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Form 99

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)

2010

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Form 990 (2010)

A F	or the	2010 calend	dar year, or tax year beginning , 2010, at	nd end	ing			, 20
B CI	neck if a	pplicable	C Name of organization INDIANA ACADEMY OF SCIENCE		_		D	Employer identification no
Ac	dress c	hange	Doing BusinessAs					35-1068830
 ' Na	ame cha	inge	Number and street (or P O box if mail is not delivered to street address)	R	com/suite		E	Telephone number
==	ntal retu		140 SENATE AVE	- 1				(317) 243-0107
==	minate		City or town, state or countryand ZIP+ 4					3,395,869
=	nended		INDIANAPOLIS, IN 46204-2296				٦	Gross receipts \$
=		n pending	F Name and address of principal officer	_			_ں_	Gross receipts 4
^	phoalio	ii penulily	Name and address or principal officer		H(a) is t	his a gro	up retu	rm for Yes X No
		at atatus V	501(c)(3)501(c) (1			 ,
					H(D) Are	vo," atta	nes inc ch a lis	cluded? Yes No it (see instructions) number
	ebsite:			100				
		rganization X		ou. To:	95 M	State o	of legal	domicile IN
Par		Summar						
	1		ribe the organization's mission or most significant activities: THE ACADEMY I					
Δ.			USION OF SCIENTIFIC INFORMATION, ENCOURAGES COMMUNICA	ATION	AND C	OOPER	ITAS	ON AMONG
Ĉ G	İ	SCIENTIS	TS AND IMPROVEMENT IN EDUCATION IN THE SCIENCES.					······································
io								
V e	2	Check this b	box ▶ ☐ If the organization discontinued its operations or disposed of more than	1 25% o	f its net a	issets.		
t n	3	Number of v	voting members of the governing body (Part VI, line 1a)		• • • •	• • •	3 _	9
ia en	4	Number of in	independent voting members of the governing body (Part VI, line 1b)			• • • [4	9
8 C	5	Total number	er of individuals employed in calendar year 2010 (Part V, line 2a)			٦٠٠٠	5	1
& e	6	Total number	er of volunteers (estimate if necessary) · · · · · · · · · · · · · · · · · · ·			[6	115
-			ated business revenue from Part VIII, column (C), line 12 · · · · · · · · · · ·				7a	0
			ed business taxable income from Form 990-T, line 34 · · · · · · · · · · · ·			ا	7b	0
.2031	 				Prior '	Veor		CurrentYear
	8	Contribution	ns and grants (Part V(III, line II)		FIRM		525	49,742
e Ç≕¥	9		rrice revenue (Batt VIII, lline 2g)				900	1,564
⊱e Pe	10		income (Part VIII, column (A), lines 8, 4, and 7d)				560	62,537
	1		nup dPart VIII, column (A), lines 5, 4, and 7d)	∷			206	
	11			∵				
	12		ue -add lines 8 through 11 (must edual Part VIII, column (A), line 12)			145,		116,078
SCANIEL	13		similar amounts paid (Part IX, column (A), lines 1-3)	∵—		- σ Ι,	398	89,552
ZE.	14		id to or former tidars (Hart IX, dolumo (A), line 4)	••⊢				0
(X)	15		helecompensation, employee benefits (Part IX, column (A), lines 5-10)	∵		15,	000	89,898
(e)	1		al fundraising fees (Part IX, column (A), line 11e)	• • └				0
	1		aising expenses (Part IX, column (D), line 25▶0	_	,,	. **		
e 8	17		nses (Part IX, column (A), lines 11a-11d, 11f-24f)	• •		154,	-	241,565
•	18	Total expens	ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	••		230,		421,015
	19	Revenue le	ss expenses. Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·	• •		(85,	, 278) (304 ,937)
Net				Ве	ginning of (End of Year
Asset: or	20	Total assets	s (Part X, line 16)	••	7	,181,	186	6,874,379
Fund	21	Total liabiliti	es (Part X, line 26)	• • [4,	755	2,885
Bal- ances	22	Net assets	or fund balances. Subtract line 21 from line 20 · · · · · · · · · · · · · · · · · ·	• •	7	,176,	431	6,871,494
Par	rt II	Signatu	ure Block					
			declare that I have examined this return, including accompanying schedules and statements, and to					
and be	eliet, it is	true, correct, a	and complete Declaration of preparer (other than officer) is based on all information of which prepare	er nas an	y knowledg	je	т	
	•	EDWA	ARD FRAZIER THE T. TY				16	-16-2011
Šigi	n	Signati	ture of officer				Date	
Her		EDWA	ARD FRAZIER, PRESIDENT TYEGSUVEY					
	_	Туре о	or print name and title					
		Print/Type o	preparer's name Preparer's signature Date		Che	ck	if P	TIN
Paid	4		R HANKEE CPA Oweld R Hankson 06-07-20:	11	1	employe	i	
		 	A TIME UNIVERS C LOCAL CONTRACTOR		Firm's EIN		~ _l_	
	pare	1	2005 VIIVORINA DE CARE 104				7-3	37-1040
USE	Only	y Fuins addri	INDIANAPOLIS IN 46268-3055		Phone no	J 1		1040
Naco	the ID	S discuss the	is return with the preparer shown above? (see instructions) · · · · · · · · ·					V Vaa
iviay	THE IK	o นเจบนรร เก	is totall with the biehaler showll apover (see insuractions)			- • • •	• • •	· · · X Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

F,orm	990 (2010) INDIANA ACADEMY OF SCIENCE 35-£068830 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE ACADEMY PROMOTES SCIENTIFIC RESEARCH AND THE DIFFUSION OF SCIENTIFIC INFORMATION,
	ENCOURAGES COMMUNICATION AND COOPERATION AMONG SCIENTISTS AND IMPROVEMENT IN EDUCATION IN THE
	SCIENCES.
	•
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 89,552 including grants of \$ 89,552) (Revenue \$)
74	RESEARCH GRANTS TO CONDUCT SCIENTIFIC RESEARCH BY 36 ADULT RESEARCHERS AND 36 HIGH SCHOOL
	STUDENTS
	STODENTS
4b	(Code) (Expenses \$17,192 including grants of \$) (Revenue \$8,811)
	PUBLISHED "PROCEEDINGS OF THE INDIANA ACADEMY OF SCIENCE" CONTAINING RESEARCH OF SCIENTISTS
	IN INDIANA AND OTHER STATES. THE PROCEEDINGS ARE DISTRIBUTED TO OVER 1,200 MEMBERS AND 450
	LIBRARIES IN THE UNITED STATES.
4c	(Code) (Expenses \$ 45,727 including grants of \$) (Revenue \$)
	PROVIDED WORKSHOPS, SEMINARS AND EVENTS FOR THE PUBLIC AND ACADEMY MEMBERS TO EXCHANGE
	SCIENTIFIC INFORMATION. ATTENDED BY OVER 500.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 23,018 including grants of \$) (Revenue \$)
4e	

35-1068830

Page 2

Ęorm	990 _h (2010) INDIANA ACADEMY OF SCIENCE 35-10688	30•	P	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			1
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	Ì	}	1
7.	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	<u> </u>	,	ļ
i	or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	<u> </u>	X
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		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	}	}	ł
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II • • • • • • • • • • • • • • • • • •	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			l
	complete Schedule D, Part III · · · · · · · · · · · · · · · · ·	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	ĺ		
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV · · · · · · · · · · · · · · · · · ·	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	١		
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		٠.	ŀ
_	VII, VIII, IX, or X as applicable.	<u> </u>	٠ .	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI · · · · · · · · · · · · · · · · · ·	44.		١,,
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	11a	-	X
ь	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII • • • • • • • • • • • • • • • • • •	11b		v
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more	110		X
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII •••••••••••••••••••••••••••••••••	11c		\ _V
ં ત	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	116		X
, -	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	1-
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110	-	├
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X · · · · · ·	116		X
12a	The same of the sa			<u> </u>
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12a	}	X
ь			 	1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		1	 ``
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		1	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV · · · · · · · · · · · · · · · · · ·	16		X
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 (see instructions)	17		X
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	<u></u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	
	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19	<u></u>	X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H · · · · · · · · · · · · · · · · · ·	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	I	l

