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DLN: 93493227004232

# 匆

Department of the Treasury

### **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)

OMB No 1545-0047

Open to Public

	Revenue						a copy											Inspection
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			Corporat	tion T	rust Ass	sociation	Other 🟲						<b>L</b> Yea	r of for	mation 1	.743	<b>M</b> Stat	te of legal domicile I
Pa	rt I	Sum	mary															
Activities & Governance		the purpo described		moting ithin	useful kr	nowledge	" In the 2:	1st	cent	ury the	Society	y sus	tains	this m	ission w	with va	arious	enjamin Franklin f programs
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Ĭ			nber of ınd													5		8
् ब	6 Total number of volunteers (estimate if necessary)										6		1					
	7a ⊺	Total unr	elated bus	iness r	evenue f	rom Part	VIII, colu	ımn	(C),	lıne 12						7a		
	<b>b</b> !	Net unrel	ated busir	ness tax	(able inc	ome from	Form 990	Ο-T,	, lıne	34 .	•					7b		
														Prio	Year			Current Year
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eun	9	_	m service									- 1				,954		134,30
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8	15	5-10)	s, other co	ompens	ation, en	npioyee b	enefits (Pa	art I	IX, C	olumn	A), line	s			3,845	,930		3,594,75
Expenses	16a	Profes	sional fund	Íraising	fees (Pa	ırt IX, col	umn (A ), lı	ine :	11e)									
Ř	ь	Total fur	ndraising exp	enses (P	art IX, colu	ımn (D), lın	e 25) ► 579,	,307				_ [						
	17	Other	expenses	(Part IX	(, columr	ı (A), lıne	s 11a-11	d, 1	1 f- 2	24e) .		. [			4,071	,830		4,643,28
	18		xpenses									· •			8,990	-		9,939,34
	19	Reveni	ıe less exp	penses	Subtrac	t line 18	from line 1	12							6,691			-3,674,36
88 88 88													Beg	_	of Curr ear	ent		End of Year
tege!	20	Total a	ssets (Pa	rt X, lını	e 16) .							-			56,003	,876		147,804,97
Not Assets or Fund Balances	21		abilities (f												5,572			6,278,56
žĨ	22	Net as	sets or fun	ıd balan	ices Sub	otract line	21 from l	lıne	20	<u>.</u> .	<u>.</u> .	_		1	50,430	,937		141,526,41
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•	arer's		Firm's name (or yours Howe Keller & Hunter PC f self-employed),								EIN ▶							
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Philadelphia, PA 19107

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

Phone no 🕨 (215) 893-9112

Total program service expenses►\$

orm	990 (2011)				Page 2
Par		nent of Program Service A f Schedule O contains a response			୮
1	Briefly describ	e the organization's mission			
urpo ppo isco esea	ose of "promotinges distinguisher tunities for inte overy through grant library of march library of march	ophical Society, the oldest learned guseful knowledge "In the 21st conditions of the 21st of the second sec	entury the Society sustains this lentists, and leaders in civic and p, particularly in the semi-annual dications, prizes, exhibitions, and aternationally recognized for their	mission in three principal ways cultural affairs through elected   Meetings in Philadelphia It si   public education It serves sc   enduring historic value The A	It honors and I membership and upports research and holars through a merican Philosophical
2	the prior Form	ration undertake any significant pr 990 or 990-EZ?	· · · · · · · · · ·		∕es 🗸 No
3	Did the organiz	ration cease conducting, or make s	significant changes in how it cond	ucts, any program	∕es 🗸 No
4	Describe the or expenses Section	the these changes on Schedule Organization's program service accordion 501(c)(3) and 501(c)(4) orga cations to others, the total expens	nizations and section 4947(a)(1)	) trusts are required to report t	
4a		) (Expenses \$ 7 nted Yearbook for 2011 gives a complete ints are on hand and are available for insp		1,701,309 ) (Revenue \$ , will be furnished upon request Deta	134,303 ) ils concerning contributions
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
<b>4</b> c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other progran	m services (Describe in Schedule	0)		
	(Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)

7,762,946

Dart TV	Checklist	of Peguire	ed Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	· · · · · · · · · · · · · · · · · · ·			
	<b>1a</b> 58			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	<b>1b</b> 0	_		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c		Νo
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	N. T	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
3 <b>a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the			
_	year <sup>?</sup>	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
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 or securities			
	account)?	4a		No
ь				
_	If "Yes," enter the name of the foreign country   See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	1		
	j ,			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			N a
C	In 163 to fine 3a of 3b, and the organization the Form 6000-1"	5c		No
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ا		.,
_	were not tax deductible?	6b		No
7	Organizations that may receive deductible contributions under section 170(c).		1	
а	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		Νo
<b>.</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		No
				INO
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_		1		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			NI a
	required?	7g		No
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		No
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 organization, have excess			
	business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other	1		
-	sources against amounts due or received from them )			
17~	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
		124		INU
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
-	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		No
L	allocated to each state  Enter the aggregate amount of reserves the organization is required to maintain by			-
D	the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
	13c	_		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Nο

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

Se	ction 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						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	2		No			
3	other officer, director, trustee, or key employee?			NO			
4	supervision of officers, directors or trustees, or key employees to a management company or other person? .  Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No			
	filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6	Yes				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	_					
	venue Code.)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		Νo			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
ь	Other officers or key employees of the organization	15b	Yes				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No			
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No			
Section C. Disclosure							
<u> </u>	List the States with which a copy of this Form 990 is required to be filed PA , NY , NJ , MA , CA						
	Elst the states that which a copy of this Form 550 is required to be incare 1 A , NT , ND , FIA , CA						

