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DLN: 93493220004422

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

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 A For the 2011 D Employer identification number C Name of organizatio **B** Check if applicable SOCIETY FOR THE STUDY OF EVOLUTION C/O DR BUTCH BRODIE UNIV OF VIRGINIA 48-6121424 Address change E Telephone number Name change (434) 982-5486 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 400,699 Terminated City or town, state or country, and ZIP + 4 CHARLOTTESVILLE, VA 229044328 Amended return Application pending Name and address of principal officer Is this a group return for **BUTCH BRODIE** affiliates? PO BOX 400328 CHARLOTTESVILLE, VA 229044328 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) Group exemption number H(c) Website: ► WWW EVOLUTIONSOCIETY ORG K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ L Year of formation 1946 M State of legal domicile CO Summary Part I Briefly describe the organization's mission or most significant activities PROMOTE THE STUDY OF ORGANIC EVOLUTION, INTEGRATE WITH OTHER SCIENCES CONCERNING EVOLUTION Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) . 12 4 5 0 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . Total number of volunteers (estimate if necessary) 6 1,500 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** O 0 8 Contributions and grants (Part VIII, line 1h) . 1,149,987 337,469 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 54,871 63,230 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 1,204,858 400.699 13 50.645 80,861 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 25,000 37,000 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 0 750,506 283,901 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 826,151 401,762 19 Revenue less expenses Subtract line 18 from line 12 . 378,707 -1,063 (Assets or delatables) **Beginning of Current End of Year** Year 2,228,449 2,256,583 20 Total assets (Part X, line 16) . . . Men. 21 Total liabilities (Part X, line 26) . . 0 0 2,256,583 22 Net assets or fund balances Subtract line 21 from line 20 2,228,449 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ***** 2012-07-26 Signature of officer Sign

Here BUTCH BRODIE EXECUTIVE VICE PRESIDENT Type or print name and title Date Check if Preparer's taxpayer identification number Preparer's (see instructions) P01251998 JENNIFER M VACHA Paid employed 🕨 🧧 Preparer's BROWN SMITH WALLACE LLC Firm's name (or yours EIN 43-1001367 if self-employed), address, and ZIP + 4 **Use Only** 1050 N LINDBERGH BLVD Phone no (314) 983-1200 ST LOUIS, MO 631322912

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

FOIII	990 (2011) Page
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
	OBJECTIVES OF THE SOCIETY FOR THE STUDY OF EVOLUTION ARE THE PROMOTION OF THE STUDY OF ORGANIC LUTION AND THE INTEGRATION OF THE VARIOUS FIELDS OF SCIENCE CONCERNED WITH EVOLUTION
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section $501(c)(3)$ and $501(c)(4)$ organizations and section $4947(a)(1)$ trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 114,375 including grants of \$) (Revenue \$ 112,625)
	THE EVOLUTION MEETING IS HELD JOINTLY BY THE SOCIETY FOR THE STUDY OF EVOLUTION (SSE), THE AMERICAN SOCIETY OF NATURALISTS (ASN), AND THE SOCIETY OF SYSTEMATIC BIOLOGISTS (SSB) BETWEEN 1,400 AND 1,500 ATTENDEES WERE PRESENT AT THE 2011 MEMBERSHIP MEETING IN NORMAN, OK PAST MEETINGS WERE HELD IN CHICO, CA (2003), FORT COLLINS, CO (2004), FAIRBANKS, AK (2005), STONY BROOK, NY (2006), CHRISTCHURCH, NZ (2007), MINNEAPOLIS, MINNESOTA (2008), MOSCOW, IDAHO (2009), AND PORTLAND, OREGON (2010)
	(Code) (Expenses \$ 134,711 including grants of \$) (Revenue \$ 224,844)
4b	PUBLICATIONS - THE SOCIETY PUBLISHES A JOURNAL IN THE FIELD OF EVOLUTION ("EVOLUTION") AND OTHER PUBLICATIONS "EVOLUTION" IS THE PREMIER PUBLICATION DEVOTED TO THE STUDY OF ORGANIC EVOLUTION AND THE INTEGRATION OF THE VARIOUS FIELDS OF SCIENCE CONCERNED WITH EVOLUTION THI JOURNAL IS PUBLISHED MONTHLY AND PRESENTS SIGNIFICANT AND ORIGINAL RESULTS THAT EXTEND OUR UNDERSTANDING OF EVOLUTIONARY PHENOMENA AND PROCESSES VOLUME 1 NO 1/2 WAS PUBLISHED MAR-JUN 1947
	(Code) (Expenses \$ 80,861 including grants of \$ 80,861) (Revenue \$)
-	AWARDS - THE SOCIETY GRANTS VARIOUS AWARDS INCLUDING THE STEPHEN JAY GOULD PRIZE IS AWARDED TO RECOGNIZE INDIVIDUALS WHOSE SUSTAINED AND EXEMPLARY EFFORTS HAVE ADVANCED PUBLIC UNDERSTANDING OF EVOLUTIONARY SCIENCE AND ITS IMPORTANCE IN BIOLOGY, EDUCATION, AND EVERYDAY LIFE IN THE SPIRIT OF STEPHEN JAY GOULD THE THEODOSIUS DOBZHANSKY PRIZE IS AWARDED TO RECOGNIZE THE ACCOMPLISHMENTS AND FUTURE PROMISE OF AN OUTSTANDING YOUNG EVOLUTIONARY BIOLOGIST THE PRIZE WAS ESTABLISHED IN MEMORY OF PROFESSOR DOBZHANSKY BY HIS FRIENDS AND COLLEAGUES, AND REFLECTS HIS LIFELONG COMMITMENT TO FOSTERING THE RESEARCH CAREERS OF YOUNG SCIENTISTS THE R A FISHER PRIZE IS AWARDED FOR AN OUTSTANDING PH D DISSERTATION PAPER PUBLISHED IN THE JOURNAL "EVOLUTION" DURING A GIVEN CALENDAR YEAR OTHER AWARDS INCLUDE THE HAMILTON AWARD AND THE ROSEMARY GRANT AWARD
	(Code) (Expenses \$ 21,341 including grants of \$) (Revenue \$) EDUCATION OUTREACH - RESPONSIBLE FOR OUTREACH TO THE GENERAL PUBLIC TO PROMOTE SIGNIFICANT MILESTONES IN EVOLUTION
	Other program services (Describe in Schedule O)
-ru	(Expenses \$ 21,341 including grants of \$) (Revenue \$)
4e	Total program service expenses▶\$ 351,288

