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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	or the	2013 calendar year, or tax year beginning	and o	ending	_			
В	Check if applicable	C Name of organization			D Employer identif	fication number		
	Addres	AMERICAN ASTRONOMICAL SOCIETY						
	Name change	Doing Business As			21-0	735173		
	∏initial □retum □Termin	Number and street (or P 0 box if mail is not delivered to street address) 2000 FLORIDA AVENUE, NW		Room/suite	E Telephone number 202-328-2010			
늗	⊸ated □Amend				G Gross receipts \$ 12,246,672.			
<u> </u>	⊸return ∏Applica	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20009	е					
	⊥tiòn pendin		PF	HD.	H(a) Is this a group for subordinate			
		SAME AS C ABOVE			H(b) Are all subordinates			
$\overline{}$	Гах-ехе	mpt status: X 501(c)(3) 501(c) ()	a)(1) o	or 527	1 ` `	a list. (see instructions)		
		e: ► WWW.AAS.ORG	-11.7.		H(c) Group exempti			
		organization X Corporation		L Year		M State of legal domicile DC		
	art I	Summary						
ø		Briefly describe the organization's mission or most significant activities: $\overline{ ext{TC}}$		ROMOTE	SCIENTIFC	RESEARCH IN		
Activities & Governance	'	THE AREA OF ASTRONOMY AND ASTROPHYSICS	<u>. </u>					
era	2 (Check this box 🕨 📖 if the organization discontinued its operations or c	dispos	sed of more	than 25% of its net a	1		
Š	1	Number of voting members of the governing body (Part VI, line 1a)			3	10		
∞ ত	1	Number of independent voting members of the governing body (Part VI, line			4	24		
ties	i	Total number of individuals employed in calendar year 2013 (Part V, line 2a)			5	200		
Ę	1	Total number of volunteers (estimate if necessary)			6	011 000		
Ą	1	Total unrelated business revenue from Part VIII, column (C), line 12			7a	200 710		
	В	Net unrelated business taxable income from Form 990-T, line 34 RECENT:			Prior Year	Current Year		
Revenue	8			-	1,531,462			
				-	10,535,750			
eve	10	Program service revenue (Part VIII, line 28)			519,928			
Œ	11	Other revenue (Part VIII, column (A), lines 5 6d, 8c, 9c, 10c, and 11e)			<5,428	<39,289.		
		Total revenue - add lines 8 through 11 (must ed a Fait Vit column (A), line	12)		12,581,712			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			497,395			
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.			
es	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5	5-10)		2,244,911	2,513,106.		
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		_	0 .	0.		
Ä	b	Total fundraising expenses (Part IX, column (D), line 25)		0.	8,003,753	8,629,543.		
_	17 '	Other expenses (Part IX, column (A), lines 11a·11d, 11f·24e)			10,746,059			
	I .	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		-	1,835,653			
es-	19	Revenue less expenses. Subtract line 16 from line 12		Re	eginning of Current Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		100	20,180,784			
Ass	21	Total liabilities (Part X, line 26)			3,150,875			
E SE	22	Net assets or fund balances. Subtract line 21 from line 20			17,029,909			
	art fl	Signature Block						
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying sch	hedules	s and statem	ents, and to the best of r	my knowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information	of wh	iich prepare	r has any knowledge			
		garant				7-14-14		
Sig	n	Signature of officer			Date			
He	re	KEVIN B. MARVEL, PHD, EXECUTIVE OFF	· ICI	ER				
		Type or print name and title		 	Date Check	PTIN		
D-1		Print/Type preparer's name Preparer's synfature			Jelistant II	D00430715		
Pai		FREDERICK LONGWOOD Firm's name TATE AND TRYON	wy		Firm's EIN	52-1855942		
	parer Only	Firm's address 2021 L STREET, NW SUITE 400			LIIII 2 EIIA	<u> </u>		
Jab	Unit	WASHINGTON, DC 20036			Phone no. (2	202) 293-2200		
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)	-			. X Yes No		
	001 10-2		ructio	ons.		Form 990 (2013)		

rai	tay Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	L
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			l
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			۱
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			١
	Schedule D, Part III .	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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		X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			l .
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	-
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	v	1
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	X
14a	· · · · · · · · · · · · · · · · · · ·	14a		
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	14b	х	
4.5	or more? If "Yes," complete Schedule F, Parts I and IV	140		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15		х
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV		<u> </u>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16	x	
4-7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	 	 -	t —
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	 -	 	<u> </u>
18		18	1	х
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>	 	†
19		19		x
00-	complete Schedule G, Part III	20a		X
∠∪8 -	Uid the organization operate one or more nospital facilities? If res, complete schedule in	20b		†

Form **990** (2013)

		_	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or 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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		i	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ŀ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			i
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			١
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			١.,
	contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١,,
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		٠,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	 	v	
	Part V, line 1	34	X	
35a	·	35a	Α.	┼
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	251	X	
. -	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	^	\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			X
	If "Yes," complete Schedule R, Part V, line 2	36	 	 ^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			X
. -	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	\vdash	 ^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O			(2013)
		LOID	・フフリ	(2013)