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization >
  JOHN WOLFE
  104 SOUTH FIFTH STREET

PHILADELPHIA, PA 191063387

(215)440-3431

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	(C)  Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				$\vdash$			_			

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

	<b>(A)</b> Name and Tıtle	(B) Average hours per week (describe	unles an	on (d e tha	n one son er ai	e bo is bo nd a stee	x, oth )		(D) Reportab compensa from the organization 2/1099-M1	tion e n (W-	(E) Reportable compensation from related organizions (W- 2/1099-		(F) Estima amount o compens from t organizati	ted fother ation he on and
		hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relate organiza	
							<u> </u>					_		
See A	ddıtıonal Data Table													
							<del>                                     </del>					+		
				-	$\vdash$		1					+		
					$ldsymbol{ld}}}}}}$							$\perp$		
							1					$\top$		
					_							+		
												$\perp$		
												+		
												4		
												+		
								Ļ						
1b	Sub-Total	· · · ·		• •	•	•		<b>&gt;</b>						
	Total from continuation sheets		tion A	• •	•	•		<b>•</b>		1 205				01 526
d	Total (add lines 1b and 1c) .				•		•			1,305				91,526
2	Total number of individuals (incl \$100,000 of reportable compens					ted	above	) who	received mo	re tha	n			
											_		Yes	No
3	Did the organization list any <b>form</b>				-	ey e	mploy	ee, c	or highest con	npens	ated employee			
	on line 1a? If "Yes," complete Sch	edule J for such	individ	ual		•	•	•		•	• • •	3		No
4	For any individual listed on line 1 organization and related organization													
	individual	itions greater tr		• •			es, co	mpie •	ete Scriedure i	ioi sud		4	Yes	
5	Did any person listed on line 1a	receive or accri	ie comr	nenca	tion	fror	m anv i	unre	lated organiza	ation o	r individual for		163	
•	services rendered to the organiz								_		•	5		Νo
											L			
Se	ction B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
		(A)	1								(B)		(C)	
	Nan	ne and business add	aress							Descr	iption of services	+	Compen	sation
												$\Box$		
												$\dashv$		
2	Total number of independent conti	ractors (includir	na hut n	ot lir	niter	l to 1	those	licto	d above) who	recen	ed more than	-+		

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

Part V	<u> </u>	Statement o	<u>t kevenue</u>					
					(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
Contributions, gifts, grants and other similar amounts	1a	Federated camp	paigns 1a					
동등	ь	Membership du	es <b>1b</b>					
ಕ್	c	Fundraising eve	ents 1c					
र्श्वलः		_						
<u>≅.</u> ਰ	d	Related organiz	ations 1d					
હેં≣	e	Government grants	(contributions) <b>1e</b>					
둘ळ	l f	All other contribution	ons, gifts, grants, and <b>1f</b>	4,847,525	į			i i
黄萝	-	sımılar amounts no	t included above					
金吉	g	Noncash contri	butions included in					
독		lines 1a-1f \$ _		_				
ರ೯	h	Total. Add lines	31a-1f	· · · •	4,847,525			
<i>a</i> v				Business Code				
ž	2a	Publications sales		511130	134,303	134,303		
<u>9</u>				311130	151,505	134,303		
22	b							
မှ	C							
54 3m	d							
۵Š	e							
Program Serwce Revenue								
\$	f	All other progra	m service revenue					
Ě	g	Total Add lines	:2a-2f	<b>b</b> -	134,303			
	3			+	10.7000			
			ome (including dividend		3,428,076			3,428,076
			aramounts)		3,420,070			3,420,070
	4		tment of tax-exempt bond p		,			
	5	Royalties			0			
			(ı) Real	(11) Personal				
	6a	Gross rents	73,269					
	ь	Less rental	43,423					
	c	expenses Rental income	29,846					
	`	or (loss)	·					
	d	Net rental incor	me or (loss)	🟲	29,846			29,846
			(ı) Securities	(II) Other				
	7a	Gross amount	40,420,361					
		from sales of assets other						
		than inventory						
	b	Less cost or other basis and	42,530,802	124,169				
		sales expenses						
	C	Gain or (loss)	-2,110,441	-124,169				
	d	Net gain or (los	s)	<b>.</b> ►	-2,234,610			-2,234,610
nue	8a	Gross income fi events (not incl \$						
Other Revenue		of contributions See Part IV, lin	reported on line 1c) e 18 a					
<u> </u>	   <sub> </sub>	Las						
둦	b		penses b	<b>_</b>	0			
9	C		loss) from fundraising (	events . F	U			
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19					
	ь	Less direct exi	penses b					
	c		loss) from gaming activ	vities	o			
	10a	Gross sales of						
	104	returns and allo						
	ь	Less cost of go	oods sold <b>b</b>					
	С	Net income or (	loss) from sales of inve	entory 🕨	0			
		Miscellaneous		Business Code				
	11a	Misc Income			7,874			7,874
			- Dunk		23,635			23,635
	Ь	Misc Inc Phot			·			
	C	Exhibition Sales	5		25,735			25,735
	d	All other revenu	ue		2,594			2,594
	e	Total. Add lines	:11a-11d		59,838			
	12	Total revenue.	See Instructions	▶	6,264,978	134,303		1,283,150

#### Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 175,795 175,795 Grants and other assistance to individuals in the United States See Part IV, line 22 764,596 764,596 3 Grants and other assistance to governments, organizations, and individuals outside the United 760,918 760,918 States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 517,857 142,542 323,530 51,785 key employees . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). 0 7 Other salaries and wages 2,337,493 1,935,769 130,441 271,283 Pension plan contributions (include section 401(k) and section 90,131 74,159 403(b) employer contributions) . . . . 4,338 11,634 442,557 373,991 29,091 39,475 Other employee benefits . . . . . . 206,719 157,353 27,311 22,055 10 Fees for services (non-employees) 11 Management . . . . . 1,410 1,410 Legal . . . . . . . . 72,285 Accounting . . . . . . . 72,285 Lobbying . . . . . . . . . . . . 0 Professional fundraising See Part IV, line 17 . . 0 Investment management fees . . . . . . 249,784 249,784 0 g Advertising and promotion . . . 0 12 126,796 Office expenses . . . . 126,796 13 14 Information technology . . . . . 0 15 Royalties . . 0 511,021 511,021 16 0 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . . . . 243,771 243,771 78,323 78,323 20 21 Payments to affiliates . . . 22 Depreciation, depletion, and amortization . . . . 641,925 573,015 65,486 3,424 23 125,780 125,780 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) Special Purposes Library 232,753 232,753 Special Purposes Curatorial 554,486 554,486 Printing and Publications 243,502 243,502 191,055 191,055 Library operations FASB benefits expenses 407,271 301,125 59,930 46,216 All other expenses 963,118 448,772 380,911 133,435 25 Total functional expenses. Add lines 1 through 24f 9,939,346 7,762,946 1,597,093 579,307 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

Part X **Balance Sheet** (A) (B) Beginning of year End of year 11,702 1 11,701 1 6.433.952 2 7.719.465 2 3 2,178,309 3 2,189,580 30.819 31.090 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 0 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 0 0 7 0 8 9 16.713 9 16,776 Prepaid expenses and deferred charges . . . . . . 10a 26.858.698 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 11,119,026 b Less accumulated depreciation . . . . . 16,441,615 **10c** 15,739,672 113,604,476 109,642,580 11 11 17,229,580 12,400,844 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 0 Investments—program-related See Part IV, line 11 . . 56,708 14 53,271 14 15 0 15 156,003,876 147,804,979 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 55,077 17 233,211 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 1.500.000 23 1,500,000 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 4,017,862 25 4,545,350 D . . . . 26 5,572,939 26 6,278,561 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 30,724,034 27 Unrestricted net assets . . . . 28,148,732 4,602,170 28 3,500,287 28 Temporarily restricted net assets . . . . . Fund 29 115, 104, 733 29 109,877,399 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ 

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 150,430,937 33 141,526,418 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 156.003.876 34 147.804.979

	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		6,2	264,97
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,9	39,34
3	Revenue less expenses Subtract line 2 from line 1	3		-3,6	574,36
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		150,4	130,93
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-5,2	230,15
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		141,5	526,41
Par	TXII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of to audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		<b>2</b> c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
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?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		No

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OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

Inspection **Employer identification number** 

Name of the organization AMERICAN PHILOSOPHICAL SOCIETY  Employer identification number										on number			
AMER	CAN PI	HILOSOPHI	ICAL SOCIETY						23-1353	3269			
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganızatıor	ns must con	nplete this p	oart.) See	instructions	5		
The	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (For	lines 1 thro	ough 11, chec	ck only one b	ox)				
1		A chur	ch, convent	ion of churches, or a	ssociation o	f churches	section 170(	(b)(1)(A)(i).					
2		A scho	ol describe	d in <b>section 170(b)(</b> 1	<b>L)(A)(ii).</b> (A	ttach Sche	dule E )						
3		A hosp	ital or a cod	perative hospital se	rvice organi	zatıon desc	rıbed ın <b>sect</b> i	ion 170(b)(1)	(A)(iii).				
4	Γ			h organızatıon opera ıty, and state	ted in conjur	nction with	a hospital de	scribed in <b>se</b> c	ction 170(b)	)(1)(A)(iii).	Enter the		
5	Г	_	•	erated for the benefi (A)(iv). (Complete P	_	e or univers	sity owned or	operated by	a governme	ntal unit des	cribed in		
6	$\vdash$					ital unit des	cribed in <b>sec</b>	tion 170(b)(1	L)(A)(v).				
7	<u>\</u>	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II)											
8	$\sqcap$	A comi	munity trust	: described in <b>sectio</b> i	n 170(b)(1)(	( <b>A)(vi)</b> (Co	mplete Part	II)					
9	Γ	An org	anızatıon th	at normally receives	(1) more th	han 331/3%	of its suppo	rt from contri	butions, me	mbership fee	es, and gross		
		receipt	s from activ	rities related to its e	xempt functi	ıons—subje	ct to certain	exceptions, a	and (2) no m	ore than 33	1/3% of		
		ıts sup	port from gr	oss investment inco	me and unre	elated busin	ess taxable i	income (less	section 511	L tax) from b	usinesses		
		acquire	ed by the or	ganızatıon after June	30,1975	See <b>section</b>	509(a)(2).(	Complete Pa	rt III )				
10	Γ	An org	anızatıon or	ganized and operate	d exclusively	y to test for	public safety	y See <b>section</b>	509(a)(4).				
11	Γ	one or the box	more public	ganized and operated ly supported organiz ibes the type of supp <b>b</b> Type I	ations desci porting organ	ribed in sec ni <u>za</u> tion and	tion 509(a)(i complete lin	1) or section	509(a)(2) gh 11h	See <b>section</b> !			
e	Γ	By che	cking this b	ox, I certify that the ion managers and ot	organization	n ıs not con	trolled dırect	ly or indirect	ly by one or	more disqua	lified persons		
f		If the o		received a written d	eterminatior	n from the I	RS that it is a	a Type I, Typ	e II or Type	III support	ıng organızatıo <u>n,</u>		
g		Since A	this box August 17, ; ng persons?	2006, has the organ	ızatıon acce	pted any gi	ft or contribu	tion from any	of the		l		
				rectly or indirectly o	ontrols, eith	ner alone or	together with	n persons des	scribed in (ii	)	Yes No		
				governing body of th			_	•	•		g(i)		
				er of a person descri							g(ii)		
		(iii) a 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?				ı(iii)		
h		Provide	e the followi	ng information about	the support	ed organiza	ition(s)						
supported FIN lines 1 - 9 above col (i) listed in col (i) of your col (i) organized Amoun											(vii) A mount of support?		
				instructions))	Yes	No	Yes	No	Yes	No			