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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		No
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		No
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		N o
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		N o
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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		No
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		No
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		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. 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 $\textcircled{\textbf{5}}$	21		No
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		N o
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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
c	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? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		Νo
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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	
		F	orm 990	(2011)

Part V Stat	ements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 9			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
a	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			
h	return			
ט		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νo
b	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			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	<i>55</i>		
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	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		N 1 -
f	contract?	7e 7f		No No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		110
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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	7.1		
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
•	year [12b]			
	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 allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
c	the states in which the organization is licensed to issue qualified health plans Enter the aggregate amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

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			
Ia	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 other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was 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?			No
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		Νo
	vertion 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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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		No
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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	
b	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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	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. Check all that apply			
	Own website Another's website Vpon 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 THE ORGANIZATION

UNIV OF VA DEPT OF BIOLOGY CHARLOTTESVILLE, VA 229044328

(434)982-5486

<u>Part VII</u> 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

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

◆ 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

(A) Name and Title	(B) Average hours per week (describe hours	(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- MISC)	(F) Estimated amount of other compensation from the organization and related	
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations	
(1) SCOTT EDWARDS PRESIDENT	1 00	х		х				0	0	0	
(2) RICHARD LENSKI PRESIDENT ELECT	1 00	х		Х				0	0	0	
(3) EDMUND BUTCH BRODIE III EXECUTIVE VICE PRESIDENT	12 00	х		Х				12,000	0	0	
(4) SHARON STRAUSS VICE PRESIDENT	1 00	х		Х				0	0	0	
(5) OLE SEEHAUSEN VICE PRESIDENT	1 00	х		Х				0	0	0	
(6) JOHN KELLY SECRETARY	1 00	Х		Х				0	0	0	
(7) JERRY COYNE PAST PRESIDENT	1 00	х						0	0	0	
(8) DAPHNE FAIRBAIRN EDITOR-IN-CHIEF	20 00	х						25,000	0	0	
(9) JENNY BOUGHMAN MEMBER	1 00	х						0	0	0	
(10) LAURA GALLOWAY MEMBER	1 00	Х						0	0	0	
(11) ANEIL AGRAWAL MEMBER	1 00	х						0	0	0	
(12) JUDITH MANK MEMBER	1 00	Х						0	0	0	
(13) MARIA SERVEDIO MEMBER	1 00	х						0	0	0	
(14) JOHN WILLIS MEMBER	1 00	Х						0	0	0	