Len	Check if Schedule O contains a response or note to any line in this Part V					
			·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	46			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b_	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					ĺ
	filed for the calendar year ending with or within the year covered by this return	2a	24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b_	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		••	3a	X	<u> </u>
ь	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b_	X	L
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ty over, a	İ		
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	ļ	<u>X</u>
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		nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	••••	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		_5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orga	anization solicit	_		
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gifts			
_	were not tax deductible?	-		6b		
7	Organizations that may receive deductible contributions under section 170(c).		revided to the naver?	70		х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rivices p	ordined to the payor?	7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	oe rea	urad	10		
С	to file Form 8282?	as req	ulleu	7c		Х
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d	· 			
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	1	:t?	7e		X
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7 1	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file F		399 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8		L
9	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		ļ
10	Section 501(c)(7) organizations. Enter:	ı	I.			
а	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	10b		-		
11	Section 501(c)(12) organizations. Enter:	ند ا	1			
а	Gross income from members or shareholders	11a		┨		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against	 				
	amounts due or received from them.)	11b		10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		ĺ	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120	 	
а	Is the organization licensed to issue qualified health plans in more than one state?		•••	13a	 	1
	Note. See the instructions for additional information the organization must report on Schedule O.					
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	13ь	1			
_	organization is licensed to issue qualified health plans	13c		1		
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?			14a	1	X
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ile O		14b		T^{T}
	II 103, TIAS IC IIIO & FORTH 120 TO TOPOTE THOSE PARTITIONS IN 170, PROTISO AT CAPITALISM OF THE				n 990	(2013)

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

	Check if Schedule O contains a response or note to any line in this Part VI						<u>IXI</u>
<u>Sec</u>	tion A. Governing Body and Management			-			
		1	ı	r		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		19			
	If there are material differences in voting rights among members of the governing body, or if the governing				1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			1.0			
b	Enter the number of voting members included in line 1a, above, who are independent	1b		18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?				2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervisi	on			
	of officers, directors, or trustees, or key employees to a management company or other person?				_3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or				.,
	more members of the governing body?				7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockho	olders, or				17
	persons other than the governing body?			ļ	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	e following		ا ۔	.	
а	The governing body?	•		}	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			}	8ь	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached a	at the				v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code.)				
				ſ	40	Yes	No X
	Did the organization have local chapters, branches, or affiliates?		. (5)	•	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	napter	s, aπiliates,		406		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	di bafa	ra filma tha	form?	10b 11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ay belo	re illing the	IOTITI	11a		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				122	X	1
	Did the organization have a written conflict of interest policy? If "No," go to line 13	a ta aan	flioto?		12a 12b	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risk			• • •	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "I	res, u	escrib e		12c	X	
40	In Schedule O how this was done		•		13	X	
13	Did the organization have a written whistleblower policy?				14	X	ļ —
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approve	al by in	dependent	. '	• • •		·····
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		deponden	'			
_	The organization's CEO, Executive Director, or top management official				15a	X	
	Other officers or key employees of the organization			•	15b	X	
	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 arrange	ment v	vith a				
	taxable entity during the year?				16a		X _
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its p	articipation	1			
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization						
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
 _ 17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only) a	vallab	le	
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	n in Sci	hedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest i	oolicy, and	d finar	cial	
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the	organizat	ion: 🕨		
	KEVIN MARVEL AND GEORGE F. BENEDICT - 512-471-3448	3					
		009					

Form 990 (2013) Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per	(do		Pos heck	tion more	than	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVID J. HELFAND	10.00									
PRESIDENT	1 00	X	_	X	_	<u> </u>	<u> </u>	0.	0.	0.
DEBRA ELMEGREEN	1.00	١				ŀ				•
PAST PRESIDENT	5 00	X	_	X		ļ	ļ	0.	0.	0.
PAULA SZKODY	5.00					İ				•
VICE-PRESIDENT	- 5 00	Х	-	X	<u> </u>	-		0.	0.	0.
NICHOLAS B. SUNTZEFF	5.00	١.,		١,,						0
VICE-PRESIDENT	F 00	X	_	X	-			0.	0.	0.
EDWARD B. CHURCHWELL	5.00	٠,								0
VICE-PRESIDENT	1 00	X		X	<u> </u>		_	0.	0.	0.
G. FRITZ BENEDICT	1.00	ļ.,		.,				0.	0.	^
SECRETARY	1 00	X	├	Х		┝	_	ļ	0.	0.
HERVEY (PETER) STOCKMAN	1.00					l		0.	0.	0
TREASURER	1 00	X	<u> </u>	X		<u> </u>		<u> </u>	<u> </u>	0.
EDWARD E. PRATHER	1.00	J	ĺ	J			ĺ	0.	0.	0
EDUCATION OFFICER	2.00	X	-	X	H	\vdash	-		<u>-</u>	0.
ANNE P. COWLEY	2.00	X	ļ	X				0.	0.	0.
PUBLICATIONS BOARD CHAIR	1.00	^	┢	<u> </u>	<u> </u>	├	-		0.	· ·
NANCY S. BRICKHOUSE	1.00	X	l	l	l	Ì	ľ	0.	0.	0.
COUNCILOR	1.00	^	┝			┢╾		<u> </u>		0.
PATRICIA KNEZEK	1.00	X	ŀ					0.	0.	0.
COUNCILOR TODD J. HENRY	1.00	^	H	┢		╁	-	 		
COUNCILOR	1.00	X	ł	1	l	ł	l	0.	0.	0.
ROBERT MATHIEU	1.00	1	<u> </u>		-	İΤ		-		
COUNCILOR	100	x						0.	0.	0.
STEVEN D. KAWALER	1.00	 	\vdash	\vdash		H	-			
COUNCILOR	1	X	ļ]	l	l		0.	0.	0.
BRUCE BALICK	1.00	† 	<u> </u>		-	┢		† 		
COUNCILOR		x				1		0.	0.	0.
EDWARD F. GUINAN	1.00	1			.					
COUNCILOR		X			-			0.	0.	0.
BILEEN D. FRIEL	1.00	T			T		Γ			
COUNCILOR		X		L	L		L	0.	0.	0.
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Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
IOP PUBLISHING, DIRAC HOUSE, TEMPLE BACK,	SCIENTIFIC JOURNAL	
BRISTOL, AVON, UNITED KINGDOM BS1	PUBLISHER	<u>932,400.</u>
UNIVERSITY OF SASKATOON, 110 GYMNASIUM		
PLACE, SASKATOON, SASKATCHEWAN, CANADA	APJ EDITORIAL OFFICE	275,927.
NORTHWESTERN UNIVERSITY	APJ L EDITORIAL	_
1918 SHERIDAN ROAD, EVANSTON, IL 60208	OFFICE	227,226.
BOARD OF REGENTS UNIV. OF WISCONSIN MADISON	1	
OFFICE OF SPONSORED RESEARCH PROGRAMS, MAD	AJ EDITORIAL OFFICE	199,023.
PRECISION COMPUTER WORKS		
5508 GREENTREE ROAD, BETHESDA, MD 20817	MANUSCRIPT PROCESSOR	133,310.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization > 5		

