	5,818,764	5,80	2,626	33,153,537
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	10,504,466	10,697,401	9,482,953	10,446,070	6,21	2,715	47,343,605
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	2,767,487	2,301,452	1,466,277	4,217,802	22	5,832	10,978,850
b	A mounts 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		718,576	915,129				1,633,70
c	Add lines 7a and 7b	2,767,487	3,020,028	2,381,406	4,217,802	22	5,832	12,612,555
8	Public Support (Subtract line 7c from line 6)							34,731,050
Se	ction B. Total Support							
Cale	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	,	(f) Total
9	beginning in) A mounts from line 6	10,504,466	10,697,401	9,482,953	10,446,070	6,212	2,715	47,343,605
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	727,905	873,777	1,092,091	784,011		0,021	3,927,809
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	727,905	873,777	1,092,091	784,011	450	0,021	3,927,80
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				104,938	19	9,254	124,192
13	Total support (Add lines 9, 10c,	11,232,371	11,571,178	10,575,044	11,335,019	6,68	١,990	51,395,602
14	11 and 12) First Five Years If the Form 990 is for check this box and stop here	or the organizatio	n's first, second,	thırd, fourth, or f	ifth tax year as a	501(c)(3)	<u>l</u> organ	zation,
Se	ction C. Computation of Publ							
15	Public Support Percentage for 2009	(line 8 column (f) divided by line :	13 column (f))		15		67 580 %
16	Public support percentage from 200	8 Schedule A, Pa	irt III, line 15			16		64 000 %

15	67	580	%
16	64	000	%

Section D. Computation of Investment Income Percentage

Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17

17 7 640 % 18 7 160 %

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported

33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

information. See instructions

Part IV
Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional

Explanation

Schedule A, Part IV, List of Unusual Grants GRANT FOR THE INTERNATIONAL SCIENCE & ENGINEERING FAIR Date 10/20/08 Amount 55294889 GRANT FOR THE SCIENCE TALENT SEARCH Date 07/01/08 Amount 29134397 GRANT FOR THE INTERNATIONAL SCIENCE & ENGINEERING FAIR Date 12/31/09 Amount 2495882 GRANT FOR THE SCIENCE TALENT SEARCH Date 12/31/09 Amount 1262719

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493211002060

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ternai	Revenue Service P- Attach to Fo	orm 990. ► See separate instructions.		Tilspection
	me of the organization IETY FOR SCIENCE & THE PUBLIC		Empl	oyer identification number
				196483
Pa	rt I Organizations Maintaining Donor Ad		Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(1	b) Funds and other accounts
ı	Total number at end of year	(a) Bonor advised lands	(by railed and other accounts
- 2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		nor advis	sed Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	
Pai	t II Conservation Easements. Complete	ıf the organizatıon answered "Yes"	to Form	990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating in the protection of natural habitat. Preservation of open space. Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year.	ion or pleasure)	a certified	cally importantly land area I historic structure nservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements	:	2b	
С	Number of conservation easements on a certified his	storic structure included in (a)	2c	
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d	
3	Number of conservation easements modified, transfe the taxable year ▶	erred, released, extinguished, or termina	ted by the	e organization during
1	Number of states where property subject to conserva	ation easement is located ►		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ndling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, insp	-		
,	A mount of expenses incurred in monitoring, inspecti		_	the year 🟲 💲
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of se	ection	┌ Yes
•	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financi	•	•
ar	Complete if the organization answered '		, or Oth	er Similar Assets.
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, education or resea	rch in fur	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research		· · · · · · · · · · · · · · · · · · ·
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			-
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		for financ	• •
а	Revenues included in Form 990, Part VIII, line 1	_		▶ \$