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

	(A) Name and Title	(B) A verage hours per week (describe	A verage Position (do not check R nours more than one box, cor unless person is both an officer and a director/trustee) 2/1								(E) Reportable compensation from related organizations (W- 2/1099-	compensation from the organization a		ated f other sation the on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
1b	Sub-Total	<u> </u>		<u> </u>	<u> </u>	<u> </u>		<u> </u>						
С	Total from continuation sheets t	to Part VII, Sec	tion A					•						
2	Total (add lines 1b and 1c)					ted	• above) who	receive	37,000 d more tha	an	0		0
											ı		Yes	No
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete Sch	edule J for such	ındıvıdı	ual .		•	•	•				3		No
4	For any individual listed on line 1 organization and related organization individual											4		No
5									5		No			
Se	ction B. Independent Cont													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax yo	the organizatio												
	Nam	(A) ne and business add	dress							Desc	(B) ription of services		(C Comper	
												#		
	otal number of independent contr 3100,000 of compensation from t			ot lın	nıted	d to	those	liste	d above)	who recei	ved more than			

art AT		Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
2	1a	Federated campaigns 1a				
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b				
<u>5</u> ,≧	c	Fundraising events 1c				
≝ <u>=</u>	d	Related organizations 1d				
ಕ್ಕ್≌						
일등	е		ļ			
올높ㅣ	f	All other contributions, gifts, grants, and 1f similar amounts not included above				
<u>5</u> €	g	Noncash contributions included in				
들유	_	lines 1a-1f \$				
중투니	h	Total. Add lines 1a-1f				
		Business Code				
-≘	2-		224.044	224.044		
Per I.	2a	PUBLICATIONS 511120	224,844	224,844		
28	b	MEMBERSHIP/REGISTRATIO 511120	112,625	112,625		
9	С					
Ė	d					
36	e					
Program Service Revenue		All other programs common services				
 	f	All other program service revenue				
ΔŤ	g	Total. Add lines 2a−2f	337,469			
 	<u> </u>	Investment income (including dividends, interest				
	_	and other similar amounts)	53,418			53,418
	4	Income from investment of tax-exempt bond proceeds	,			<u>'</u>
	т 5					
	3	Royalties				
1.	c -	(i) Real (ii) Personal	-			
- '	6a	Gross rents	-			
	b	Less rental expenses				
	C	Rental income				
	d	or (loss) Net rental income or (loss)				
	_	(i) Securities (ii) Other				
.	7a	Gross amount 9,812	1			
1	<i>,</i> a	from sales of				
		assets other than inventory				
	b	Less cost or 0]			
		other basis and sales expenses				
	c	Gain or (loss) 9,812]			
	d	Net gain or (loss)	9,812			9,812
	8a	Gross income from fundraising events (not including				
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18				
-		a				
<u> </u>	b	Less direct expenses b]			
5	С	Net income or (loss) from fundraising events	1			
	9a	Gross income from gaming activities See Part IV, line 19				
		a	4			
	b	Less direct expenses b] .			
	C	Net income or (loss) from gaming activities				
:	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b	-			
-	С	Net income or (loss) from sales of inventory				
F		Miscellaneous Revenue Business Code	-			
;	11a					
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
		▶				
] :	12	Total revenue. See Instructions	400,699	337,469	0	63,230

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

(B)

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	67,455	67,455		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	13,406	13,406		
4	Benefits paid to or for members	,	·		
5	Compensation of current officers, directors, trustees, and key employees	37,000	25,000	12,000	_
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				_
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
ь	Legal	5,060		5,060	_
c	Accounting	9,050		9,050	
d	Lobbying	,		ŕ	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	10,503		10,503	
g	Other	45,255	45,255	,	
12	Advertising and promotion	,			
13	Office expenses	4,027	166	3,861	
14	Information technology	845	845	,	
15	Royalties				
16	Occupancy				
17	Travel	62,127	62,127		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,		_
19	Conferences, conventions, and meetings	51,423	51,423		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	825	825		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	PUBLICATION EXPENSES	51,456	51,456		
b	INSTITUTIONAL CONTRIBUT	26,000	16,000	10,000	
c	EDUCATION OUTREACH	8,780	8,780		
d	DUES	8,550	8,550		_
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	401,762	351,288	50,474	0
26	Joint costs. Check here ► ✓ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,	,		orm 990 (2011)