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			Check if Schedule O cont	ains a response	or note to any lin				
-						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a					
اة ق		b	Membership dues	1b	931,797.				
A A		С	Fundraising events	1c				•	
<u>a</u> 5		d	Related organizations	1d				; =	
Ş.E		e	Government grants (contribut	ions) 1e	108,141.				
ᅙᇦ		f	All other contributions, gifts, gran	ts, and					
ᄚᇎ			similar amounts not included abo	ve 1f	185,938.			-	
Contributions, Gifts, Grants and Other Similar Amounts		9	Noncash contributions included in lines	1a-1f \$					
<u>8 8</u>		h	Total. Add lines 1a-1f		>	1,225,876.		-	
					Business Code				
8	2	а	JOURNALS		561300	8,317,110.	8,005,812.	311,298.	
e S		b	MEETINGS		900099	2,230,918.	2,230,918.		
en S		C							
Program Service Revenue		d							
5		е							
۱ ۵		f	All other program service reve	enue					
		9	Total. Add lines 2a-2f		•	10,548,028.			
	3		investment income (including	dividends, inter	est, and				
ŀ			other similar amounts)		>	512,057.			512,057.
	4		Income from investment of ta	x-exempt bond p	proceeds P		_		
	5		Royalties		•				
				(i) Real	(ii) Personal				
	6		Gross rents						
			Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)		•				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory	. —					
i		b	Less: cost or other basis						
			and sales expenses	45.	·				
1			Gain or (loss)	<45		.45			.45
	_		Net gain or (loss)		•	<45.	>		<45
e e	8	а	Gross income from fundraisin						
Other Revenu			including \$	of					
&			contributions reported on line	-					
ř			Part IV, line 18	a b					
გ ∣			Less: direct expenses Net income or (loss) from fund						
			Gross income from gaming a						
	9	a	Part IV, line 19	a a					
		h	Less: direct expenses	b					
			Net income or (loss) from gan	_	` 				[
			Gross sales of inventory, less	-				÷.	
	10	a	and allowances					•	
		h	Less: cost of goods sold	b					
			Net income or (loss) from sale	• •					
	_	<u> </u>	Miscellaneous Revenu		Business Code				
İ	11	а			900099	<39,289.	<39,289.	>	
	• •	b					7===	-	
		c							
		d	All other revenue						
İ		_	Total. Add lines 11a-11d	·	•	<39,289.	>	-	
	12		Total revenue. See instructions			12,246,627.	10,197,441.	311,298.	512,012
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Part X Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All other	er organizations must co	mplete column (A).	
<u> </u>	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 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	İ			
	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	179,038.	179,038.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	100 500	100 500		
	United States. See Part IV, lines 15 and 16	102,500.	102,500.		· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	602 502	249 249	344,234.	
	trustees, and key employees	693,583.	349,349.	344,234.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			İ	
7	persons described in section 4958(c)(3)(B)	1,261,624.	635,591.	626,033.	
7 2	Other salaries and wages Pension plan accruals and contributions (include	1,201,024	000,001.	020,000	
8	section 401(k) and 403(b) employer contributions)	74,996.	29,499.	45.497	
9	Other employee benefits	362,412.	248,570.	45,497. 113,842.	
10	Payroll taxes	120,491.	60,702.	59,789.	
11	Fees for services (non-employees):				
	Management				
ь	Legal				
c	Accounting	53,685.	20,767.	32,918.	<u> </u>
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)	635,206.	190,022.	445,184.	
12	Advertising and promotion	0.07	150 405	014 044	
13	Office expenses	387,339.	172,495.	214,844.	
14	Information technology	144,314.	140,478.	3,836.	
15	Royalties	100 212		100 212	
16	Occupancy	198,312. 262,267.	27,730.	198,312. 234,537.	
17	Travel	202,207.	21,130.	234,337.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	1,482,115.	1,469,311.	12,804.	
19 20	Conferences, conventions, and meetings Interest	1,102,110,	1,100,011.	12,001.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	152,350.		152,350.	
23	Insurance	32,138.		32,138.	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0).				
а	UBIT	77,625.		77,625.	
b	JOURNAL PRODUCTION	5,116,035.	5,084,338.	31,697.	
c	OTHER EXPENSES	36,863.	10,843.	26,020.	
d	BAD DEBTS	31,991.	31,066.	925.	 -
е	All other expenses	19,303.	3,755.	15,548.	
25	Total functional expenses. Add lines 1 through 24e	11,424,187.	8,756,054.	2,668,133.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if tollowing SOP 98-2 (ASC 958-720)	<u> </u>		. <u></u>	

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X End of year Beginning of year 1,122,823. 1,426,251.Cash - non-interest-bearing 301,259.439,117. 2 Savings and temporary cash investments 2 8,481. 6,885. Pledges and grants receivable, net 3 3 610,381. 792,247. Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary Assets employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 506,700. 295,379. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 975,589 10a basis. Complete Part VI of Schedule D 477,599. 236,824. 497,990. 10c 10b b Less: accumulated depreciation 17,006,124. 19,442,019. 11 Investments - publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 18,015. 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 99,446. 70,064. 15 15 Other assets. See Part IV, line 11 20,180,784. 22,699,221. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 481,988. 488,718. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 3,227,741. 2,656,962. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 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 37,076. 5,195. 25 Schedule D 3,150,875. 3,746,805. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 14,786,029. 16,496,947. 27 27 Unrestricted net assets 1,678,992. 1,890,431. 28 28 Temporarily restricted net assets 565,038. 564,888. 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 18,952,416. 17,029,909. 33 Total net assets or fund balances 22,699,221. 20,180,784. Total liabilities and net assets/fund balances