Pa	rt IV Checklist of Required Schedules (continued)			_ <u></u> _
			Yes	No
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		X
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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J · · · · · · · · · · · · · · · · · ·	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a	<u> </u>	X
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		1
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			T -
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	İ		1
	990-EZ? If "Yes," complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b		Х
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 !!	26	i	L X
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?			ł
	If "Yes," complete Schedule L, Part III - · · · · · · · · · · · · · · · · ·	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	2	240	141
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			153 27.73
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28a	5.25.000	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			 ^^
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	285	1	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	<u> </u>		 ^
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		1	
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30	1	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	 	 	 ^
	Partle	31	Ì	X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			 ^*
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		 	 ^
	III, IV, and V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a		 	 ^
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		1	
	Part V, line 2 · · · · · · · · · · · · · · · · · ·		ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related			}
	organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		 	╁
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	1
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	-	-	<u> </u>
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •	•		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable · · · · · · · · · 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filèd for the calendar year ending with or within the year covered by this return • • • • • 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	. برده د .		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O · · · · · · · · · · · · · · · · · ·	3b		
4a	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)? · · · · · · · · · · · · · · · · · · ·	4a		_X_
b	If "Yes," enter the name of the foreign country:	* (3)		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	erang.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? • • • • • • • • • • • • • • • • • • •	5b		<u>X</u>
C Ea	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible?	e-		v
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		X
	gifts were not tax deductible? · · · · · · · · · · · · · · · · · · ·	6b		
7	Organizations that may receive deductible contributions under section 170(c).	5. :		
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?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? • • • • • • • • • • • • • • • • • • •	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·		ر ا	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? • •	7g		
h	If the organization received a contribution of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		,	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ME.	<u>^</u> .	
	organization, have excess business holdings at any time during the year?	8	,	ļ <u>-</u> -
9_	Sponsoring organizations maintaining donor advised funds.	S Dec	-	
a	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		<u> </u>
ь 10	Section 501(c)(7) organizations. Enter:	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • 10b			,
11	Section 501(c)(12) organizations. Enter		7	
a	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·		ŀ.	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1. 185		
	amounts due or received from them.)	Target Sa		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? • • • • • • • • • • • • • • • • • • •	12a	<u></u>	<u></u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year • • • • • • • • 12b	CONT.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u>5</u> ; .	<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.	. in.		
b	Enter the amount of reserves the organization is required to maintain by the states in which	The state of]
	the organization is licensed to issue qualified health plans	;	1	
C	Enter the amount of reserves on hand		<u> </u>	17
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	11 103, That it mode a count 720 to report these payments / 11 140, provide an explanation in scriedule O · · · · · · · · · · · ·	14b	<u></u>	<u> </u>

Page 6

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

for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in

Schedule O. See instructions

Check if Schedule O contains a response to any question in this Part VI · · · ·	•	•	•	• •	 •	•	٠

Sec	tion A. Governing Body and Management	 -	
		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year · · · · · · · · · 1a 9	,	
b	Enter the number of voting members included in line 1a, above, who are independent 1b 9		£.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	<u>.</u>	
	any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct		
	supervision of officers, directors or trustees, or key employees to a management company or other person? • • • • • • • • • • • • • • • • • • •		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? •••••• 4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? ••••••• 5		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	1	
	of the governing body? • • • • • • • • • • • • • • • • • • •		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • • • • • • • • • • • • • • • • • •	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	4 24	277
	the year by the following.		
а	The governing body? • • • • • • • • • • • • • • • • • • •	X	
b	Each committee with authority to act on behalf of the governing body? • • • • • • • • • • • • • • • • • • •	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	T	-
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		
		Yes	No
10a	Does the organization have local chapters, branches, or affiliates? • • • • • • • • • • • • • • • • • • •	а	X
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?	ь	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		
	form? · · · · · · · · · · · · · · · · · · ·	a Ì	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	是為怎	1
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 · · · · · · · · · · · · · · · · · ·	аХ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		
	rise to conflicts? • • • • • • • • • • • • • • • • • • •	b X	}
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		
	describe in Schedule O how this is done	c X	
13	Does the organization have a written whistleblower policy?		
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by	14.18	4.55
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
а	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		5 (SE)
16a	·····································		域為
	with a taxable entity during the year?	a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	S 150	E-74
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1 - 4 A
	the organization's exempt status with respect to such arrangements?	b	
Sec	tion C. Disclosure		
17	List the states with which a copy of this Form 990 is required to be filed IN		
18	Section 6104 requires an organization to make its Forms 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		
	Own website X Upon request		
19	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.		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the		
	organization ► EDWARD FRAZIER (317)243-0107		
	140 SENATE AVE INDIANAPOLIS, IN 46204-2296		

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100.000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	l t d n r'ı d u r i s e vt c i e t d e o	i t nr su t s	Of f - c e	K e y	Hat appi H c e m g m p l g m p l g m p e s n p e s n p e s s e t e d	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) ANN WILSON				┢						
CHAIR, RESEARCH GRANTS	2.00				Х			0	0	0
(2) BILL MCKNIGHT										
CHAIR PUBLICATION COMMITTEE					X			5,000	0	0
(3) EDWARD FRAZIER										
TREASURER	5.00				Х			o	o	0
(4) HEATHER BRUNS										
SECRETARY	5.00				Х			O	0	0
(5) JAMES CURRY										
PRESIDENT	5.00				Х			0	o	0
(6) STANLEY BURDEN			Γ'''							
CHAIR, FOUNDATION COMMITTEE	2.00	-			X			o	0	0
(7) BILL MCKNIGHT		1								
TRANSITION OFFICER						Х		50,000	o	o
(8) DELORES BROWN		1							····	
FULL TIME EXECUTIVE DIRECTOR (NOV &			1			X		13,500	0	0
(9) JAMES BERRY										
PROCEEDINGS EDITOR			1			X		2,500	o	0
(10)MICHAEL FOOS	1	1								
WEB MASTER						Х		12,500	0	0
(11)NELSON SHAFFER										
PART TIME EXECUTIVE DIRECTOR						Х		5,000	0	0
(12)										
(13)							-			
(14)					-					
(15)		_	-	_	-		-	, , , , , , , , , , , , , , , , , , , ,		
(16)	 		-				_		· · · · · · · · · · · · · · · · · · ·	
				1		1				

Par	Section A. Officers, Directors, Trustees,		yees,	and	i Hiç	ghes	st Con	per	sated Employees	(continued)			
	(A)	(A) (B) (C) (D) (E)									(F		
	Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Post I t d I n r i I s e Vt e t I d e o I a o I r	l t n r s u t s i t e	Office	K	at appl H c e i g m p f e e s t s e t e d	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estima amour other compen from organizario organizario.	nt of er sation the ation lated
(17)											\dagger		
(18)										 -	\top		
(19)			-								\dagger		
(20)						-					十		
(21)						 					\top		 .
(22)											\top		
(23)											\dashv		
(24)	···								<u></u>		\dashv		
(25)						T					_		
(26)					\mid		-				7	· .	
(27)				_	\ -					 .	\forall		
(28)				-							\dashv		
1b	Sub-total · · · · · · · · · · · · · · · · · · ·	• • • • •	• • •	• •	• •	٠.	• • •				十		
C	Total from continuation sheets to Part VII, Sectior	A						>					
	Total (add lines 1b and 1c)		_			• •		>	88,500		0		0
2	Total number of individuals (including but not limited t	o those liste	d abov	/e) v	who	rece	eived n	nore	than \$100,000 in		_		
	reportable compensation from the organization										<u> </u>	- Iv-	a Na
3	Did the organization list any former officer, director o	r trustee, ke	y emp	loye	e, o	r hig	hest c	omp	ensated		[Ye	s No
	employee on line 1a? If "Yes," complete Schedule J f									• • • • • •	\cdots [3	Х
4	For any individual listed on line 1a, is the sum of repo	-					-				(
	the organization and related organizations greater that individual					•					-	4	
5	Did any person listed on line 1a receive or accrue coi									• • • • • • •	.	-	X
_	for services rendered to the organization? If "Yes," co	-		-			-				.	5	- X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest compensate compensation from the organization	d independe	nt con	tract	tors	that	receiv	ed r	nore than \$100,00	0 of			
	(A)								(B)	· <u>·</u>		(C)	
	Name and business address	is							Description of s	services		Compense	ition
_													
_								—.					
2	Total number of independent contractors (including b	ut not limited	d to the	260	liete	d ah	ove)	uho :	received				
-	more than \$100,000 in compensation from the organ			-35		u au	.576) W	•110	COCITOR				•