b Assets included in Form 990, Part X

3	Using the organization's accession and othe		_				•				<u>ontinuea j</u>
_	items (check all that apply)		4	_	Loon	orovek	nange prog	ro me			
а	Public exhibition		a	<u>'</u>			iange prog	rams			
b	Scholarly research		e	ı	Other	•					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	aın hov	w the	y furthe	er the o	rganızatıor	n's ex	empt purpose ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organı	ızatıon			es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lan or other interm	ediary	for c	ontribu	itions o	or other ass	ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	/ing ta	able		Г		A mo	ount	
с	Beginning balance							1c			
d	Additions during the year						F	1d			
e	Distributions during the year						<u></u>	1e			
f	Ending balance						F	1f			
	-	000 D+ V I					L	Τ.		Yes	
2a	Did the organization include an amount on Fo		ie ZI,						ı	res) NO
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		n and		od "Vo	c" to [Dari	t IV line 10		
Pa	Endowment Funds. Complete	(a)Current Year)Prior `			o Years Back			'e) Four Y	ears Back
1a	Beginning of year balance	(,	\	,		(-,		1		7	
b	Contributions										
с	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as			<u> </u>			I		
a	Board designated or quasi-endowment	%	45								
ь	Permanent endowment ► %										
c 3a	Term endowment % Are there endowment funds not in the posses	ssion of the organiz	zation	that s	ara halo	d and a	dministere	d for i	the		
Ju	organization by	ssion of the organiz	Lucion	ciiac c	ire ireie	a unu u	ammistere	u 101 1		Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	ed on S	ched	ule R?				3b		
4	Describe in Part XIV the intended uses of th										
Par	t VI Investments—Land, Buildings	s, and Equipme	ent. S	ee F	orm 9	90, Pa	art X, line	10.	Τ		
	Description of investment				Cost or Is (Inves		(b)Cost or basis (oth		(c) Accumulated depreciation	(d) B	ook value
1a	Land						2	6,946			26,946
b	Buildings						1,46	1,722	1,137,38	9	324,333
	Leasehold improvements										
c	•			L							
	Equipment						52	3,319	423,09	1	100,228
d	·							3,319	423,09 401,03		100,228 80,356

(a) Description of security or category	Form 990, Part X, line 1	2. (c) Method	of valuation
(including name of security)	(b) Book value		ear market value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	
(2) 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	(2) 20011 14140	Cost or end-of-y	ear market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin			
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Scholarships Payable	5.) , line 25. (b) A mount		(b) Book value

Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,805,616
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,129,060
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,323,444
4	Net unrealized gains (losses) on investments	4	87,386
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	624,565
9	Total adjustments (net) Add lines 4 - 8	9	711,951
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-2,611,493
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	
1	Total revenue, gains, and other support per audited financial statements	1	10,893,002
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	87,386
3	Subtract line 2e from line 1	3	10,805,616
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	10,805,616
Par	XIIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial	1	13,504,495
2	statements	├	
² a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	- 2e	-624,565
3	Subtract line 2e from line 1	3	14,129,060
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
_	Other (Describe in Part XIV) 4b	1	
ь	· · · · · · · · · · · · · · · · · · ·	┨ _	0
	Add lines 4a and 4b	4c	
ь с 5	Add lines 4a and 4b	4c 5	14,129,060

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

| Identifier | Return Reference |

Ident if ier	Return Reference	Explanation
		PART XI, LINE 8 & PART XIII, LINE 2D AMOUNT REPRESENTS A NON-OPERATING GAIN RECOGNIZED BY
		SSP IN 2009 ON ITS POSTRETIREMENT BENEFIT LIABILITY THE GAIN MOSTLY RESULTED FROM
		NEGOTIATING LOWER PREMIUMS FOR THIS BENEFIT THAN WERE PREVIOUSLY OFFERED

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Statement of Activities Outside the United States

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

DLN: 93493211002060 OMB No 1545-0047

Open to Public

Name of the organization

SCHEDULE F

Department of the Treasury

Internal Revenue Service

(Form 990)

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC 53-0196483 Part I General Information on Activities Outside the United States. Complete if the organization answered

"Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (a) Region (f) Total expenditures (c) Number of (b) Number of region (by type) (i.e., ıs a program service, for region offices in the employees or fundraising, program services, describe specific type of grants to recipients located in reaion agents in region service(s) in region the region) AWARD PAYMENT AND AWARD PAYMENTS AND HOUSING GRANTS TO HOUSING GRANTS FOR

381,217

Part IV Use Sc	, line 15, for any nedule F-1 (Form	recipient who rec 990) if additional	eived more than \$5, space is needed.	.000. Check this box	r if no one recipient	received more thai	n \$5,000	▶ ┌
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add'l Data								
			sted above that are se or counsel has pro					
3 Enter total n	umber of other o	rganızatıons or eı	ntities	<u> </u>		<u></u>	. ▶	50