Form **990** (2013)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN ASTRONOMICAL SOCIETY

Employer identification number

		AMERICA	N ASTRONOMIC	AL SO	CIETY	_			2	1-0735	5173
Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.			
he orga	nization is not a	private foundation	because it is: (For lines 1	through 1	1, check	only one b	юх.)	_			
1	A church, co	nvention of churche	s, or association of churc	ches descr	nbed in se	ction 170	(b)(1)(A)(ī)	•			
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Scl	hedule E.)							
3	A hospital or	a cooperative hosp	ital service organization o	described i	n section	170(b)(1)	(A)(iii).				
4	A medical res	search organization	operated in conjunction	with a hos	ortal descr	ibed in se	ction 170	(b)(1)(A)(ii	ii). Enter	the hospita	l's name,
	city, and stat									•	
5	section 170	(b)(1)(A)(iv) . (Compl	•					mental uni	t describ	ed in	
6	1	_	nent or governmental unit								
7 X	• • • • • • • • • • • • • • • • • • • •	on that normally red b)(1)(A)(vi). (Comple	ceives a substantial part d ete Part II.)	of its supp	ort from a	governme	ental unit o	or from the	general	public des	onbed in
8 🗀	A community	trust described in s	section 170(b)(1)(A)(vi). (Complete	Part II.)						
9 🗀	An organizati	on that normally red	ceives: (1) more than 33 1	/3% of its	support fi	om contri	butions, m	nembershi	p fees, a	nd gross re	ceipts from
	activities rela	ted to its exempt fu	nctions · subject to certa	ın exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	s investment
	income and u	inrelated business t	axable income (less sect	ion 511 ta:	x) from bu	sinesses a	acquired b	y the orga	anızatıon	after June	30, 1975.
	See section	509(a)(2). (Complet	e Part III.)								
10 🖳	An organizati	on organized and o	perated exclusively to tes	st for publi	c safety. S	See sec tio	n 509(a)(4	I).			
11 🗀	-		perated exclusively for th								
	more publicly	supported organiz	ations described in section	on 509(a)(1) or section	on 509(a)(2	2). See sec	tion 509((a)(3). Ch	eck the box	x that
			organization and comple								
_	, a Ll Type i		• •	/pe III - Fui	_	_					Illy integrated
e L			at the organization is not								
			than one or more publicly						9(a)(1) or	section 50	9(a)(2).
f	~		tten determination from t	he IRS tha	ititisa ly	pe I, Type	II, or Type	e III			_
		rganization, check t			4	6	 معالم المعالم		2		L.
9			organization accepted an								Yes No
			directly controls, either ale	one or log	emer wim	persons c	Jeschbed i	iri (ii) anu ((III) DEIOW	11g(i)	
	•		supported organization? In described in (i) above?				••	•	•	11g(ii)	
			a person described in (i) a	or (ii) above			•			11g(iii	
	• •	· ·	a person described in (i) on about the supported or				••••			119(4
h	FIGVIDE LITE	Chowing information	about the supported of	garnzanom	(3).						
	e of supported ganization	(II) EIN	above or IRC section	(iv) is the o in col (i) lis governing (sted in your	organizat	u notify the ion in col. r support?	(vi) Is organizati (i) organiz U S	on in col zed in the		nt of monetary pport
			(see instructions))	Yes	No	Yes	No	Yes	No		
								-	 		
									ļ		
_											
					_				 		
Total								<u> </u>			_

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support					- "	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	2,059,261.	672,751.	1,326,911.	1,531,462.	1,225,876.	6,816,261.
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 3	2,059,261.	672,751.	1,326,911.	1,531,462.	1,225,876.	6,816,261.
5	The portion of total contributions	2,035,201.	0,27,011	1,320,311.		2,223,0.0.	<u> </u>
5	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						56,811.
	• • • • • • • • • • • • • • • • • • • •						
	Public support. Subtract line 5 from line 4			1			6,759,450.
	ction B. Total Support	/ \ 0000	#10040	430044	(-D-004-0	(-) 0010	6 T-4-1
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010 672,751.	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	2,059,261.	0/2,/31.	1,326,911.	1,531,462.	1,225,876.	6,816,261.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	268,333.	220 547	246 954	519,968.	512 057	1 005 750
	and income from similar sources	200,333.	330,347.	340,034.	319,900.	312,037.	1,985,759.
9	Net income from unrelated business						
	activities, whether or not the			122 605	148,188.	152 608	424,491.
	business is regularly carried on			123,695.	140,100.	132,000.	424,431.
10	Other income. Do not include gain						
	or loss from the sale of capital	200 004	140 252		_E 427	L	422 020
	assets (Explain in Part IV.)	288,994.	149,353.		<5 ,427 .		432,920.
	Total support. Add lines 7 through 10					20	9,659,431. ,530,662.
	Gross receipts from related activities,						,330,662.
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
Se	organization, check this box and stop ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2013 (column (fl)		14	69.98 %
						15	70.15 %
15	33 1/3% support test - 2013. If the			n line 13, and line :	14 is 33 1/3% or n		
100	stop here. The organization qualifies				141000 17070 011	110.0, 0.1.001. 11.10 0.1	►X
	33 1/3% support test - 2012. If the				Lline 15 is 33 1/3%	6 or more, check ti	•
٠	and stop here. The organization qual						▶ □
47.	and stop here. The organization qual 10% -facts-and-circumstances tes					and line 14 is 10%	or more
1/6							
	and if the organization meets the "faction meets the "faction meets the "faction and circumstances"					non the orga	▶ □
						17a and line 15 is	10% or
1	10% -facts-and-circumstances tes						
	more, and if the organization meets to						_ ▶ □
40	organization meets the "facts-and-cire						
<u> 18</u>	Private foundation. If the organization	on ala not check a	DOX OF THE 13, 16	a, 100, 17a, or 17t		edule A (Form 990	
					Schi	אמשום א קרטוווו פטנ	. J. 990-LL 2013