Part V		Statement of Revenue	· ·			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns · · · ·		1a			•		
	b	Membership dues · · · · ·		1b	17,930				
ontn- toons,	C	Fundraising events · · · ·		1c		-			
fts,	đ	Related organizations · · · ·		1d			••	,	
ants	е	Government grants (contribution	ons) · ·	1e	28,811		•	· e	
ther	f	All other contributions, gifts, gr	rants,						
milar mounts		and similar amounts not include		1f	3,001	•	سو ي		
IICAIIG	g	Noncash contributions include	d in lines 1	a-1f [.] \$, , , , , , , , , , , ,		
	h	Total. Add lines 1a-1f · · ·		• • •	• • • • • •	49,742	*	* * * * * * * * * * * * * * * * * * * *	
Ì				j	Business Code	المستعدد	المنافع المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد المستحد	and the same	L
	2a	MEETINGS			541700	40			40
	b	JUNIOR ACADEMY REGIST	<u> </u>		541700	1,286			1,286
rogram ervice	C	TALENT SEARCH			541700	238			238
evenue	d								
	е								
1		All other program service reven							
	g	Total. Add lines 2a-2f · · ·	<u></u>	• • •	• • • • • • •	1,564	- 11. E	" 4" (d) 4 1	,, ·
		Investment income (including dother similar amounts) • • •				207,047			207,047
	4	Income from investment of tax-	exempt bo	nd pro	ceeds ···▶ [
	5	Royalties · · · · · · · ·		• • •	· · · · · • •		_		
		[(ı) Rea	al	(ii) Personal	٠٠ ، _{د د د} ٣٠٠	10	1000000000000000000000000000000000000	* * * ,
ļ	6a	Gross Rents · · · · · ·							
	þ	Less. rental expenses • • • • [
	C	Rental income or (loss) · · · [والمراجعة المستحدد		A Marie Con Principal	
	d	Net rental income or (loss) •		• • •	• • • • • • •				
	7a	Gross amount from sales of	(ı) Securi	ties	(II) Other		Say Say	124	٠,
		assets other than inventory	3,124	, 936			a a second		
	ь	Less: cost or other basis				,			
0		and sales expenses · · · ·			3,269,446	_			,
ť		Gain or (loss) · · · · · ·	3,124	936	(3,269,446		tie de l'écité	1.16	المناهدة ا
h	l	Net gain or (loss) · · · · ·	• • • • • •	• • •	• • • • • • •	(144,510	()	* * * * * * * * * * * * * * * * * * *	(144,51
ř	8a	Gross income from fundraising	}			, , , , , , ,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		\$ 1 m
R		events (not including \$			[
e		of contributions reported on line				4,		100	
V		See Part IV, line 18 · · · ·				î			*****
n		Less. direct expenses · · ·			L				the in
u	i .	Net income or (loss) from fund	•	nts -	•••••		34.3	40 51 (1991 - 1991 - 1991	
е	9a	Gross income from gaming act					1	Page State	
		See Part IV, line 19 · · · ·				, , ,		1.334.6	1 .
		Less: direct expenses · · · ·			L		شد سفند ا	t- William	
	C	Net income or (loss) from gam	ing activitie	es · ·	•••••		ļ		<u> </u>
	10a	Gross sales of inventory, less				,			ŀ
	١.	returns and allowances · · ·		_	12,580		*.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ļ-
	l	Less cost of goods sold · ·			10,345			الأماضع الكناهداكم	
	_ <u>c</u>	Net income or (loss) from sale		огу • •		2,235	<u> </u>		2,23
	44 -	Miscellaneous Revenue	<u> </u>		Business Code			<u>-</u>	
	11a							 	-
	b						 	 	
					L	<u> </u>	L	<u> </u>	L
	C	All other courses:				1			
	d	All other revenue · · · · · · Total. Add lines 11a-11d ·		•••			<u> </u>	3-	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Total expenses (D) (B) Program service Do not include amounts reported on lines 6b, Fundraising Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · · · · · · · · 89,552 89,552 Grants and other assistance to governments, 3 organizations, and individuals outside the U.S See Part IV, lines 15 and 16 · · · · · · · · · 5 Compensation of current officers, directors, trustees, and key employees 88,500 2,500 86,000 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) · · · · · 365 7 Other salaries and wages 365 Pension plan contributions (include section 401(k) 8 and section 403(b) employer contributions) 9 10 1,033 1,033 Fees for services (non-employees): 11 7,488 7,488 Legal 1,392 1,392 Lobbying Professional fundraising services See Part IV, line 17 • 中山下 公司 不 Investment management fees · · · · · · · · · g 12 Advertising and promotion 56,515 16,423 40,092 13 14 Information technology 15 16 20,368 20,368 84 17 84 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 45,137 45,137 Conferences, conventions, and meetings 19 20 21 22 Depreciation, depletion, and amortization 590 23 848 258 24 Other expenses litemize expenses not covered 1 7 . (a) above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) COMMITTEE & OFFICER EXPENSE 31,097 31,097 YOUTH ACTIVITY 21,287 21,287 INVESTMENT FEE 36,588 36,588 FOREIGN TAX 171 171 EXEC DIRECTOR ACQUISITION 19,652 19,652 938 938 Total functional expenses. Add lines 1 through 24f - -421,015 175,489 245,526 25 0 Joint Costs. Check here ▶ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Form 990 (2010)

Part)	<u>(T, </u>	Balance Sheet	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	32,254	1	49,134
1	2	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·	592,981	2	270,138
		Pledges and grants receivable, net	332,702	3	2.07250
	3	Accounts receivable, net		4	
	4			*	
1	5	Receivables from current and former officers, directors, trustees, key			7.
		employees, and highest compensated employees. Complete Part II of	المحاليشيات المشاياة		is subsect or discountable
- }		Schedule L · · · · · · · · · · · · · · · · · ·	7.71	5	
1	6	Receivables from other disqualified persons (as defined under section			;· 🛴 }*
A		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	The second secon	1	10 (10 m) 1 m = 1 m = 1
s		employers and sponsoring organizations of section 501(c)(9) voluntary		1 m	Sandara e e e e e e e e e e e e e e e e e e
S		employees' beneficiary organizations (see instructions) $\cdots \cdots \cdots \cdots \cdots$		6	<u> </u>
e	7	Notes and loans receivable, net		7	
s	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges · · · · · · · · · · · · · · · · · · ·		9	
	10a	Land, buildings, and equipment, cost or	引、高いたのでは	100 mg	Sala Sala
		other basis. Complete Part VI of Schedule D · · · · 10a	A STATE OF THE STA		
	b	Less accumulated depreciation • • • • • • • • 10b	Commence of the commence of th	10c	SHEET BEET (A.S.
- {	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	6,555,951	11	6,555,107
	12	Investments - other securities. See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		12	
1	13	Investments - program-related. See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		13	
ſ	14	Intangible assets · · · · · · · · · · · · · · · · · · ·		14	
- 1	15	Other assets. See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		15	
}	16	Total assets. Add lines 1 through 15 (must equal line 34) · · · · · · · · · · · · · · · · · · ·	7,181,186	16	6,874,379
	17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·	.,202,200	17	
	18	Grants payable	-	18	
- 1	19	Deferred revenue		19	
L	-	Tax-exempt bond liabilities		20	
a	20	·			
b	21	Escrow or custodial account liability. Complete Part IV of Schedule D	San Arthur Maria Cara	21	
i	22	Payables to current and former officers, directors, trustees, key		N. S.	
		employees, highest compensated employees, and disqualified	The whole was a second with the	. والتناف	ACMILLAS (
ţ		persons Complete Part II of Schedule L		22	
e	23	Secured mortgages and notes payable to unrelated third parties · · · · · · · · ·		23	
S	24	Unsecured notes and loans payable to unrelated third parties · · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities. Complete Part X of Schedule D	4,755	25	2,885
	26	Total liabilities. Add lines 17 through 25	4,755	26	2,88
[Organizations that follow SFAS 117, check here▶ ☐ and			XXX
l F		complete lines 27 through 29, and lines 33 and 34.			
'n	27	Unrestricted net assets · · · · · · · · · · · · · · · · · · ·		27	
ď	28	Temporarily restricted net assets		28	
В	29	Permanently restricted net assets · · · · · · · · · · · · · · · · · · ·		29	
a		Organizations that do not follow SFAS 117, check here \blacktriangleright $\overline{[X]}$		144 J	
a		and complete lines 30 through 34.		15.4	
a n	30	Capital stock or trust principal, or current funds		30	
С	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
e	32	Retained earnings, endowment, accumulated income, or other funds	7,176,431	32	6,871,49
s	33	Total net assets or fund balances · · · · · · · · · · · · · · · · · · ·	7,176,431	33	6,871,494
- 1	34	Total liabilities and net assets/fund balances		34	6,874,379