Pa	irt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	261,524	1	214,801
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employed highest compensated employees Complete Part II of	es, and		
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)$ persons described in section $4958(c)(3)(B)$ Complete Part II of	(1)) and		
76		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	1,992,077	11	1,992,732
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,982	15	20,916
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,256,583	16	2,228,449
	17	Accounts payable and accrued expenses .		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ر. م	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
es —		Organizations that follow SFAS 117, check here ▶			
Š	27	Unrestricted net assets	2.256.583	27	2,228,449
<u>8</u>	28	Temporarily restricted net assets		28	_,
<u> </u>	29	Permanently restricted net assets		29	
Fund Balance		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
(5.5	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net As	33	Total net assets or fund balances	2,256,583	33	2,228,449
	34	Total liabilities and net assets/fund balances	2,256,583	-	2 228 449

Pa	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4	100,69
2	Total expenses (must equal Part IX, column (A), line 25)	2			101,76
3	Revenue less expenses Subtract line 2 from line 1	3			-1,06
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,2	256,58
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-27,07
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		2,2	228,44
Pa	The contains a response to any question in this Part XII			T	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			165	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 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	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Νo
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

			OY OF EVOLUT				48-6121424					
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All organization	ns must complete this p		ns				
The	organi					ough 11, check only one bo						
1	Γ	A churc	ch, convent	ion of churches, or a	ssociation of churches	section 170(b)(1)(A)(i).						
2	Γ	A scho	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	Γ	A hosp	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	Γ		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5	Г	An orga	anızatıon op	erated for the benefi	t of a college or univers	sity owned or operated by a	a governmental unit de	scribed in				
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)							
6	\sqcap	A feder	al, state, or	local government o	governmental unit des	scribed in section 170(b)(1	L)(A)(v).					
7	Γ	describ	ed in	at normally receives (A)(vi) (Complete P	·	s support from a governme	ental unit or from the g	eneral public				
8	Γ	A comr	nunity trust	described in sect ior	170(b)(1)(A)(vi) (Co	omplete Part II)						
9	굣	An orga	anization th	at normally receives	(1) more than 331/3%	of its support from contri	butions, membership f	ees, and gross				
		receipt	s from activ	rities related to its e	xempt functions—subje	ect to certain exceptions, a	ind (2) no more than 3	31/3% of				
		ıts sup _l	port from gr	oss investment inco	me and unrelated busir	ness taxable income (less	section 511 tax) from	businesses				
		acquire	d by the or	ganızatıon after June	30, 1975 See section	509(a)(2). (Complete Par	tIII)					
10	Γ	An orga	anızatıon or	ganized and operated	d exclusively to test fo	r public safety See section	509(a)(4).					
11	Γ	one or i	more public	ly supported organiz	ations described in sec porting organization and	nefit of, to perform the fund tion 509(a)(1) or section d complete lines 11e throu II - Functionally integrate	509(a)(2) See sectio gh 11h					
е	Γ	other th	_	•	_	itrolled directly or indirectl ublicly supported organizat		•				
f			rganization his box	received a written de	etermination from the I	RS that it is a Type I, Type	e II or Type III suppo	rting organization,				
g		Since A followin	ugust 17, 2 g persons?			ft or contribution from any		,				
				·	•	together with persons des	· · · · .	Yes No				
			•		e the supported organi	zation?		1g(i)				
			•	er of a person descri	• •	ahaya?		1g(ii)				
h		• •		, ,	n described in (i) or (ii)		[1.	lg(iii)				
h		PIOVIGE	: the followi	ng mormation about	the supported organiza	ation(2)						
	(i) Name		(ii)	(iii) Type of organization (described on	(iv) Is the organization in	(v) Did you notify the organization in	(vi) Is the organization in	(vii)				

(i) Name of supported organization	(ii) EIN	organization (described on lines 1- 9 above or IRC section (see	Is the organization in col (i) listed in your governing document?		Did you notify the organization in col (i) of your support?		Is the organization in col (i) organized in the US?		Is the organization in col (i) organized		(vii) A mount of support?	
		instructions))	Yes	No	Yes	No	Yes	No				
-												
-												
Total												

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

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.)