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	ow, picase com	picte i art ii.j				
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose		 		-		
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf			ļ			
5 The value of services or facilities	•					
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5		<u> </u>				
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received		·				
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year		+				-
c Add lines 7a and 7b				<u> </u>	 	
8 Public support (Subtract line 7c from line 6)		<u> </u>	<u> </u>	<u> </u>		L
Section B. Total Support		1				· · · · · · · · · · · · · · · · · · ·
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6					ļ <u></u> .	
10a Gross income from interest,			ļ			1
dividends, payments received on securities loans, rents, royalties						1
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						_
11 Net income from unrelated business				-		
activities not included in line 10b,						
whether or not the business is						
regularly carried on		<u> </u>		-		
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)				 		· <u> </u>
13 Total support. (Add lines 9, 10c, 11, and 12)			<u> </u>	<u> </u>		
14 First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here					··	. ▶∟.
Section C. Computation of Publi					" 	
15 Public support percentage for 2013 (li	ne 8, column (f) (divided by line 13,	column (f))		15	
16 Public support percentage from 2012					16	
Section D. Computation of Inves	tment Incon	<u>ne Percentage</u>				
17 Investment income percentage for 20	1 3 (line 10c, colu	ımn (f) dıvıded by lı	ne 13, column (f))	-	17	%
18 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2013. If the			on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box an						▶□
b 33 1/3% support tests - 2012. If the						and
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization						▶□
332023 09-25-13					hedule A (Form 99	90 or 990-EZ) 201

Schedule A (Form 990 or 990-EZ) 2013 AMERICAN ASTRONOMICAL SOCIETY	21-0735173 Page 4
Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o	r 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).	
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
REVENUE FROM ACTIVITIES NOT REGULARLY CARRIED ON	
REVENUE FROM ACTIVITIES NOT REGULARDI CARRIES ON	<u></u>

SCHEDULE C (Form 990 or 990-EZ)

.

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ See separate instructions.
 ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

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

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

• Section 501(c)(4) (5) or (6) organizations: Complete Part III

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

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

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

	ne of orga	inization	tions. Complete Fait in.		Emple	oyer identification number
ITALII	ne or orga		N ASTRONOMICAL S	COTEMV		21-0735173
D	rt I-A		panization is exempt und		or is a section 527 or	
1 2 3	Provide	a description of the organiz	cation's direct and indirect politic			gamzaton
Pa	rt I-B	Complete if the org	anization is exempt und	der section 501(c)		
1	Enter the	e amount of any excise tax	incurred by the organization un	der section 4955	▶\$	
2	Enter the	e amount of any excise tax	incurred by organization manag	jers under section 4955	▶ \$	
3	If the org	ganization incurred a sectio	n 4955 tax, did it file Form 4720) for this year?		Yes No
4 a	Was a c	orrection made?				Yes No
		describe in Part IV.				
سسسا	art I-C		janization is exempt und			
			d by the filing organization for se			
2	Enter th	e amount of the filing organ	ization's funds contributed to o	ther organizations for s	ection 527	
	exempt	function activities			. ▶\$	
3	Total ex	empt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		
	line 17b ►\$					
4	4 Did the filing organization file Form 1120-POL for this year?					
5	made pa	ayments. For each organiza	nployer identification number (E ition listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	nd from the filing organi a separate political org	zation's funds. Also enter th janization, such as a separa	e amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
_						
						<u> </u>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

332041 11-08-13

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Schedule C (Form 990 or 990-EZ) 2013 A	MERICAN AS	TRONOMICAL	SOCIETY	21-0	735173 Page 2
Part II-A Complete if the orga	anization is exe	npt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under sect	ion 501(h)).				
	=	* · ·	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share					
B Check ► If the filing organizati	on checked box A ar	nd "limited control" pre	ovisions apply.		
	on Lobbying Expertures" means amou	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influe	ence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditures					
 Total exempt purpose expenditures 	(add lines 1c and 1c	d) .			
f Lobbying nontaxable amount. Enter	the amount from the	e following table in bot	h columns.	,	
If the amount on line 1e, column (a) or		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50		00 plus 10% of the exc	- 1		
Over \$1,500,000 but not over \$17,0		00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero	or less, enter -0-	••			
j If there is an amount other than zero	o on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y	ear?				Yes No
, ,	tions that made a s umns below. See th	e instructions for line	n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots celling amount	······································				
(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2013

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(1	b)
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter			-	
or referendum, through the use of:				
a Volunteers?	X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
Media advertisements?		X		
d Mailings to members, legislators, or the public?	X			645.
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		38	3,944.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?	<u> </u>	X		
j Total. Add lines 1c through 1i			3.9	9,589.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion 501(c)	(5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		. 3		
Part III-B Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or se	ction	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	ed "No," O	R (b) Pari	t III-A, liı	ne 3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members .		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	litical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total .		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an	d political			
expenditure next year?		. 4		
5 Taxable amount of lobbying and political expenditures (see instructions)		. 5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	oup list); Part I	I·A, line 2; a	nd Part II-E	3, line 1.
Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
THE AAS ENGAGES IN LIMITED LOBBYING ACTIVITY, THE LA	ARGEST			
EVENT BEING ONE DAY OF CONGRESSIONAL OFFICE VISITS I	BY AAS I	MEMBER	S IN I	DC
THAT OCCURS IN THE SPRING, IN WHICH AAS MEMEBERS VI	SIT THE	OFFIC	ES OF	
THEIR SENATE AND HOUSE MEMBERS AND ADVOCATE FOR SCI	ENCE FU	NDING.	AAS	
ALSO FACILITATES MEMBER VISITS TO THEIR LOCAL CONGRI	ESSIONA	L OFFI	CES I	<u> </u>
	Schedu	ıle C (Form	990 or 99	0-EZ) 2013