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

Use Schedule	F-1 (Form 990) ıf ad	ditional space	ıs needed.				, ,
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	CENTRAL AMERICA AND THE CARRIBEAN	5	2,167	EFT		N/A	N/A
A WARD PAYMENTS FOR	EAST ASIA AND THE PACIFIC	39	28,701	EFT		N/A	N/A
PARTICIPANTS AT INTEL INTERNATIONAL SCIENCE	EUROPE (INCLUDING ICELAND AND GREENLAND)	15	17,000	EFT		N/A	N/A
	MIDDLE EAST AND NORTH AFRICA	6	3,250	EFT		N/A	N/A
AWARD PAYMENTS FOR PARTICIPANTS AT INTEL INTERNATIONAL SCIENCE AND ENGINEERING FAIR	NORTH AMERICA	8	7,250	EFT		N/A	N/A
PARTICIPANTS AT INTEL INTERNATIONAL SCIENCE	RUSSIA AND THE NEWLY INDEPENDENT STATES	9	4,700	EFT		N/A	N/A
AWARD PAYMENTS FOR PARTICIPANTS AT INTEL INTERNATIONAL SCIENCE AND ENGINEERING FAIR	SOUTH AMERICA	16	7,101	EFT		N/A	N/A
AWARD PAYMENTS FOR PARTICIPANTS AT INTEL INTERNATIONAL SCIENCE AND ENGINEERING FAIR	SOUTH ASIA	8	19,500	EFT		N/A	N/A
	SUB SAHARAN AFRICA	1	500	EFT		N/A	N/A

Complete this part to	provide the information required	ın Part I, line 2, and any addıtıonal information.
Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVIDE A WRITTEN REQUEST DETAILING HOW THE FUNDS WILL BE USED INDIVIDUAL RECIPIENTS ARE PAID THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL AND VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE AWARD

Software ID: Software Version:

EIN: 53-0196483

Name: SOCIETY FOR SCIENCE & THE PUBLIC

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method (valuatıon (book, FMV appraisal, oth
	аррисавте)	CENTRAL AMERICA AND THE CARRIBEAN	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	,	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		EAST ASIA AND THE PACIFIC	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A		CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		EAST ASIA AND THE PACIFIC	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	9,139	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		EAST ASIA AND THE PACIFIC	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	5,131	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		EAST ASIA AND THE PACIFIC	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	13,328	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		MIDDLE EAST AND NORTH AFRICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	7,464	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		MIDDLE EAST AND NORTH AFRICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	15,994	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		MIDDLE EAST AND NORTH AFRICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	13,328	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		MIDDLE EAST AND NORTH AFRICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	5,331	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		NORTH AMERICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	15,394	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	6,531	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	,	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	5,331	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		RUSSIA AND THE NEWLY INDEPENDENT STATES	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	5,331	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		SOUTH AMERICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	15,803	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		SOUTH AMERICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	11,996	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		SOUTH AMERICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	15,423	CONFERENCE HOUSING PROVIDED AT ISEF	FMV
		SOUTH ASIA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	6,864		FMV
		SUB SAHARAN AFRICA	HOUSING GRANT FOR ISEF PARTICIPANTS		N/A	,	CONFERENCE HOUSING PROVIDED AT ISEF	FMV

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

DLN: 93493211002060

Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Name of the organization SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number

53-0196483

Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use

▶ □

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTGOMERY BLAIR HIGH SCHOOL51 UNIVERSITY BLVD SILVER SPRING, MD 20901	526000989		12,000				OUTREACH THROUGH THE FELLOWS PROGRAM
BRONX HIGH SCHOOL OF SCIENCE75 WEST 205TH STREET BRONX,NY 10468	136400434		9,000				OUTREACH THROUGH THE FELLOWS PROGRAM
THOMAS JEFFERSON HIGH SCHOOL FOR SCIENCE 6560 BRADDOCK RD ALEXANDRIA, VA 22312	540805373		15,000				OUTREACH THROUGH THE FELLOWS PROGRAM
STUYVESANT HIGH SCHOOL345 CHAMBERS ST NEW YORK, NY 10282	136608981		10,000				OUTREACH THROUGH THE FELLOWS PROGRAM
WARD MELVILLE HIGH SCHOOL380 OLD TOWN RD EAST SETAUKET, NY 11733	112116435		12,000				OUTREACH THROUGH THE FELLOWS PROGRAM
THE HARKER SCHOOL500 SARATOGA AVE SAN JOSE,CA 95129	941613808		6,000				OUTREACH THROUGH THE FELLOWS PROGRAM
BRECK SCHOOL123 OTTOWA AVE NORTH MINNEAPOLIS,MN 55422	410693894		6,000				OUTREACH THROUGH THE FELLOWS PROGRAM