EEA

Form	990.(2010) INDIANA ACADEMY OF SCIENCE	35-10688	30 ,	Pa	age 12
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				•
1	Total revenue (must equal Part VIII, column (A), line 12)	1	:	L16,	078
2	Total expenses (must equal Part IX, column (A), line 25)	2	-	121,0	015
3	Revenue less expenses Subtract line 2 from line 1 · · · · · · · · · · · · · · · · · ·	3	(304,	937)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,1	176,4	131
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			-	
	column (B)) • • • • • • • • • • • • • • • • • •	6	6,8	371,4	194
Par	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				•
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		13.	1 10	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1 2	<i>'.:</i>	
	Schedule O.		4	:	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		· 2a		X
b	Were the organization's financial statements audited by an independent accountant?		· 2b		X
С	If "Yes" to line 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? • • • • •		· 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		25	,	7 7 10
	Schedule O.		4 4		14,50
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		13. 62	5 TO 1	1
	issued on a separate basis, consolidated basis, or both:		. ~ /~		- 187 3
	Separate basis Consolidated basis Both consolidated and separate basis		\.\.	:	ر ا '۔'
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		Х
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		
	EEA		Form	990 (2010)

SCHEDIJLE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ.

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

► See separate instructions.

OMB No 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INDIANA ACADEMY OF SCIENCE

Employer identification number 35-1068830

Tha	rt I	Reason for	Public Charity	Status (All organiza	ations mus	t complete	this part)	See instri	uctions.				_
IIIE	orga			use it is: (For lines 1 thr									
1		A church, convention	n of churches, or a	ssociation of churches of	described i	n section	170(b)(1)(A)(i).					
2		A school described i	n section 170(b)(1	I)(A)(ii). (Attach Schedu	ıle E.)								
3		A hospital or a coop	erative hospital ser	vice organization descr	ibed in sec	tion 170(t	o)(1)(A)(iii).					
4		A medical research	organization opera	ted in conjunction with a	a hospital d	lescribed ii	n section	170(b)(1)(A)(iii). Eni	ter the hos	pital's na	ame,	
		city, and state:											
5		An organization ope	rated for the benef	it of a college or univers	ity owned	or operate	d by a gov	ernmental	unit desc	ribed in			_
		section 170(b)(1)(A)(iv). (Complete Pa	art II)									
6		A federal, state, or le	ocal government or	r governmental unit des	cribed in se	ection 170	(b)(1)(A)(¹	v).					
7	X	An organization that	normally receives	a substantial part of its	support fro	m a gover	nmental u	nit or from	the gener	al public			
		described in section	170(b)(1)(A)(vi).	(Complete Part II.)									
8		A community trust d	escribed ın sectioi	n 170(b)(1)(A)(vi). (Con	nplete Part	H)							
9		An organization that	normally receives:	: (1) more than 33 1/3%	of its supp	ort from co	ontribution	s, membe	rship fees,	and gross			
		receipts from activiti	es related to its ex	empt functions - subject	t to certain	exceptions	s, and (2)	no more th	nan 33 1/3	% of its			
		support from gross i	nvestment income	and unrelated business	taxable in	come (less	s section 5	11 tax) fro	m busines	sses			
		acquired by the orga	anızation after June	30, 1975 See section	509(a)(2).	(Complete	e Part III)						
10		An organization orga	anized and operate	ed exclusively to test for	public safe	ety. See se	ection 509	(a)(4).					
11		An organization orga	anized and operate	ed exclusively for the be	nefit of, to	perform th	e functions	s of, or to	carry out ti	he			
		purposes of one or	more publicly supp	orted organizations des	cribed in se	ection 509	(a)(1) or se	ection 509	(a)(2). See	section			
		509(a)(3). Check the	e box that describe	s the type of supporting	organizati	on and cor	mplete line	s 11e thro	ugh 11h				
		a 🗌 Type I	ь 🔲 Тура	ell c	Type ill-	Functiona	lly integrat	ed	d	Type I	I-Other		
0		By checking this bo	x, I certify that the	organization is not conti	rolled direc	tly or indire	ectly by on	e or more	disqualifie	ed			-
		persons other than	foundation manage	ers and other than one o	r more pub	licly suppo	orted organ	nızations c	lescribed i	n section			
		509(a)(1) or section	509(a)(2).										
f		If the organization re	eceived a written d	etermination from the IE									
					(S that it is	a Type I,	Type II, or	Type III s	upporting				
		organization, check	this box · · · ·		to that it is	a Type I,	Type II, or	Type III s	upporting			• • • • [
g		•		zation accepted any gift				• • • • •	upporting			••••[
g		•						• • • • •	upporting			••••[
g		Since August 17, 20 following persons?	006, has the organi		t or contrib	ution from	any of the	••••	upporting	• • • •		Yes No	
g		Since August 17, 20 following persons? (i) A person who	006, has the organi	zation accepted any gift	t or contrib	ution from	any of the	••••	upporting		11g(i)	Yes No	
g		Since August 17, 20 following persons? (i) A person who and (iii) below,	006, has the organi directly or indirectly the governing bod	zation accepted any gift	t or contribution together nization?	ution from	any of the	••••	upporting		11g(i) 11g(ii)	Yes No	
g		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb	006, has the organi directly or indirectly the governing bod per of a person des	zation accepted any gift controls, either alone o y of the supported organ	t or contribution together nization?	ution from	any of the	••••	upporting			Yes No	
g _h		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll	one, has the organidirectly or indirectly the governing bod per of a person desided entity of a person	zation accepted any gift y controls, either alone o y of the supported organ cribed in (i) above?	or together nization?	ution from	any of the	••••	upporting		11g(ii)	Yes No	
		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	one, has the organidirectly or indirectly the governing bod per of a person desided entity of a person	zation accepted any gift of controls, either alone of y of the supported organication described in (i) above? on described in (i) or (ii) t the supported organization	or together nization? above?	ution from with perso	any of the	ned in (ii)	(vi)	s the	11g(ii) 11g(iii) (vii)	Amount of	
		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organication on described in (i) or (ii) t the supported organization (described on lines 1-9	or together nization? above? ation(s).	ution from with perso	any of the	ou notify	(vi) organizat	tion in col	11g(ii) 11g(iii) (vii)		
		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organication described in (i) above? on described in (i) or (ii) t the supported organization	or together nization? above? ation(s).	ution from with perso	any of the ns describ (v) Did y the organ	ned in (ii)	(vi) organizat		11g(ii) 11g(iii) (vii)	Amount of	
_ <u>h</u>		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s).	ution from with perso	any of the ns describ (v) Did y the organ	ou notify	(vi) organizat	tion in col zed in the	11g(ii) 11g(iii) (vii)	Amount of	
		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
<u>h</u>		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
_ <u>h</u>		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
<u>h</u>		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B) (C) (D)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des ed entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso	(v) Did y the organ	ou notify in action in of your port?	(vi) organizat (i) organi	tion in col zed in the S?	11g(ii) 11g(iii) (vii)	Amount of	
(A) (B) (C) (D)		Since August 17, 20 following persons? (i) A person who and (iii) below, (ii) A family memb (iii) A 35% controll Provide the followin	directly or indirectly the governing bod per of a person des led entity of a person g information abou	zation accepted any gift of controls, either alone of y of the supported organ cribed in (i) above? on described in (i) or (ii) t the supported organization (described on lines 1-9 above or IRC section	or together nization? above? ation(s). (iv) Is the control of the governing of the control of the governing of the control of	with perso organization sted in your document?	(v) Did y the organ col. (i) Yes	ou notify ization in of your port?	(vi) organizat (i) organiz U Yes	tion in col zed in the S?	11g(ii) 11g(iii) (vii) / st	Amount of	