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN ASTRONOMICAL SOCIETY

Employer identification number 21-0735173

Pai	t Organizations Maintaining Donor Advised		ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor ad	vised funds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ad	-	be used only
	for charitable purposes and not for the benefit of the donor or	• •	-
	impermissible private benefit?	,	Yes No
Pa		anization answered "Yes" to Form 990	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed		nistorically important land area
	Protection of natural habitat	· —	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the for	m of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	fter 8/17/06, and not on a historic stru	cture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	_
5	Does the organization have a written policy regarding the pend	odic monitoring, inspection, handling o	vf
	violations, and enforcement of the conservation easements it	holds?	. L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 1	
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describe	es the organization's accounting for
	conservation easements.		
Pa	T III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhi		rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
Ь	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of i	bublic service, provide the following amounts
	relating to these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1	• •	5 ————
	(ii) Assets included in Form 990, Part X		* *
2	If the organization received or held works of art, historical trea		ciai gain, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	•
a	Revenues included in Form 990, Part VIII, line 1	•	
b	Assets included in Form 990, Part X		• •

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

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

Part VIII Investments - Other Securities.	I KONONI CILL	0001111		tres - rago
Complete if the organization answered "Yes" t	o Form 990. Part IV.	ine 11b. See Form 990. F	Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value		aluation: Cost or end-	of year market value
(1) Financial derivatives	· · · · · · · · · · · · · · · · · · ·			
(2) Closely-held equity interests				
(3) Other		-		
(A)				
(B)				
(C)	_			
(D)				
(E)				
(F)			-	
(G)				-
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" t	to Form 990, Part IV,	line 11c. See Form 990, F	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13) ▶				
Part IX Other Assets.				
Complete if the organization answered "Yes"		line 11d. See Form 990, F	Part X, line 15.	
(a) [Description			(b) Book value
(1)	<u>.</u>	<u> </u>		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)		······································		
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u> 15)</u>	 		
Part X Other Liabilities.	. 5 000 5 4114		000 Day V line 05	
Complete if the organization answered "Yes"	to Form 990, Part IV,	(b) Book value	1 990, Part X, line 25.	
1. (a) Description of liability		(b) book value		
(1) Federal income taxes		6,946.		
(2) ACCRUED RENT		30,130.		
(3) 457 PLAN		30,130.		
(5)				
(6)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII **Schedule D (Form 990) 2013**

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37,076.

Schedule D (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIA	ETY	21-0735173 Page 4				
Part XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per F	Return.				
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.						
1 Total revenue, gains, and other support per audited financial statements		1 13,346,694.				
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
a Net unrealized gains on investments	2a 1,332,052.	<u>.</u>				
b Donated services and use of facilities	2b	1				
c Recoveries of prior year grants	2c	<u> </u>				
d Other (Describe in Part XIII.)	2d <231,985.					
e Add lines 2a through 2d		2e 1,100,067.				
3 Subtract line 2e from line 1		3 12,246,627.				
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1					
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	4 1				
b Other (Describe in Part XIII)	4b	-				
c Add lines 4a and 4b		4c 0.				
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 12,246,627.				
Part XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	Return.				
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		1 1 10 1 10 7				
Total expenses and losses per audited financial statements	-	1 11,424,187.				
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1					
a Donated services and use of facilities	2a	4				
b Prior year adjustments	2b	1				
c Other losses	2c	4				
d Other (Describe in Part XIII.)	2d	4 _				
e Add lines 2a through 2d		2e 0.				
3 Subtract line 2e from line 1		3 11,424,187.				
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1					
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1				
b Other (Describe in Part XIII.)	4b	4 1				
c Add lines 4a and 4b		4c 0.				
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 11,424,187.				
Part XIII Supplemental Information.						
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b and 2b; Part V, line	4; Part X, line 2; Part XI,				
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional information.					
DADM II TAID A.						
PART V, LINE 4:						
MUE COOLDMY OF ACCIDING AC DEDMANDINGLY DECEDIONED NEW ACCEDS						
THE SOCIETY CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS						
(A) THE OPICINAL VALUE OF CIETS DONATED TO THE PERMANENT ENDOWMENT. (B)						
(A) THE ORIGINAL VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT, (B)						
THE OPICINAL VALUE OF SURSPOURNT CIETS TO THE DERMANENT ENDOWMENT. AND (C)						
THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (C)						
ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE						
ACCOMODATIONS TO THE PERMANENT ENDOWMENT PLAD	E IN ACCORDANCE	WIIII IIID				
DIRECTION OF THE APPLICABLE DONOR GIFT INSTR	ווא אר אר אוו מאוו	ие тне				
DIRECTION OF THE ATTEICABLE BONON CITT INCIN	0112111 111 1112 111	11111				
ACCUMULATION IS ADDED TO THE FUND.						
ACCUMULATION IS ADDED TO THE FUND.						
PART X, LINE 2:						
THE SOCIETY BELIEVES THAT IT HAS APPROPRIATE	SUPPORT FOR ANY	<u>Y</u>				
INCOME TAX POSITIONS TAKEN, AS SUCH, DOES NO	T HAVE ANY UNCE	RTAIN INCOME				
TAX POSITIONS THAT ARE MATERIAL TO THE FINAN	CIAL STATEMENTS					
332054 09-25-13 2.8		Schedule D (Form 990) 2013				
/X						