Total

Support Schedule for Organizations Described in IRC 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.)

S	ection A. Public Support	c organization	ians to quanty t	inder the tests i	isted below, pic	Jase co	inpicte i	art III./
	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	<b>(e)</b> 2	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,868,49	6,803,744	4,779,690	3,988,972	4	1,847,525	27,288,425
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	475,00	475,000	475,000	475,000		475,000	2,375,000
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions	7,343,49	7,278,744	5,254,690	4,463,972	5	5,322,525	29,663,425
	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							4,387,113
6	(f) <b>Public Support.</b> Subtract line 5 from line 4							25,276,312
S	ection B. Total Support	•	•		•		<u> </u>	
	endar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 20	)11	(f) Total
7	A mounts from line 4	7,343,494	7,278,744	5,254,690	4,463,972	5	,322,525	29,663,425
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,578,032	3,382,430	3,259,973	2,934,376	3	3,501,345	16,656,156
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets	41,419	100,553	75,311	54,379		34,104	305,766
11	Total support (Add lines 7 through 10)							46,625,347
12	Gross receipts from related activit	ies, etc (See ins	tructions )			12		792,630
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, thırd, fourth, or fı	fth tax year as a	501(c)(3	3) organız	ation, ▶┌
S	ection C. Computation of Pul	blic Support	Percentage					
14	Public Support Percentage for 201	1 (lıne 6 column	(f) divided by line	11 column (f))		14		54 210 %
15	Public Support Percentage for 201	0 Schedule A, Pa	art II, line 14			15		56 740 %
16a	<b>33 1/3% support test—2011.</b> If the and <b>stop here.</b> The organization qua				ine 14 is 33 1/3%	or more	e, check tl	his box
	33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization merorganization	n qualifies as a p — <b>2011.</b> If the org ation meets the "	oublicly supported ganization did not facts and circums	organization check a box on lin tances" test, chec	e 13, 16a, or 16t ck this box and <b>st</b>	o and line	e 14 Explain	<b>▶</b> ┌
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the orgal Explain in Part IV how the organization Private Foundation If the organizations	nization meets thation meets the "	ne "facts and circu facts and circums	ımstances" test, o tances" test The	theck this box and organization qual	d <b>stop he</b> ifies as a	e <b>re.</b> a publicly	<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493227004232

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	me of the organization ERICAN PHILOSOPHICAL SOCIETY	·	Employer identification number
			23-1353269
Pa	organizations Maintaining Donor Acordanization answered "Yes" to Form 99		unds or Accounts. Complete if the
		(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 advifunds are the organization's property, subject to the		nor advised <b>Yes No</b>
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•
Pa	rt II Conservation Easements. Complete	ıf the organization answered "Yes"	to Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space  Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year	on or pleasure) Preservation of a	certified historic structure
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe the taxable year ►	rred, released, extinguished, or terminat	ed by the organization during
4	·		
	Number of states where property subject to conserva		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easer	nents during the year 🗠
7	A mount of expenses incurred in monitoring, inspectiness	ng, and enforcing conservation easement	s during the year
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ction Yes No
9	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financia	
Par	<b>TIII</b> Organizations Maintaining Collection Complete if the organization answered	ns of Art, Historical Treasures, Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue statement for public exhibition, education or resear	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA:		'
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> - \$

**b** Assets included in Form 990, Part X

Part	III Organizations Maintaining Co	llections of Art	, Hist	orical Tre	asures, or (	Othe	r Similar <i>i</i>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	following th	at are a signific	ant u	use of its coll	ection		
а	Public exhibition		d	┌ Loan or	exchange prog	grams	5			
b	Scholarly research		e	┌ Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how	they further	the organizatio	n's e	xempt purpos	e in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to						mılar	Г,	Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ed "\	es" to Forn	า 990	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	ediary f	or contributi	ons or other as	sets	not	[√	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	followir	ng table			1	Amou	nt	
c	Beginning balance					1c		AIIIOU	1111	
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?						/es	✓ No
b	If "Yes," explain the arrangement in Part XI\									
Pa	rt V Endowment Funds. Complete	ıf the organızatıoı	า answ	ered "Yes	' to Form 990	), Pa	rt IV, line 1	0.		
		(a)Current Year	(b)	Prior Year	(c)Two Years Ba	ick	(d)Three Year Back	s (e	<b>)</b> Four Y	ears Back
1a	Beginning of year balance	132,195,175		119,184,266	91,476	138				
b	Contributions	2,876,386		2,269,786	2,509,	,868				
c	Investment earnings or losses	-3,288,817		17,003,253	31,197,	,974				
d	Grants or scholarships									
e	Other expenditures for facilities and programs	5,865,952		6,098,369	5,874,	_				
f	Administrative expenses	171,220		163,761	125,	-				
g	End of year balance	125,745,572		132,195,175	119,184,	,266				
2	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment 🕨	12 600 %								
b	Permanent endowment 🕨 87 400 %									
C	Term endowment ►									
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation th	at are held a	and administer	ed for	the		Yes	No
	(i) unrelated organizations						[	3a(i)		No
	(ii) related organizations						3	Ba(ii)		No
	If "Yes" to 3a(II), are the related organization	· · · · · · · · · · · · · · · · · · ·						3b		No
4	Describe in Part XIV the intended uses of th									
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Par				T	T		
	Description of property			(a) Cost or ot basis (investm			(c) Accumula depreciatio		( <b>d</b> ) Boo	ok value
	Land		.			0.55		07.5		- 700 5==
	Buildings		•		26,85	8,698	11,119	,026	1:	5,739,672
	Leasehold improvements		.					-+		
	Equipment		.							
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X. colur	nn (B).	line 10(c).)			▶	+	1!	5,739,672
	, , , , , , , , , , , , , , , , , , , ,	, .,,,	V - //	1-7-7	<u> </u>			 е D (F		90) 2011