18

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not 69,388 include any "unusual grants") 42,442 50,335 47,323 62,322 271,810 Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the 20,000 20,000 20,000 20,000 20,000 100,000 organization without charge 70,335 Total. Add lines 1 through 3 · · · · · 62,442 67,323 89,388 82,322 371,810 3 19 Feb 15 1 The portion of total contributions by each 41.5 1907 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) Public support. Subtract line 5 from In 4 371,810 Section B. Total Support (b) 2007 (a) 2006 (c) 2008 (d) 2009 Calendar year (or fiscal year beginning in)▶ (e) 2010 (f) Total 62,442 70,335 67,323 89,388 Amounts from line 4 82,322 371,810 7 Gross income from interest, dividends. 8 payments received on securities loans, rents, royalties and income from similar 223,000 219,147 251,640 215,062 207,047 1,115,896 9 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 • To 34 60 14 1, 1,487,706 12 Gross receipts from related activities, etc. (see instructions) 373,610 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 24.99 % 15 22.56 % 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ••••••• Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions •••••••

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
-3	Gross receipts from activities that are not an unrelated trade or bus, under sec 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 · · · · · ·						,
7a ≽.	Amounts included on lines 1, 2, and 3 received from disqualified persons · · ·						7
ı	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year · · ·						
·c	Add lines 7a and 7b · · · · · · · ·						
8	Public support (Subtract line 7c from line 6.)	are to	The state of the s				
	ction B. Total Support		_				
Cal	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6 · · · · · · · · · · · ·						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
, b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b · · · · · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			-			
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						\ t_
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the corganization, check this box and stop here	organization's first,	second, third, fou	rth, or fifth tax year	r as a section 501((c)(3)	▶ □-
	ction C. Computation of Public Su					1°	
15	Public support percentage for 2010 (line 8,	• •	•			15	%
16	Public support percentage from 2009 Scher			• • • • • • • •		16	<u>%</u>
	ction D. Computation of Investme						
17	Investment income percentage for 2010 (lin		- ·	, , , ,		17	%
18	Investment income percentage from 2009 S	schedule A, Part II	ii, line 17 · · · ·	• • • • • • • • •		18	%
19a	33 1/3% support tests - 2010. If the organ 17 is not more than 33 1/3%, check this box						▶□
t	33 1/3% support tests - 2009. If the organ line 18 is not more than 33 1/3%, check this	ization did not che	ck a box on line 14	4 or line 19a, and I	ine 16 is more than	n 33 1/3%, and	. —
20	Private Foundation: If the organization dig			· · · · · · · · · · · · · · · · · · ·		-	

cheduleA (Forn	n 990 or 990-EZ) 2	010	INDIAN	A ACAI	DEMY OF	SCIENC	Ξ				_	35-1068	3830 '	Page 4
Part IV	Suppleme	ntal In	formatio	n. Com	plete this	part to prov	ride the	explanation	ns requir	ed by	Part II, lin	e 10,		
	Part II, line 1	7a or 17b	o, or Part III	i, line 12	Also cor	nplete this p	art for a	iny addition	al inform	nation	(See inst	tructions).		
			.,			<u> </u>		<u> </u>						
10%_Fac	cts and	Circ	umstar	ces	Test	(Part	_TT_	_line	17a	or	17b)			
						,	,							
SEE FOLLO	WING "FACT	'S AND	CIRCUMS	STANCE	<u>'S"</u>				_					
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2010

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organizations	Complete Part III					
Name	of organization				Employer ide	entification number	
IN	DIANA ACADEMY OF SCIENCE				35-1068	3830	
Pa	rt I-A Complete if the organi	zation is exempt under section	n 501(c) or is	a section 52	7 organ	nization.	
1	Provide a description of the organization						
2	Political expenditures • • • • • • •				▶ \$		
3	Volunteer hours · · · · · · · · · · · · · · · · · · ·		· · · · · · · · ·				
Pa	rt I-B Complete if the organi	zation is exempt under section	n 501(c)(3).				
1	Enter the amount of any excise tax incur	red by the organization under section 4	955		\$		
2	Enter the amount of any excise tax incur	• •					
3	If the organization incurred a section 495	· · · · · · · · · · · · · · · · · · ·				· Yes No	
4a	Was a correction made? • • • • • •				• • • • •	• Yes : No	
b	If "Yes," describe in Part IV		•		_		
Pa		zation is exempt under section		ept section 5	01(c)(3)) .	
1	Enter the amount directly expended by the						
	activities · · · · · · · · · · · · · · · · · · ·		• • • • • • • •	• • • • • • •	▶ \$		
2	Enter the amount of the filing organization	•					
	527 exempt function activities • • • • •		• • • • • • • •	• • • • • • •	\$		
3	Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL,						
	line 17b • • • • • • • • • • • • • • • • • • •				▶ \$		
4	Did the filing organization file Form 1120)-POL for this year? • • • • • • • •		• • • • • • •	• • • • •	• Yes No	
5	Enter the names, addresses and employ	rer identification number (EIN) of all sec	tion 527 political o	organizations to	which the	filing	
	organization made payments. For each of	•	•	-			
	the amount of political contributions rece		•	•	•		
	as a separate segregated fund or a politi	ical action committee (PAC). If addition	al space is needed	d, provide inform	ation in Pa	art IV	
	(a) Name	(b) Address	_ (c) EIN	(d) Amount pa filing organiza funds If none, e	tion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-	
(1)			7				
(2)							
(3)	,						
(4)			-				
(5)							
(6)							

Sched	ule C (Form 990 or 990-EZ) 2010 INDIANA ACADEM	Y OF SCIENCE	<u> </u>		35-1068	3830 Page 2
Par	t II-A Complete if the organization	is exempt un	der section 501	(c)(3) and filed	Form 5768 (elec	tion under
	section 501(h)).				.	
A C	theck if the filing organization belongs to a					
В	check Filing organization checked box			pply	·	·
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me				organization's totals	group totals
1a	Total lobbying expenditures to influence public op	· -	· •			
b	Total lobbying expenditures to influence a legislati					
C	Total lobbying expenditures (add lines 1a and 1b)		• • • • • • • • • •		ļ	
a	Other exempt purpose expenditures		• • • • • • • • • •	• • • • • • • •		<u> </u>
e	Total exempt purpose expenditures (add lines 1c a			• • • • • • •		
T	Lobbying nontaxable amount. Enter the amount from	om the following	table in both			
г	columns.	T = 1 - 1 - 1 - 1 - 1 - 1 - 1			1. C. 25981.4. 2011	The second secon
}	If the amount on line 1e, column (a) or (b) is:		nontaxable amour	it is :		7.5
	Not over \$500,000		nount on line 1e.	CE00 000		
}	Over \$500,000 but not over \$1,000,000		15% of the excess			
ŀ	Over \$1,000,000 but not over \$1,500,000		10% of the excess		430.00	
	Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	\$1,000,000.	5% of the excess o	ver \$1,500,000.		
	Grassroots nontaxable amount (enter 25% of line				E CANADA CANADA CANADA	- 44 Total Security 19 19 19
g h	Subtract line 1g from line 1a If zero or less, enter	-				
1	Subtract line 1f from line 1c. If zero or less, enter					
i	If there is an amount other than zero on either line				L	<u> </u>
•						Yes No
	(Some organizations that m	ade a section 50		ot have to complete		
			tions for lines 2a th			
		ng Expenditures	During 4-Year Ave	raging Period		T
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))		The state of the s			
c	Total lobbying expenditures		1			
d	Grassroots nontaxable amount		-			
в	Grassroots ceiling amount (150% of line 2d, column (e))		2. 公共			
f	Grassroots lobbying expenditures					
			FF	Δ	Schorledo C /E	orn 990 or 990 E7) 2010