Schedule D (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY	21-0735173 Page 5
Part XIII Supplemental Information (continued)	
THE DECEMBER 31, 2010 THROUGH 2013 TAX YEARS ARE OPEN FOR	EXAMINATION BY
TAXING AUTHORITIES.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
EQUITY IN LOSS OF ACI	-231,985.
	-
	· · · · · · · · · · · · · · · · · · ·
	
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization

Employer identification number

AMERICAN ASTRON	OMICAL S	OCIETY		21-07351	73
			tside the United States. Comple	· · · · · · · · · · · · · · · · · · ·	
Form 990, Part I	V, line 14b.				
1 For grantmakers. Does	s the organization	n maintain recor	ds to substantiate the amount of its gra	nts and other assistance,	
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	grants or assistance?	Yes X No
2 For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and other assistance out	tside the
3 Activities per Region. (T	he following Part	I, line 3 table c	an be duplicated if additional space is n	eeded.)	т
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
			GRANTS/PRIZES TO RECIPIENTS		
SOUTH AMERICA			IN REGION		12,500.
	†				
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS/PRIZES TO RECIPIENTS IN REGION		80,000.
ICELAND & GREENDAND)		<u> </u>	IN ABOTON		
NORTH AMERICA		o	GRANTS/PRIZES TO RECIPIENTS IN REGION		10,000.
	1				
	·			· · · · · · · · · · · · · · · · · · ·	
	-				
	_				
		1	<u> </u>		
3 a Sub-total		0			102,500
b Total from continuation		<u> </u>		·	
sheets to Part I		0			0
c Totals (add lines 3a				İ	
and 3b)		0			102,500.

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

Schedule F (Form 990) 2013

Page 2

Schedule F (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

AMERICAN ASTRONOMICAL SOCIETY

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
:								
	recipient organization the grantee or counse	ns listed above that are related has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax∙e)	empt by		
Enter total number of	Enter total number of other organizations or entities	or entities				•	:	

Schedule F (Form 990) 2013

21-0735173

Page 3

AMERICAN ASTRONOMICAL SOCIETY

Schedule F (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY 21–0735173

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GRANTS	SOUTH AMERICA	1	10,000,WIRE	WIRE	0.		
GRANTS	EUROPE (INCLUDING ICELAND & GREENLAND)	'n	. 65, 500	WIRE	0		
	NORTH AMERICA	1	10,000.CHECK	CHECK	0.		
TO FOREIGN INDIVIDUALS ROSSI) AND RESEARCH		0	24,500.		0		
RIZE	SOUTH AMERICA	٥	2,500.		.0		
					-		
						Schedu	Schedule F (Form 990) 2013

332073 10-03-13

Schedule F (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY

Part	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, Return by a U.S. Transferor of Property to a Foreign	
	Corporation (see Instructions for Form 926)	Yes X No
	······································	
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, Annual Return to Report Transactions with Foreign Trusts and	
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With	
	a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"	
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To	
	Certain Foreign Corporations. (see Instructions for Form 5471)	Yes X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a	
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,	
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund.	
	(see Instructions for Form 8621)	Yes X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"	
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain	
	Foreign Partnerships. (see Instructions for Form 8865)	Yes X No
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)	Yes X No

Schedule F (Form 990) 2013

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047	2013	Open to Public	Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Vame of the organization AMERICAN	AMERICAN ASTRONOMICAL	CAL SOCIETY					21-0735173
Part i General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	to substantiate the stance?	e amount of the grants	s or assistance, the	e grantees' eligibilit)	y for the grants or ass	sistance, and the select	on X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for mont	toring the use of grant	funds in the Unite	d States.			
Part # Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	e United States. C	Complete if the orga	anization answered "\	res* to Form 990, Part	V, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II car	be duplicated if addit	lonal space is need	ded.	A Mathed of		
1 (a) Name and address of organization or government	(P) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	rganizations listed in the	he line 1 table				•
	is listed in the line	1 table					A
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2013)

AMERICAN ASTRONOMICAL SOCIETY Schedule I (Form 990) (2013)
Part III Grants and Other

Page 2

21-0735173

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PRIZES	20	31,500.	0		
INTERNATIONAL TRAVEL GRANTS	46	72,568.	0		
HILDCARE GRANTS	<u>.</u> О	2,350.	0		
STUDENT TRAVEL GRANTS	24	11,620.	•0		
SALVANITATION OF SALVANICATION OF SALVAN	•	000	c		
A. A. B. Strate and the second of the second		cariloo III too C	conformation for the contraction of the contraction	Introduction of the second of	

PART I,

LINE

THERE IS ONE MAIN TYPE OF GRANT: THE INTERNATIONAL TRAVEL

THE RECIPIENTS FILE A FINAL REPORT ON ONCE THE TRAVEL IS COMPLETE, GRANT.

X INCLUDING ALL DOCUMENTATION OF EXPENSES. THE USE OF THE FUNDSNDS, COLLECT ACKNOWLEDGEMENTS AND ALL ORIGINAL RECEIPTS FOR THE GRANT EXPENSES.

TO ATTEND MEETINGS; ALL RECEIPTS ARE THE AAS PROVIDES STUDENT TRAVEL GRANTS

년 SUPPLIED. WE ALSO PROVIDE SMALL CHILDCARE GRANTS TO ENABLE MEMBERS

ATTEND THE MEETING.