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	. ,	Cost or end-of-year market value	<u> </u>
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	12,400,844		
Part VIII Investments—Program Related. See			
		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	e
Total. (Column (b) should equal Form 990 Part X col (B) line 13 )			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, lir			
(a) Descrip		(b) Book valu	
(4) 5 65611		(2) Book valu	
Total (Column (b) about agust Farm 2000 Part V and (B) 1	<i>E</i> )		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Postretirement Benefit Liability	1,909,116		
Pension Benefit Liability	1,722,757		
Annuity Obligations	913,477		
· · ·	1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	4,545,350		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,264,978
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,939,346
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,674,368
4	Net unrealized gains (losses) on investments	4	-4,946,297
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	-283,854
9	Total adjustments (net) Add lines 4 - 8	9	-5,230,151
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-8,904,519
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	8,741,638
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 475,000		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	5,914,658
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,826,980
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	3,437,998
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	6,264,978
Paire 1	Reconciliation of Expenses per Audited Financial Statements With Expenses  Total expenses and losses per audited financial	; per r	10,378,466
_	statements	1	10,370,400
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	642,592
3	Subtract line <b>2e</b> from line <b>1</b>	3	9,735,874
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 171,220	1 1	
b	Other (Describe in Part XIV)		
C		4c	203,472
5		5	9,939,346
b c d e 3 4 a b c	Donated services and use of facilities	2e 3 4c 5	9,735,8 203,4 9,939,3

Identifier	Return Reference	Explanation				
Part X	Part X FIN48 Footnote	The Society adopted FASB ASC 740-10, as of January 1, 20 Management has evaluated the impact of this standard on its financial statements and believes that there are no uncertain positions and the effects of adopting this standard is not material to the Organization's financial position or change in assets The Society recognizes interest expense and penalticinterest expense. There was no interest or penalties related income taxes recognized for the years ended December 31, 2011 and 2010.				
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Change in value of annuity agreements \$32252				
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	431 Chestnut St rental expenses \$43423 Loss on disposition of property \$124169				
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Realized gains (losses) \$-2110441 Interest on temp cash investments \$8838 Dividends & Interest on securities \$3419237 Contributions to Endowment Fund \$2287956 431 Chestnut St rental expenses \$-43423 Loss on disposition of property \$-124169				
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Investment return designated for opera \$5431329 Other investment income \$8329				
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Realized Loss attributable to annuity \$0 Recovery of uncollectible promise to give \$0 Change in Postretirement benefit liability \$85861 Change in Pension Benefit Liability \$-331762 Change in Postretirement benefit liability \$-0 Unrealized gain attributable to annuity obligation \$-34539 Realized Gain attributable to annuity \$-3414				
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	Under the Society's endowment spending policy, 4 8% of the average market value at the mid-point of the previous three years is appropriated for current operations. The investment policy utilized by the Society attempts to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets (donor-restricted funds that the Society must hold in perpetuity or for a donor-specified period as well as council designated funds). Endowments have been established for the following activities: administration, research, publications, meetings, library, Franklin Hall, and any other activity of the Society.				
Part IV, Line 1b	Part IV, Line 1b Why is organization an agent, trustee, custodian or other intermediary for contrib	The Society is the beneficiary under a number of trusts administered by two banks. The assets of the trusts are not included in the Statement of Financial Position of the Society since the Society does not exercise any control over those funds and certain conditions must be met annually to receive the income. The income from the trusts for 2011 and 2010 was \$216,935 and \$182,354, respectively.				
Part III, Line 4	Part III, Line 4 Description of organization's collections and how it furthers its purpose	The Society's offices and exhibition galleries are located in Philosophical Hall, a national historic landmark. Its collection of books, manuscripts and works of art support research, discovery and public education through public exhibitions and the Society's research library.				
Part III, Line 1a	Part III, Line 1a If organization elected under SFAS 116 to not report are, historical treasures, o	Collection items acquired either through purchase or donation are not capitalized. Purchases of collection items are recorded as decreases in unrestricted net assets if purchased with unrestricted assets and as decreases in temporarily restricted or permanently restricted net assets if purchased with donor-restricted assets. Contributions of collection items are not recognized in the Statement of Activities. Proceeds from deaccessions or insurance recoveries are reflected on the Statement of Activities based on the absence or existence and nature of donor-imposed restrictions. The Society's accounts of not include values of Philosophical Hall, built between 1785 at 1789, a national historic landmark, and its collection of books manuscripts and works of art.				