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi	ed F	orm !	5768		
	(election under section 501(h)).	(a)		(b)	
		Yes	No	A	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local			r -		
	legislation, including any attempt to influence public opinion on a legislative matter or	١,,,	1 14.			
	referendum, through the use of:		(^ 			
а	Volunteers?		Х			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? • • • • • • • •		Х	ا بونسفنده. د بونسفنده		
С	Media advertisements? • • • • • • • • • • • • • • • • • • •		X			
d	Mailings to members, legislators, or the public?	<u> </u>	X			
е	Publications, or published or broadcast statements?		Х			
f	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • •		X			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? • • • • • • • • • • • • • • • • • • •		X			
i	Other activities? If "Yes," describe in Part IV · · · · · · · · · · · · · · · · · ·	w1	X			
j	Total. Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·	3.3	V. 1	of Act was		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? • • • • • • • • • • • • • • • • • • •	- के करीक	-3: ≥ a	The same	Y	
b	If "Yes," enter the amount of any tax incurred under section 4912	270	4			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	240	3.31	(KŠ)" -		
d	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	\(\frac{1}{5}\)		, r	_	
Pa	501(c)(6).	(5), (or sec	ction	1	
	Milese sub-standilly all (000) as assessed as assessed asset described in the control of				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? • • • • • • • • • • • • • • • • • • •			1	<u> </u>	-
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? • • • • • • • • • • • • • • • • • •			3		ļ
	· · · · · · · · · · · · · · · · · · ·				<u> </u>	<u> </u>
Га	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines "Yes."				d	
1	Dues, assessments and similar amounts from members · · · · · · · · · · · · · · · · · · ·		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					-
	political expenses for which the section 527(f) tax was paid).					
а	Current year · · · · · · · · · · · · · · · · · · ·	• •	2a			
b	Carryover from last year · · · · · · · · · · · · · · · · · · ·	• •	2b			
C	Total · · · · · · · · · · · · · · · · · · ·	• •	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues · · · · · · ·	• •	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		N.			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
_	and political expenditure next year?	• •	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•••	5			
Com	rt IV Supplemental Information splete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Part II-B, line this part for any additional information.	ne 1ı. /	Also,			
			_			

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Name	of the organization	Employer identification number
IND	DIANA ACADEMY OF SCIENCE	35-1068830
Par		or Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year · · · · · · · · ·	
2	Aggregate contributions to (during year) · · · ·	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year · · · · · · · ·	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control? • • • • • •	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Par	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education) Preservation of an historic	cally important land area
	Protection of natural habitat Preservation of a certified	d historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	· · 2a
b	Total acreage restricted by conservation easements	· · 2b
С	Number of conservation easements on a certified historic structure included in (a)	· · 2c
d	Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic	
	structure listed in the National Register.	· · 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the conservation easements modified, transferred, released, extinguished, or terminated by the	organization during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements duri	ng the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	e year
	▶\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense	statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statement	ts that describes
	the organization's accounting for conservation easements	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a		
	art, historical treasures, or other similar assets held for public exhibition, education, or research in further	rance of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	ce of public service,
	provide the following amounts relating to these items:	
	(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, historical treasures, or other similar assets for financial	gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	_
а		
ь	Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	· · · · · · · • \$

Schedu	ile D (Form 990) 2010 INDIANA ACADEMY	OF SCIENCE				35-1068	، 830	Page 2
Par	t III Organizations Maintaining	Collections of A	Art, Historical	Treasures	, or Otl	ner Similar As	sets (cor	ntinued)
3	Using the organization's acquisition, accession,							
	collection items (check all that apply)		•					
а	Public exhibition	d Loar	or exchange prog	ırams				
ь	Scholarly research	e Othe		, -				
c	Preservation for future generations	<u> </u>						
-	Provide a description of the organization's colle	ctions and explain h	ow they further the	organization	's exemn	t numose in		
-	Part XIV.	onono una ospiani si		· • · g • · · · • · · · ·	- C. C	. pa.pooo		
5	During the year, did the organization solicit or re	eceive donations of	art historical treas	ures or other	sımılar			
•	assets to be sold to raise funds rather than to b					• • • • • • • • •		s No
Par	Escrow and Custodial Arra							
1 41	Part IV, line 9, or reported an amour	nt on Form 990 Part	X line 21					
1a	Is the organization an agent, trustee, custodian			or other asse	ts not			
	included on Form 990, Part X? · · · · ·		-				· · ☐Ye	s TNo
ь	If "Yes," explain the arrangement in Part XIV as							,5 110
•	in roo, explain the unangement in rate XIV at	ia compicto trio foro	iring tubic.			Am	ount	
С	Beginning balance · · · · · · · · · · · · · · · · · · ·				· · 1c	 		
	Additions during the year · · · · · · ·							
e	Distributions during the year · · · · · ·							
f	Ending balance · · · · · · · · · · · · · · · · · · ·							
-	Did the organization include an amount on For						·· Ye	es No
	If "Yes," explain the arrangement in Part XIV.	11 550, 1 411 7, 11110 2						,5 L_ 140
Par		if the organization a	nswered "Yes" to F	om 990 Pai	t IV line	10		
<u>.Fai</u>	L V Elidowillett Fullds. Complete	(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(5) 5-112	years back
1a	Beginning of year balance	(a) Current year	(b) Pilot year	(c) Iwo yea	Ta Dack		P. Carrier	
b	Contributions · · · · · · · · · · · · · · · · · · ·	<u></u>						
c	Net investment earnings, gains, and losses •			 				<u> </u>
d	Grants or scholarships · · · · · · · · ·							
e	Other expenditures for facilities			+			e General	37
•	and programs · · · · · · · · · · · · · · · · · · ·							je, je,
f	Administrative expenses · · · · · · · ·					III CALLO	A CHARLET A	
g g	End of year balance			 			S CONTRACTOR	· · · · · · · · · · · · · · · · · · ·
2	Provide the estimated percentage of the year e	end halance held as					S STORES / W	<u>* </u>
-	Board designated or quasi-endowment	%						
b	Permanent endowment > %	······································						
c	Term endowment ▶ %							
3a	Are there endowment funds not in the possess	ion of the organization	on that are held an	d administere	d for the			
	organization by						ſ.	Yes No
	(i) unrelated organizations · · · · · · ·						· 3a(i)	100 110
	(ii) related organizations · · · · · · · · ·						- 3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations I	isted as required on	Schedule R? · ·				· 3b	
4	Describe in Part XIV the intended uses of the d	•					<u> </u>	
Pai	t VI Land, Buildings, and Equip			0.				
	Description of investment	(a) Cost or oth			(-)	Assumulated		
	Description of investment	(investm	''	ost or other sis (other)	1	Accumulated epreciation	(d) Book	. value
1a	Land · · · · · · · · · · · · · · · · · · ·		-,	,/				
b	Buildings · · · · · · · · · · · · · · · · · · ·							
С	Leasehold improvements · · · · · · · ·							
d	Equipment				1			
е	Other • • • • • • • • • • • • • • • • • • •				Ĭ .			
Tota	I. Add lines 1a through 1e (Column (d) must ed	ual Form 990, Part	X, column (B), line	10(c)) · ·	• • • •	• • • • • •		

Part VII	Investments - Other Securities.	See Form 990, Part X, line 12.	·
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial o		•	
(2) Closely-he	Id equity interests		
(3) Other			
(A)	•		
(B)			
(C)			
(D)			
(E)			
(F)		_	
(G)			
(H)			
<u>(I)</u>	· · · · · · · · · · · · · · · · · · ·		
	(-) (5) (2)	<u> </u>	
Part VIII	<u>Investments - Program Related.</u>	See Form 990, Part X, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
(10)			
	.,	<u> </u>	
Part IX	Other Assets. See Form 990, Part X,		
		a) Description	(b) Book value
(1)	 		
(2)			
(3)			
(5)			
(6)			
(7)			
(8)		· · · · · · · · · · · · · · · · · · ·	
(9)			
(10)	······································		
	nn (b) must equal Form 990, Part X, col. (B) lin	e 15.) • • • • • • • • • • • • • • • • • • •	
Part X	Other Liabilities. See Form 990, Part		
1.	(a) Description of liability	(b) Amount	A Section
(1) Federal	income taxes		
(2) DUES	PAYABLE	2,885	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			_
(11)			_
	<u> </u>	2,885	<u> </u>
2. FIN 48 (A	SC 740) Footnote. In Part XIV, provide the tex	t of the footnote to the organization	n's financial statements that reports the

thed	ule D (Form 990) 2010 INDIANA ACADEMY OF SCIENCE	35-1068830 · P	age 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	5	
6	Investment expenses :	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 · · · · · · · · · · · · · · · · · ·	10	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
<u>. u.</u> 1	Total revenue, gains, and other support per audited financial statements	1 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	* 3	
a	Net unrealized gains on investments		
b	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·		
c	Recoveries of prior year grants · · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV.) · · · · · · · · · · · · · · · · · · ·		
	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	20	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	更多数	
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV.) · · · · · · · · · · · · · · · · · · ·		
-	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
<u>rai</u> 1	Total expenses and losses per audited financial statements · · · · · · · · · · · · · · · · · · ·	1 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	3 34	
- а	Donated services and use of facilities		
ь	Prior year adjustments · · · · · · · · · · · · · · · · · · ·		
c	Other losses · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	政兴度	
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
ь	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · · ·		
_	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	rt XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1	b	
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete		
	part to provide any additional information		
		······································	
			