Se	ction A. Public Support	•	•		, ,	•		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")			670				670
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	312,236	270,803	413,833	1,149,987	:	337,469	2,484,328
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2,	312,236	270,803	414,503	1,149,987		337,469	2,484,998
b	and 3 received from disqualified persons Amounts included on lines 2 and 3							0
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							0
c 8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)							2,484,998
Se	ction B. Total Support			I			ı	
Cale	ndar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
9	In) A mounts from line 6	312,236	270,803	414,503	1,149,987	3	337,469	2,484,998
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	48,092	47,624	47,475	47,591		53,418	244,200
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	48,092	47,624	47,475	47,591		53,418	244,200
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	1,860						1,860
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	45,064	3,752					48,816
13	Total support (Add lines 9, 10c, 11 and 12)	407,252	322,179	461,978	1,197,578	3	390,887	2,779,874
14	First Five Years If the Form 990 is for check this box and stop here	or the organizatio	n's first, second,	thırd, fourth, or f	ifth tax year as a	501(c)(3) organ	zation, ▶□
	ction C. Computation of Publ							
15	Public Support Percentage for 2011			13 column (f))		15		89 390 %
16	Public support percentage from 201	O Schedule A, Pa	rt III, line 15			16		90 340 %
	ction D. Computation of Inve							
17	Investment income percentage for 2	•			(†))	17		8 780 %
18	Investment income percentage from				long de	18	20/	7 510 %
19a	33 1/3% support tests—2011. If the						3% and	line 17 is not ►√

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

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

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. 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: 93493220004422

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

to Part I

c Totals (add lines 3a and 3b)

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

▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Open to Public

Internal Revenue Service					Inspection
Name of the organization	OLUTION:			Employer ident	tification number
SOCIETY FOR THE STUDY OF EV C/O DR BUTCH BRODIE UNIV OF				48-6121424	
Part I General Informat	tion on Activiti		ne United States. Co		zation answered
"Yes" to Form 990,					
1 For grantmakers. Does th					
assistance, the grantees' (the grants or assistance?		_			
2 For grantmakers. Describe in United States	Part V the organiz	atıon's procedur	es for monitoring the use	of grant funds outside t	he
3 Activites per Region (Use Pa	art V ıf addıtıonal s	pace is needed)	ı		
(a) Region	(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	(f) Total expenditures for region/investments in region
3a Sub-total	0	0			(
b Total from continuation sheet	ts 0				(

0

Pai	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Part V if additional space is needed.										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
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 of 1(c)(3) equivalency	country, recognized letter	as . •			
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed. (d) A mount of (c) Number of (e) Manner of cash (f) A mount of (g) Description (h) Method of (a) Type of grant or (b) Region recipients cash grant disbursement non-cash of non-cash valuation assistance (book, FMV, assistance assistance appraisal, other) 7,500 CHECK ROSEMARY GRANT NORTH AMERICA -3 CANADA AND AWARD FOR GRADUATE STUDENT MEXICO, BUT RESEARCH ROSEMARY GRANT EUROPE 3 5,906 CHECK (INCLUDING AWARD FOR GRADUATE STUDENT ICELAND & GREENLAND) -RESEARCH

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

Identifier	ReturnReference	uctions) required in Part I, line 2, and any Explanation
		<u>'</u>
	1	

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DLN: 93493220004422

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Inspection

LITION					Employer identification	on number
					48-6121424	
n on Grants and	d Assistance				•	
ard the grants or as	sıstance? .					ר Yes Γ
e 21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 gra or assistance
					_	
	records to substantificated the grants or as ition's procedures for sistance to Go at 21 for any recipilation (b) EIN (b) EIN	records to substantiate the amount of the rard the grants or assistance?	records to substantiate the amount of the grants or assistance, the arid the grants or assistance?	records to substantiate the amount of the grants or assistance, the grantees' eligibility for and the grants or assistance?	no nor Grants and Assistance records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance and the grants or assistance? The grants or assistance? The grants or assistance? The grants or assistance is the grants or assistance, the grantees' eligibility for the grants or assistance and the grants or assistance is grant funds in the United States. Complete if the organizations are grant funds in the United States. Complete if the organization of the grants or assistance is needed. The grant of grant is grant is grant is grant is grant in the grants of grant in the grants or assistance is grant or assistance in the grants or assistance is grant or assistance in the grants or assistance is grant or assistance in the grants or assistance is grant or assistance in the grants or assistance is grant or assistance in the grants of grant is grants or assistance in the grants of grants or assistance is grants or assistance in the grants of grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance is grants or assistance in the grants or assistance in the grants or assistance in the grants or assistance is grants or assistance in the grants or assi	mon Grants and Assistance records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and rard the grants or assistance?