Software ID: 11000144
Software Version: 2011v1.2

**EIN:** 23-1353269

Name: AMERICAN PHILOSOPHICAL SOCIETY

### Form 990, Special Condition Description:

### **Special Condition Description**

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and	<del>-</del>	ent C			ors	1		<u> </u>		
<b>(A)</b> Name and Title	(B) Average hours per		that a		y)		1	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Prof Kathleen M Sullivan Councilor	1 00	Х						0	0	0
Prof Michael I Sovern Councilor	1 00	Х						0	0	0
Dr Charles E Rosenberg Councilor	1 00	Х						0	0	0
George B Beitzel Treasurer/Counc	1 00	Х		х				0	0	0
Rev John W O'Malley V P /Councilor	1 00	Х		х				0	0	0
Dr Christoph Wolff Councilor	1 00	Х						0	0	0
Dr Neil J Smelser Councilor	1 00	Х						0	0	0
Paul F Miller Councilor	1 00	Х						0	0	0
Dr Mary Patterson McPherson Exc Off/Councl	40 00	Х		х				195,242	0	24,320
Dr John N Loeb Councilor	1 00	Х						0	0	0
Dr Hanna H Gray Councilor	1 00	Х						0	0	0
Dr Barbara J Grosz V P /Councilor	1 00	Х		x				0	0	0
Dr Lionel Gossman Councilor	1 00	Х						0	0	0
Dr Joel E Cohen Councilor	1 00	Х						0	0	0
Frank H T Rhodes Councilor	1 00	Х						0	0	0
Harry B Gray Councilor	1 00	Х						0	0	0
Barbara Oberg Councilor	1 00	Х						0	0	0
Dr Frances E Allen Councilor	1 00	Х						0	0	0
Linda Greenhouse Councilor	1 00	Х						0	0	0
Hon Arlın M Adams Councilor	1 00	Х						0	0	0
William B Eagleson Jr Councilor	1 00	Х						0	0	0
William H Frederick Jr Curator/Counsir	1 00	Х		х				0	0	0
Dr Henry A Millon Curator/CounsIr	1 00	Х		x				0	0	0
Dr Jerrold Meinwald Councilor	1 00	Х						0	0	0
Conrad K Harper Councilor	1 00	х						0	0	0

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

compensated Employees, and Independent confidences											
(A) Name and Title	(B) Average hours		(tion that a			ıll		( <b>D</b> ) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	rrom related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Dr Harriet Zuckerman V P /Councilor	1 00	х		х				0	0	0	
Dr Clyde F Barker Pres/Councilor	1 00	Х		x				0	0	0	
Gloria F Pinney Councilor	1 00	Х						0	0	0	
David D Sabatini Councilor	1 00	Х						0	0	0	
Purnell W Choppin Councilor	1 00	Х						0	0	0	
Carl F Miller Secretary/Counc	1 00	Х		х				0	0	0	
John Wolfe Financial Offic	40 00			х				115,117	0	24,798	
Martın Levitt Librarian	40 00			х				136,839	0	21,541	
Nanette Holben Develop Officer	40 00					Х		130,194	0	11,581	
Sue Ann Prince Museum Director	40 00					х		103,913	0	9,286	

DLN: 93493227004232

**Inspection** 

OMB No 1545-0047

SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

AMERICAN PHILOSOPHICAL SOCIETY

**Employer identification number** 

Pa	rt I General Information	n on Activiti	es Outside tl	ne United States. Co	omplete if the organiz	zation answered
	"Yes" to Form 990, Pa	rt IV, lıne 14b				
1	For grantmakers. Does the dassistance, the grantees' elig	gibility for the	grants or assis	stance, and the selecti	on criteria used to awa	ard
	the grants or assistance?					✓ Yes
2	<b>For grantmakers.</b> Describe in Pa United States	rt V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed )	)		
	(a) Region	( <b>b</b> ) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	<b>(f)</b> Total expenditures for region/investments in region
	Sub-total  Total from continuation sheets					
	to Part I  Totals (add lines 3a and 3h)					

Pa	Part IV,	line 15, for any	sistance to Orgar y recipient who rece space is needed.	<b>nizations or Entiti</b> erved more than \$5,	<b>es Outside the Ur</b> 000. Check this box	nited States. Composite of the composite	olete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 🔽
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	-								
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50:	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . 🕨	
3	Enter total nur	mber of other	organizations or en	tities				. ▶	
								Schodulo E	(Form 990) 2011

Part IIII Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

			r	<del></del>		1	т
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data						1	
	1						
	1		1			1	
	1					1	
	1		1			1	
	1		1			1	
			1			1	
			1			1	
	1		1			1	
	1		1			1	
			1			1	
			1			1	
			1			1	
	1		1				
			1			1	
			1			1	
	1		1				

### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional ınformatıon.