Enter total number of section 501(c)(3) and government organizations . . Enter total number of other organizations

Schedule I (Form 990) 2009

Part IIII Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
AWARDS FOR PARTICIPATION IN SSP SCIENCE EDUCATION COMPETITIONS	772	1,427,437		N/A	N/A
OUTREACH GRANT FOR FELLOWS PROGRAM	10	85,000		N/A	N/A
See Additional Data Table					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVIDE A WRITTEN REQUEST DETAILING HOW THE FUNDS WILL BE USED INDIVIDUAL RECIPIENTS ARE PAID THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL AND VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE AWARD

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493211002060

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

SOCIETY FOR SCIENCE & THE PUBLIC 53-0196483 Questions Regarding Compensation Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo Any related organization? 6Ь Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Yes Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	.SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
ELIZABETH M MARINCOLA	(ı) (ıı)	274,519 0	•	12,871	24,500		348,097 0	.
GREGORY L MITCHELL	(I) (II)	146,312 0	-	1,464	15,104	 	7 179,087 0 0	,
THOMAS SIEGFRIED	(1) (11)	139,269 0	_	2,402	13,927	 	169,040	,
HARRY A ROTHMANN	(1) (11)	122,811	0 C	2,138	12,358		5 153,343 0 0	J
JENNIFER CARTER	(I) (II)	119,848 0		11,171		 	159,308	,
						-		
				'				
	'		<u> </u>	<u>'</u>		 		
	+			<u>'</u>				
	'			<u> </u>				
	'		<u> </u>	<u>'</u>	 	1		
	'	 /		<u> </u>	 	 		<u> </u>
	'	!	<u> </u>		<u> </u>	1		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	'	SSP PAYS SOCIAL CLUB DUES FOR THE PRESIDENT AT THE BEHEST OF THE BOARD THE BENEFIT WAS TREATED AS TAXABLE COMPENSATION TO THE PRESIDENT
		THE BONUS IS CONSIDERED AS PART OF THE OVERALL COMPENSATION PACKAGE AND IS COMPARED TO THE COMPENSATION STUDY INFORMATION REVIEWED BY THE EXECUTIVE COMMITTEE AS PART OF THE COMPENSATION REVIEW

Schedule J (Form 990) 2009

SCHEDULE 0

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

2009

Open to Public Inspection

Internal Revenue Service

Name of the organization
SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number

53-0196483

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE FORM 990 WAS PROVIDED TO SSP'S AUDIT COMMITTEE FOR REVIEW AND COMMENTS PRIOR TO FILING THE RETURN THE FORM WAS ALSO PROVIDED TO THE REST OF SSP'S BOARD FOR REVIEW
Form 990, Part VI, Section B, line 12c		ONCE A YEAR, OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND ALL OTHER EMPLOYEES ARE REQUIRED TO AFFIRMATIVELY DISCLOSE ANY POTENTIAL CONFLICTS BY FILLING OUT A FORM RESPONDING TO THIS INQUIRY THESE RESPONSES ARE REVIEWED BY SSP MANAGEMENT AND THE SSP AUDIT COMMITTEE
Form 990, Part VI, Section B, line 15		COMPENSATION FOR THE CEO, AS WELL AS THE OFFICERS AND KEY EMPLOYEES, WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE SSP BOARD ALL MEMBERS OF THIS COMMITTEE ARE INDEPENDENT AND THEIR DELIBERATIONS AND DECISIONS ARE DOCUMENTED. THEY UTILIZED COMPARABILITY DATA WHEN MAKING THEIR DECISION. SSP ACQUIRES A LOCAL NON-PROFIT ORGANIZATION SALARY SURVEY. MOST RECENTLY, SSP HAS ACQUIRED SURVEYS FOR 2009 AND 2008.
Form 990, Part VI, Section C, line 19		DOCUMENTS ARE MADE AVAILABLE UPON REQUEST
FORM 990, PART XI, LINE 2C		THE AUDIT COMMITTEE OVERSEES THE AUDIT AND SELECTION OF THE AUDIT FIRM THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
FORM 990, PART VI, SECTION A, LINE 1A		THE CHAIR, VICE-CHAIR, TREASURER, SECRETARY, AND ONE OTHER INDIVIDUAL FROM THE BOARD MAKE UP THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE MAY ACT FOR THE FULL BOARD IN MAKING DECISIONS