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STEPHEN JAY GOULD PRIZE, R A FISHER PRIZE, HAMILTON AWARD, ROSEMARY GRANT AWARDS FOR GRADUATE STUDENT RESEARCH - AWARDS FOR EXCELLENCE IN THE FIELD OF ORGANIC EVOLUTION AND THE INTEGRATION OF VARIOUS FIELDS OF SCIENCE CONCERNED WITH EVOLUTION	29	67,455			

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
PROCEDURE FOR MONITORING GRANTS IN THE U S	·	SCHEDULE I, PART I, LINE 2 THE SOCIETY PROVIDES AWARDS TO RECOGNIZE INDIVIDUALS WHO, THROUGH WRITINGS, TEACHINGS, AND OTHER ACTIVITIES, ADVANCE THE UNDERSTANDING OF EVOLUTIONARY SCIENCE AND ITS IMPORTANCE IN BIOLOGY, EDUCATION, AND LIFE WINNERS OF THE ROSEMARY GRANT AWARDS FOR GRADUATE STUDENT RESEARCH ARE REQUIRED TO SUBMIT A FULL CITATION OF THEIR WORK WITHIN 2 MONTHS OF PUBLICATION

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As Filed Data -

DLN: 93493220004422

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization SOCIETY FOR THE STUDY OF EVOLUTION C/O DR BUTCH BRODIE UNIV OF VIRGINIA **Employer identification number**

48-6121424

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THERE ARE MULTIPLE CATEGORIES OF MEMBERS, EACH OF WHICH CARRIES ELECTRONIC ACCESS TO THE JOURNAL OF THE SOCIETY, THE RIGHT TO VOTE IN SOCIETY ELECTIONS, AND ALL OTHER PRIVILEGES OF MEMBERSHIP ALL MEMBERS IN GOOD STANDING HAVE VOTING RIGHTS THE MEMBER AND ASSOCIATE MEMBER IN A FAMILY SHALL HAVE SEPARATE VOTES
	FORM 990, PART VI, SECTION A, LINE 7A	NOT LESS THAN SIX MONTHS PRIOR TO AN ELECTION, THE PRESIDENT SHALL APPOINT A NOMINATING COMMITTEE OF THREE MEMBERS THE COMMITTEE SHALL BE CHAIRED BY THE SENIOR MEMBER IT IS THE DUTY OF THE COMMITTEE, AFTER RECEIVING BY MAIL THE MEMBERSHIP PROPOSALS FOR EACH OFFICE, EXCEPT FOR THE OFFICES OF EXECUTIVE VICE PRESIDENT AND SECRETARY, FOR EACH OF WHICH A SINGLE NOMINATION SHALL BE MADE, AND THE OFFICE OF THE EDITOR OF THE JOURNAL, WHO SHALL RUN UNOPPOSED AND BE NOMINATED BY AN INDEPENDENT SEARCH COMMITTEE IN SELECTING CANDIDATES, DUE CONSIDERATION SHALL BE GIVEN TO REPRESENTATION OF THE VARIOUS FIELDS OF INTEREST TO THE SOCIETY THE COMMITTEE SHALL TRANSMIT ITS NOMINATIONS TO THE SECRETARY AT LEAST THREE MONTHS PRIOR TO THE ELECTION
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF 990 IS REVIEWED BY THE EXECUTIVE VICE PRESIDENT CHANGES, IF ANY, ARE INCORPORATED AND THE RETURN IS FINALIZED FOR SUBMISSION TO IRS A COPY OF THE RETURN IS THEN MADE AVAILABLE THE REST OF THE COUNCIL
	FORM 990, PART VI, SECTION B, LINE 15	FORM 990, PART VI, SECTION B, LINE 15A AND 15B COMPENSATION AWARDED IS SUBJECT TO REVIEW AND APPROVAL BY NON-INTERESTED MEMBERS OF THE COUNCIL COMPARABILITY DATA OF OTHER SIMILAR SOCIETIES IS CONSIDERED IN THE DELIBERATION AND DECISION-MAKING PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -27,071

Additional Data

Software ID: Software Version:

EIN: 48-6121424

Name: SOCIETY FOR THE STUDY OF EVOLUTION

C/O DR BUTCH BRODIE UNIV OF VIRGINIA

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 21,341 including grants of \$) (Revenue \$

EDUCATION OUTREACH - RESPONSIBLE FOR OUTREACH TO THE GENERAL PUBLIC TO PROMOTE SIGNIFICANT MILESTONES IN EVOLUTION