information.		
<u>I dentifier</u>	ReturnReference	Explanation
Grantmaker's Description of How		The American Philosophical Society has certain committees that
Grants are Used in Foreign Country		areresponsible for the selection of individuals receiving
		disbursements in furtherance of the exempt programs. An
		application for a grant mustbe typewritten on forms provided for that purpose Awards are made by the Society's Committee on
		Research in accordancewith the following principles 1 Grants
		are intended to assist investigators by providing forcosts of
		research work, such as the collection of scientific andliterary
		materials, preparation of photographs, microfilms, and
		otherrecords, purchases of supplies, necessary travel, and other
		incidentalexpenses of research 2 Grants are not made toward
		the payment of salaries of members of the staff of an educational
		or scientific institution. Grants may not include institutional
		overhead When a grant is made to a member of aninstitution to assist him in research of scholarly writing, it is expected that the
		Institution will cooperate in facilitating thework 3 Grants are not
		made for (a) salaries, fellowships, scholarships, or other projects
		involving personal expenses over long periods, (b)subsidies for
		publication, (c) usual or permanent equipment for theinstitution
		involved (but may be made for special apparatus needed inthe
		proposed research), (d) travel to meetings, (e) expense of
		grantee's family 4 Support of a long-continuing project is not
		undertaken, except inits initial stage 5 No recipient of a grant
		shall thereby become an employee of the Society The written
		agreement with the grantees sets forth the specificobjectives of
		the grant and requires each recipient to file a writtenreport with the Society for publication in the Yearbook In the formal
		notification sent to all recipients of grants there is arequest that
		credit be given to the Society in the publication of worksupported
		by such grants To this has been added another statementthat
		the Committee on Publications would appreciate an opportunity
		toconsider a manuscript, but there is no obligation that such a
		paper bepublished by the Society
_		
_		
		Schedule F (Form 990) 2011

**Software ID:** 11000144

**Software Version:** 2011v1.2

**EIN:** 23-1353269

Name: AMERICAN PHILOSOPHICAL SOCIETY

Form 990 Schedule F F	Part III - Grants a	nd Assistance	to Individuals O	utside The U S			
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non- cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Phillips Native American	North America	5	15,000	Check			FMV
Phillips Native American	Europe	1	3,500	Check			FM
Mellon Sabbatical Grants	South America	2	57,000	Check			FMV
Mellon Sabbatical Grants	Europe	5	177,000	Check			FMV
Mellon Sabbatical Grants	Europe	2	50,000	Wire Transfer			FMV
Mellon Sabbatical Grant	Middle East/N Afric	1	18,000	Check			FMV
Mellon Sabbatical Grant	East Asia/Pacific	1	40,000	Check			FMV
Mellon Sabattıcal Grant	South Asia	1	39,000	Check			FMV
Lewis Clark Fund Grants	Middle East/N Afric	1	4,000	Check			FMV
Lewis Clark Fund Grant	East Asia/Pacific	3	15,000	Check			FMV
Lewis and Clark Fund Grants	Europe	4	17,200	Check			FMV
Lewis & Clark Fund Grants	South America	6	27,200	Check			FMV
Lewis & Clark Fund Grant	Sub-Saharan Africa	1	5,000	Check			FMV
Lewis & Clark Fund Grant	Cent America/Carib	4	14,900	Check			FMV
Lewis & Clark Astrobiology grants	South America	3	14,700	Check			FMV
Lewis & Clark Astrobiology Grant	Sub-Saharan Africa	1	4,800	Check			FMV
Lewis & Clark Astrobiology Grant	North America	2	9,918	Check			FMV
Lewis & Clark Astrobiology grant	Cent America/Carib	1	5,000	Check			FMV
Franklın Research Grants	Sub-Saharan Africa	1	6,000	Check			FMV
Franklın Research Grants	South Asia	4	17,000	Check			FMV
Franklın Research Grants	South America	5	27,000	Check			FMV
Franklın Research Grants	North America	2	12,000	Check			FMV
Franklin Research Grants	Europe	27	152,700	Check			FMV
Franklın Research Grants	Europe	1	3,000	Wire Transfer			FMV
Franklın research Grants	East Asia /Pacific	3	18,000	Check			FMV
Franklin Resarch Grants	Cent America/Carib	2	8,000	Check			FMV

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Schedule I (Form 990)

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

23-1353269

DLN: 93493227004232 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN PHILOSOPHICAL SOCIETY

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

**Inspection Employer identification number** 

	mation on Grants						
Does the organization ma the selection criteria use	d to award the grants	orassistance?					✓ Yes 🗀
2 Describe in Part IV the o							
Form 990, Part I	IV, line 21 for any	o <b>Governments and</b> recipient that received 0) if additional space	d more than \$5,000.	Check this box if n	o one recipient rece	ived more than \$5,0	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) The Papers of Benjamin FranklinYale Univ Library 1603 A Yale St New Haven, CT 06520	06-0646973	501 (C)(3)	15,000	0	FM∨		Franklın Papers Project
(2) Phila Area Center for History of Scienc431 Chestnut Street Philadelphia, PA 19106	80-0218628	501 (C)(3)	160,795	0	FM∨		Support of PACHS
2 Enter total number of sec			listed in the line 1 table	2			2

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					
	<u> </u>	·	·	1	

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

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		The American Philosophical Society has certain committees that are responsible for the selection of individuals receiving disbursements in furtherance of the exempt programs. An application for a grant mustbe typewritten on forms provided for that purpose A wards are made by the Society's Committee on Research in accordance with the following principles. 1 Grants are intended to assist investigators by providing forcosts of research work, such as the collection of scientific and literary materials, preparation of photographs, microfilms, and other incidental expenses of research. 2 Grants are not made toward the payment of salaries of members of the staff of an educational or scientific institution. Grants may notinclude institutional overhead. When a grant is made to a member of aninstitution to assist him in research of scholarly writing, it is expected that the institution will cooperate in facilitating thework. 3 Grants are not made for. (a) salaries, fellowships, scholarships, or other projects involving personal expenses over long periods, (b) subsidies for publication, (c) usual or permanent equipment for the institution involved (but may be made for special apparatus needed in the proposed research), (d) travel to meetings, (e) expense of grantee's family. 4 Support of a long-continuing project is not undertaken, except inits initial stage. 5 No recipient of a grant shall thereby become an employee of the Society. The written agreement with the grantees sets forth the specificobjectives of the grant and requires each recipient to file a written epocation with the Society for publication in the Yearbook In the formal notification sent to all recipients of grants there is a request that credit be given to the Society in the publication of worksupported by such grants. To this has been added another statementthat the Committee on Publications would appreciate an opportunity toconsider a manuscript, but there is no obligation that such a paper bepublished by the Society.