			

ted States It IV, line 21 or 22. Employer identific 35–10688 Solution or assistance, and from-cash more than \$5,000. Part II (book, FMV appraisal. non-cash assistance) (book, FMV appraisal. non-cash assistance) (control of the control of the c	SCHEDULE		Gra	Grants and Other Assistance to Organizations,	Assistance to	Organization			OMB No 1545-0047
P Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach 12 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach 12 or 22. Attach to Form 990, Part IV, line 21 or 22. Attach 12 or	orm 990)		Govel	rnments, and Ir	ndividuals in	the United Sta	ces ces	• •	2010
The grants or assistance, the grantees' eligibility for the grants or assistance, and as for grant truther of grant truther of grant truther of grant truther of grants or assistance, and and Organizations in the United States. Complete if the organization answered "Yes" to ran \$5,000. Check this box if no one recipient received more than \$5,000. Part II assistance of the phicable of Amount of cash (Box	F		Complete	if the organization an	swered "Yes" to Fo	rm 990, Part IV, line 2	1 or 22.	<u> </u>	Den to Public
the grants or assistance, the grantees' eligibility for the grants or assistance, and e of grant funds in the United States. Ind Organizations in the United States. Ind Organizations in the United States. Complete if the organization answered "Yes" to an assistance of the organization of the United States. Complete if the organization answered "Yes" to an assistance of a population of the United States. Complete if the organization answered "Yes" to a session of the United States. Complete if the organization and the United States. Complete if the organization answered "Yes" to a session of the United States. Complete if the organization and the United States. Complete if the organization and the United States. Complete if the organization and the United States. Complete if the organization and the United States. Complete if the organization and the United States. Complete if the organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the Organization and the United States. Complete if the U	eparument of the Treasury ternal Revenue Service			•	Attach to Form 990.				Inspection
The grants or assistance, the grantees' eligibility for the grants or assistance, and e of grant funds in the United States. Id Organizations in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient received more than \$5,000. Part II assistance (i) Amount of cash (ii) Amount of non-cash (iii) (ame of the organization							Employer Identification	number
the grants or assistance, the grantees' eligibility for the grants or assistance, and and organizations in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient received more than \$5,000. Part il in the United States in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient received more than \$5,000. Part il in the United States in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient is assistance in the United States in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient is assistance in the United States in the United States.	NDIANA ACADEMY O	F SCIENCE						35-1068830	•
the grants or assistance, the grantees' eligibility for the grants or assistance, and of grant funds in the United States. d Organizations in the United States. Complete if the organization answered "Yes" to nan \$5,000. Check this box if no one recipient received more than \$5,000. Part II increase assistance assistance assistance assistance and properties in the United States. (d) Marbod of variation in G(B) Description in the United States i	art I General In	formation on G	rants and Assista	nce					
and States. Id Organizations in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient received more than \$5,000. Part II I PC section (d) Amount of cash (e) Amount of non-cash assistance if applicable grant assistance of assistance of tapplicable grant assistance in the policy of tapplicable grant assistance in the policy of tapplicable grant assistance in the policy of tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant assistance in tapplicable grant	į.	on maintain records	to substantiate the amo	ount of the grants or ass	istance, the grantees	s' eligibility for the grant	s or assistance, and		;
ad Organizations in the United States. Complete if the organization answered "Yes" to an \$5,000. Check this box if no one recipient received more than \$5,000. Part il		a used to award the g	grants or assistance?						· X Yes
and Organizations in the United States. Complete if the organization answered "Yes" to nan \$5,000. Check this box if no one recipent received more than \$5,000. Part II If C section (d) Amount of cash (e) Amount of non-cash (book, FMN appraisal, non-cash assistance applicable grant assistance (book, FMN appraisal, non-cash assistance) If C section (d) Amount of cash (e) Amount of non-cash assistance (book, FMN appraisal, non-cash assistance) If C section (d) Amount of cash (e) Amount of non-cash assistance (book, FMN appraisal, non-cash assistance) If C section (d) Amount of cash (e) Amount of non-cash assistance (book, FMN appraisal, non-cash assistance) If C section (d) Amount of cash (e) Amount of non-cash assistance (b) Amount of cash (e) Amount of non-cash assistance (c) Amount of cash (e) Amount of cash (e) Amount of non-cash assistance (c) Amount of cash (e) Amount of cash (e) Amount of non-cash (e) Amount of cash (e) A		the organization's pri	ocedures for monitoring	the use of grant funds	in the United States.				
f applicable grant grant assistance (book reluted non-cash the profice of the pro		d Other Assistal	nce to Governmer	nts and Organizat more than \$5,000. Che	ions in the Unite	m	te if the organization answ than \$5,000. Part II	vered "Yes" to	
I fix section (g) Amount of cash (e) Amount of non-cash (book, Fluk) appraisal. non-cash assistance of the applicable grant assistance of the applicable of the applicable grant assistance of the applicable of t	can be duplic	ated if additional spar	ice is needed		•	• • • • • • • • • • • • • • • • • • • •		•	▲ : :
	1 (a) Name and address or governm	of organization tent	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g)Description of non-cash assistance	(h) Purpose of grant or assistance
	(2)								
	2)								
	3)								
	4)								
	(9								
	(9								
	7)								
	(6)								
	(6								
	(0)								
	11)								
	12)								
	2 Enter total number of Enter total number of	of section 501(c)(3) a	and government organiz					▲ ▲ : : : : : :	

Schedule I (Form 990) (2010) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 89,552 EF (c) Amount of cash grant ENTIRE PROCESS REVIWED AND MONITORED BY GOVERNING BODY. 72 (b) Number of recipients Part III can be duplicated if additional space is needed Monitoring procedures (Part I, line 2) (a) Type of grant or assistance 1 SEE SCHEDULE Part IV Part III

Page 2

35-1068830

INDIANA ACADEMY OF SCIENCE

Schedule I (Form 990) (2010)

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'SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public <u>Inspection</u>

Employer identification number

INDIANA ACADEMY OF SCIENCE	35-1068830
01. Members or stockholder classes and rights (Part VI, line 6)	
ONLY ONE CLASS OF MEMBERS	
ALL MEMBERS HAVE SAME RIGHTS AND ACCESS	
02. Member election for additional members (Part VI, line 7a)	
ALL OF THE MEMBERS OF THE ACADEMY VOTE FOR THE MEMBERS OF THE GOVE	RNING BODY
03. Governing body decisions (Part VI, line 7b)	
ALL OF THE MEMBERS OF THE ACADEMY VOTE TO AMEND THE BYLAWS RECOMMEN	NDED BY THE GOVERNING
BODY.	
04. Form 990 governing body review (Part VI, line 11)	
NO PROCESS USED	
05. Conflict of interest policy compliance (Part VI, line 12c)	
EXECUTIVE DIRECTOR REVIEWS CONFLICT OF INTEREST FORMS ANNUALLY	
06. CEO, executive director, top management comp (Part VI, line 15	a)
CEO, EXECUTIVE DIRECTOR NOR TOP MANAGEMENT OFFICIAL ARE PAID COMPE	NSATION
07. Other officer or key employee compensation (Part VI, line 15b	
GOVERNING BODY REVIEWS COMPENSATION ANNUALLY BASED ON EXPERIENCE.	
08. Governing documents, etc, available to public (Part VI, line 1	9)
DOCUMENTS ARE AVAILABLE FROM EXECUTIVE DIRECTOR UPON REQUEST.	
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	EEA Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010)

,	Statement of Program Service Accomplishments	2010 01
Name(s) as shown on return		Your Social Security Number
<u>INDIANA ACA</u>	DEMY OF SCIENCE	35-1068830

FORM 990, PART III(D)

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$1731

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$0

PROGRAM SERVICES REVENUE \$0

EXPLANATION

PUBLISHED A NEWSLETTER FOUR TIMES A YEAR AND THE PROCEEDINGS OF THE ACADEMY REPORTING SCIENTIFIC RESEARCH FOR OVER 1,200 MEMBERS.

	Statement of Program Service Accomplishments	2010 01
Name(s) as shown on return		Your Social Security Number
INDIANA ACA	35-1068830	

FORM 990, PART III(I)

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$21287

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$0

PROGRAM SERVICES REVENUE \$0

EXPLANATION

YOUTH ACTIVITIES - JUNIOR ACADEMY OF SCIENCE, THE INDIANA ACADEMY OF SCIENCE TALENT SEARCH BENEFITS OVER 300 INDIANA YOUTH.