**Software ID:** 11000144

**Software Version:** 2011v1.2

**EIN:** 23-1353269

Name: AMERICAN PHILOSOPHICAL SOCIETY

## Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	<b>(f)</b> Description of non-cash assistance
Sabbatical Fellowships	12	446,000		FMV	
Phillips Native American	10	22,850		FMV	
Library Resident Research Grant	21	49,500		FMV	
Lewis and Clark Fund Grants	9	32,100		FMV	
Lewis and Clark Astrobiology Grant	5	23,146		FMV	
John Hope Franklin Fellowship	1	20,000		FMV	
Franklin Research Grant	17	86,000		FMV	
Daland Fellowships	3	85,000		FMV	

DLN: 93493227004232

OMB No 1545-0047

### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

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

**Compensation Information** 

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** AMERICAN PHILOSOPHICAL SOCIETY 23-1353269

- 6	Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form $990$ , Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			_
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			
	section 53 4958-6(c)?	9		No

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns		
_		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		compensation	penents	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) Martın Levitt	(I) (II)	136,839			3,410	18,131	158,380		
(2) Dr Mary Patterson McPherson	(I) (II)	195,242			15,526	8,794	219,562		
								·	

Schedule J (Form 990) 2011 Page **3** 

### Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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DLN: 93493227004232

OMB No 1545-0047

**SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

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Name of the organization AMERICAN PHILOSOPHICAL SOCIETY

**Employer identification number** 

23-1353269

Pa	Types of Propert	у		•				
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	Method of contribution		_	
1	Art—Works of art			- 5				
2	Art—Historical treasures .	X	16					
3	Art—Fractional interests .							
4	Books and publications .							
5	Clothing and household							
	goods							
	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stoc							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous .							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial .							
	Real estate—Other	_						
18	Collectibles							
	Food inventory							
	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 recei for which the organization cor				29		l I	
20-	During the year did the areas	nization recess	o by contribution and are	urty reported in Deat Tillings	1-20 that it	_	Yes	No
SUA	During the year, did the organ							
	must hold for at least three y			·	a to be used	1		
_	for exempt purposes for the e					30a		No
	If "Yes," describe the arrange							
31	Does the organization have a					31		No_
32a	Does the organization hire or contributions?	use third part	ies or related organizations	to solicit, process, or sell i	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not rep describe in Part II	oort revenues	ın column (c) for a type of p	roperty for which column (a	) is checked,			

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Part I, Line 33, Revenues Not Reported		CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENT OF ACTIVITIES BECAUSE THE SOCIETY DOES NOT CAPITALIZE ITS COLLECTIONS AS ALLOWED UNDER GENERALLY
		ACCEPTED ACCOUNTING PRINCIPLES

Schedule M (Form 990) 2011

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

Name of the organization	•
AMERICAN PHILOSOPHICAL SOCIETY  23-1:	.353269

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE SOCIETY'S YEARBOOK FOR 2011 GIVES A COMPLETE ACCOUNT OF THE SOCIETY'S ACTIVITIES IT ALSO INCLUDES A COPY OF ITS LAWS, POLICIES AND FINANCIAL STATEMENTS A COPY WILL BE FURNISHED UPON REQUEST
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	COMPARABILITY DATA ARE UTILIZED AND ALL SALARIES ARE DETERMINED AT THE DISCRETION OF THE EXECUTIVE OFFICER
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	COVERED PERSONS ARE SOLICITED ANNUALLY, ASKING THESE INDIVIDUALS TO REPORT ANY POSSIBLE POTENTIAL CONFLICT
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	1 A COPY OF FORM 990 IS PROVIDED TO THE COMMITTEE ON AUDIT AND TO EVERY VOTING MEMBER OF THE COUNCIL 2 THE TREASURER AND THE CHAIR OF THE COMMITTEE ON AUDIT ARE RESPONSIBLE FOR SOLICITING COMMENTS FROM THE COMMITTEE ON AUDIT AND RECEIVING COMMENTS FROM THE COUNCIL WITHIN A FIXED REASONABLE PERIOD OF TIME BEFORE THE EXPECTED (INITIAL OR EXTENDED) FILING DUE DATE. THE TREASURER AND CHAIR OF THE COMMITTEE ON AUDIT REPORT ANY CONCERNS TO THE EXECUTIVE AND ADMINISTRATIVE OFFICERS FOR REVIEW. THE EXECUTIVE OFFICER RESPONDS TO THE TREASURER AND THE CHAIR OF THE COMMITTEE ON AUDIT IN A REASONABLE MANNER. THE EXECUTIVE OFFICER AFTER DUE DELIBERATION SIGNS THE RETURN.
Form 990, Part VI, Line 7b	Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	ALL COUNCIL DECISIONS RELATING TO THE CHARTER, THE LAWS, AND THE COMPOSITION AND SIZE OF THE MEMBERSHIP, ARE SUBJECT TO THE MEMBERSHIP'S APPROVAL
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	THE MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY (COUNCIL) AND APPROVE SPECIFIC DECISIONS OF COUNCIL AS THE LAWS DIRECT
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	THE SOCIETY HAS MEMBERS THE MEMBERS DO NOT RECEIVE A SHARE OF THE SOCIETY'S PROFITS AND THERE ARE NO MEMBER DUES