Indiana Academy of Science: Facts and Circumstances

The Indiana Academy of Science (IAS) was founded in 1885 as a nonprofit corporation devoted to scientific and educational purposes. Specifically it promotes scientific research and the diffusion of scientific information; encourages communications and cooperation among scientists, especially in Indiana; prepares scientific reports; and seeks to improve education in the sciences. It also endeavors to serve, upon request of appropriate state officials, to act as an advisory body.

- 1. FINANCIAL SUPPORT FACTOR: We believe that the IAS does readily meet the tenpercent-of-support-requirement. This support comes in the form of an annual allocation from the State of Indiana to support publication of the *Proceedings of the IAS* and from annual membership dues and contributions from members. The financial support of the membership goes, in part, toward publication of scientific work of interest and beneficial to the public in the state of Indiana (and beyond); public meetings where research undertaken by governmental, university/college, and other scientists is presented; and youth programs in the form of high school student research grants, science fairs, and competitions.
- 2. SOURCES OF SUPPORT: The current IAS membership numbers approximately 750 from across the state of Indiana. We actively solicit college student members (distinct from youth programs covered in item 1 above) and seek to provide them a forum for their career development. Our public meetings are typically held on college/university campuses in various part of Indiana in ensure access to the broadest possible audience.
- 3. REPRESENTATIVE GOVERNING BODY: Our governing body is broadly representative of scientists and science educators in Indiana. As provided in our constitution and bylaws, it is elected from the general membership. The President typically serves a single one-year term after serving as President-elect. The elected Section Chairs are central to the governing body and are from a broad range of educational and public-private agencies. They too serve a one-year term after serving as Co-chair.
- 4. AVAILABILITY OF PUBLIC SERVICES: The programs and activities of the IAS are broad, available and open to the public, and include significant outreach that provides public access to scientific resources of Indiana.
 - a. Youth program These programs include Science Olympiad, Science Talent Search, and Junior Academy. They are open to high school students from

throughout the state. In addition, we select a Speaker of the Year, who makes a presentation open to the public and whose further travel to schools is subsidized by IAS funds. Until 2009, the IAS offered an annual award for a high school teaching fellow for projects designed to improve scientific understanding and invigorate the teaching of science at the secondary school level.

- b. College science students We make available low cost student memberships, mentor college student research through grants and venues for public presentation, and provide potential publication (without charge) of completed research in the peer reviewed *Proceedings of the IAS*.
- c. Availability of research grants annually the IAS awards approximately 30 small (i.e., maximum \$3000) grants on the basis of scientific merit. Many of these go to young scientists dong graduate studies at colleges and universities in Indiana; others are awarded to scientists throughout the state and representing as many as 17 distinct disciplinary areas.
- d. Activities of our membership broadly support science in the public interest. This takes the traditional form of conducting, presenting, and publishing scientific research, especially work that is of benefit to the citizens of Indiana. We hold topical workshops and performances that benefit science educators within our membership and beyond. During the past three years we have run or supported a series of bioblitzes, public programming that increases our citizenries understanding and appreciation for biodiversity. Most recently we were financial supporters of a 4 part public television series produced by WFYI (Indianapolis PBS station) on the Natural History of our state.
- e. The IAS maintains a historic collection of over 12,000 volumes housed in the State Library that provides for the public use of the material.
- f. Over the past three years we have converted *Proceedings of the IAS* to pdf format for free access on our public website (www.indianaacademyofscience.org). In addition, we exchange print copies of Academy publications with other scientific research institutions (and these become part of our library collection house in the State Library). Material is acquired from almost every state and approximately 75 foreign countries. Many of the titles in the collection are quite valuable, relatively scarce, and not widely held in other U.S. libraries, especially not in Indiana.

- g. We subsidize the production of Special Publications, book length, color illustrated volumes that draw upon the expertise within the IAS. These hardbound books cover topics of importance to the citizenry of Indiana and adjacent states, especially those related to biodiversity.
- 5. ADDITIONAL FACTORS: Membership is encouraged for anyone with interests in scientific endeavors and includes secondary school educators, college/university professors, governmental agency scientists, scientists in the private sector, retirees, and hobbyists; membership dues are modest and below those of similar state academies of science.

Research	Philippe Vedon Indiana University Purdue University Indianapolis	\$3,000.00
Research	Allison Veach Ball State University	\$2,358.00
Research	Clare L. Chatot Ball State University	\$3,000.00
Research	Windy McBride Indiana State University	\$3,000.00
Research	David Bohnert Indiana State University	\$3,000.00
Research	Amanda Jamison Indiana State University	\$2,500.00
Research	Jennie M. Carr Indiana State University	\$2,856.00
Research	Kent E. Edmonds Indiana University Southeast	\$2,472.00
Research	Kimberly Rosvall Indiana University	\$2,900.00
Research	Luke Hoekstra Indiana University	\$2,914.00
Research	Priya Hewavitharanage University of Southern Indiana	\$2,252.00
Research	Kenneth E. Walsh University of Southern Indiana	\$2,336.00
Research	Kelly Boatright Indiana University Purdue University Fort Wayne	\$2,500.00
Research	William L. Murphy Smithsonian Institution	\$1,825.00
Research	Donald Ruch Ball State University	\$500.00
Research	Dale Edwards University of Evansville	\$2,347.00
Research	Glen R. Hood University of Notre Dame	\$2,950.00
Research	Dina M. Leech DePauw University	\$1,979.00
Research	R. Jeremy Johnson Butler University	\$1,883.00
Research	Jonathan Bauer Indiana University	\$1,608.00
Research	Lauren Smith Indiana University	\$1,489.00
Research	Brandon Cooper	\$3,000.00

Research	Indiana University Maria Helena Mendes Soares	\$2,110.00
Research	Indiana University Sarah Shannon Indiana University	\$1,486.00
Research	Mark Peterson Indiana University	\$2,990.00
Research	David Marcus Indiana University	\$2,318.00
Research	Susanne Kreamer Indiana University	\$2,429.00
Research	Mohammad A. Qasim Indiana University-Purdue University Fort Wayne	\$2,790.00
Research	Kaylin Adams Purdue University	\$950.00
Research	John Shukle Purdue University	\$1,800.00
Research	Michael Brandenburg Ball State University	\$2,629.00
Research	Mahfuza Khatun Ball State University	\$2,000.00
Research	Ann Raffel Ball State University	\$2,347.00
Research	Emmanuel Kwame Teye (Guy Crowder) Ball State University	\$1,500.00
Research	Bethany Lucas Ball State University	\$1,544.00
Research	Brian Lepore Ball State University	\$2,250.00
Total Grants	•	\$81,812.00

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High School	Student	Amount
Eastern High School	Brianna Morris	267.00
Eastern High School	Cortney Breach	245.00
East, Noble High School	G Stevens	300.00
East Noble High School	Gabriel Stephens	300.00
John Adams High School	Lisa Bauer	300.00
John Adams High School	Eric Fein	152.00
John Adams High School	N. Grantz	78.00
John Adams High School	S. Wein	143.00
John Adams High School	M Wijen	185.00
John Adams High School	Moshe Friedland	100.00
John Adams High School	Nicholas Hall	240.00
John Adams High School	Sam Presnal	160.00
John Adams High School	Kyle Rice	215.00
John Adams High School	Tobias Stoner	150.00
John Adams High School	Brian Sutter	135.00
Marian High School	Michelle Baraney	300.00
Marian High School	Aaron Bulger	254 00
Marian High School	Chloe Deranek	218.00
Marian High School	Andrea Freeze	45.00
Marian High School	Katie Hansen	134 00
Marian High School	Michael Hunckler	300.00
Marian High School	Mark Imus	300.00
Marian High School	Greg Janowiak	300.00
Marian High School	Samuel Leung	300.00
Marian High School	Dana Lind	300.00
Marian High School	Emily Lohr	300.00
Marian High School	Evan Merryman	295.00
Marian High School	Yea Eun Oh	150.00
Marian High School	Jasmine Podell	150.00
Marian High School	Claiare Sieradzki	300.00
Marian High School	Abby Suckow	285.00
Marian High School	Tim Trippel	99.00
Marian High School	Stephanie Van Overberghe	300.00
Northwestern High School	Jack Fruth	299.00
Northwestern High School	Ryan Newlon	141.00
Total High School Studen	\$7,740.00	