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

AMERICAN ASTRONOMICAL SOCIETY

Employer identification number 21–0735173

Part I **Questions Regarding Compensation** No Yes 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 indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Written employment contract X Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations 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: a Receive a severance payment or change-of-control payment? X 4h b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations 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: X 5a a The organization? X 5b **b** Any related organization? 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: X 6a a The organization? X 6b b Any related organization? 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 Х 7 not described in lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X 8 Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY 21-0735173

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported 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, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(l)·(B)	reported as deferred in prior Form 990
KEVIN B. MARVEL	Θ	299,285.	0	9,965.	25,500.	12,673.	347,423.	0
EXECUTIVE OFFICER	: 🗉	0	0	0		0	0	0.
KELLY E. CLARK	Θ	140,886.	7,75	0.	14,47	7,64	170,760.	0
CHIEF FINANCIAL OFFICER	(II)	• 0		• 0			0	0
JOEL PARRIOTT	Θ	169,028.	• 0	0.	1,75	4,615.	175,400.	
DIRECTOR OF PUBLIC POLICY	Ξ	• 0	• 0	• 0	• 0	• 0	0	
	()							
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Schedule J (Form 990) 2013

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

► Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Inspection

Employer identification number Name of the organization 21-0735173 AMERICAN ASTRONOMICAL SOCIETY FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: 7,000) ALSO INCLUDES PHYSICISTS, MATHEMATICIANS, GEOLOGISTS, ENGINEERS AND OTHERS WHOSE RESEARCH INTERESTS LIE WITHIN THE BROAD SPECTRUM OF SUBJECTS NOW COMPRISING CONTEMPORARY ASTRONOMY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: **MEMBERSHIP SERVICES:** MAINTAIN MEMBERSHIP RECORDS AND PUBLISH NEWSLETTERS, DIRECTORIES AND AN ANNUAL CALENDAR. REVENUE \$ 953,448. EXPENSES \$ 262,359. INCLUDING GRANTS OF \$ 0. EDUCATION AND OUTREACH: THE SOCIETY PROMOTES BROAD INTEREST IN ASTRONOMY, WHICH ENHANCES SCIENCE LITERACY AND LEADS MANY TO CAREERS IN SCIENCE AND ENGINEERING. EXPENSES \$ 85,687. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. PUBLIC POLICY AND LOBBYING: THE SOCIETY ALSO WORKS WITH OTHER SCIENTIFIC AND EDUCATIONAL SOCIETIES TO PROMOTE THE ADVANCEMENT OF SCIENCE. **REVENUE \$ 1,810.** INCLUDING GRANTS OF \$ 0. **EXPENSES \$ 260,120.** FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTEE, INCLUDING THE TREASURER, REVIEWS AND THE 990 IS ALSO DISTRIBUTED TO THE ENTIRE APPROVES THE 990 TO SUBMISSION. COUNCIL AND PLACED ON THE AAS WEBSITE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization Employer identification number AMERICAN ASTRONOMICAL SOCIETY 21-0735173 FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION PASSED A CONFLICT OF INTEREST POLICY IN 2010. AS A RESULT OF THIS POLICY, THE ORGANIZATION MONITORS THE CONFLICT OF INTEREST POLICY THROUGH THE USE OF A CONFLICT QUESTIONNAIRE TO BE FILLED OUT ON AN ANNUAL BASIS BY AAS COUNCIL AND STAFF. FORM 990, PART VI, SECTION B, LINE 15: THE EXCECUTIVE OFFICER HAS AN ANNUAL REVIEW WITH THE EXECUTIVE COMMITTEE. BOTH THE EXECUTIVE COMMITTEE AND THE EXECUTIVE OFFICER PREPARE WRITTEN MEMORANDUMS ON THE ANNUAL PERFORMANCE. THE EXECUTIVE COMMITTEE REVEIWS COMPENSATION REPORTS AND RECOMMENDS A SALARY INCREASE TO THE BOARD, WHICH THEY APPROVE. NON-SUPERVISORY EMPLOYEES ARE REVIEWED BY THEIR DIRECT MANAGER. THERE IS A WRITTEN PERFORMANCE REVIEW THAT IS PREPARED BY THE MANAGER AND SIGNED BY THE EMPLOYEE. SUPERVISORY EMPLOYEES ARE REVIEWED BY THE EXECUTIVE OFFICER AFTER ALL OTHER NON-SUPERVISORY EVALUATIONS ARE COMPLETED. THEY MEET AND DISCUSS THE PERFORMANCE OF THE SUPERVISORS AND HIS/HER SUBORDINATE'S PERFORMANCE. BOTH THE EXECUTIVE OFFICER AND THE SUPERVISORY EMPLOYEE PREPARE WRITTEN PERFORMANCE REVIEWS, WHICH ARE SIGNED BY THE EMPLOYEE AND EXECUTIVE OFFICER. THE EXECUTIVE OFFICER THEN ASSESSES THE PERFORMANCE OF THE EMPLOYEES AND

REVIEWS COMPENSATION DATA FROM OUR DEMOGRAPHIC AREA AND AWARDS INCREASES

BASED ON THE INDIVIDUAL ASSESSMENTS.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Part

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

► See separate instructions.

Open to Public Inspection

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 21-0735173

Direct controlling End-of-year assets Total income ত্র Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) AMERICAN ASTRONOMICAL SOCIETY Primary activity Name, address, and EIN (if applicable) of disregarded entity Name of the organization

(g) Section 512(b)(13) Schedule R (Form 990) 2013 ž controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) **9 Exempt Code** section ত্র Legal domicile (state or foreign country) Primary activity For Paperwork Reduction Act Notice, see the instructions for Form 990. Name, address, and EIN of related organization

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

Part II

21-0735173

Page 2

AMERICAN ASTRONOMICAL SOCIETY Schedule R (Form 990) 2013

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

Direct controlling Predominant income Share of total Share of tota	1 P			5	3	٤	3	14	6	6	3
Direct controlling Predominant income entity (righted, unrelated, reducing from the sections 512-514) Sections 512-514 Predominant income end-of-year allocations? (righted from the sections 512-514) Sections 512-514 Predominant income end-of-year allocations? Nos Ryt (Form 1065) Predominant income end-of-year allocations? Pres No Ryt (Form 1065)	<u>e</u>	_	<u></u>	<u>6</u>	(e)	E	6	Ē	E	3	È
Sections 512-514) Yes No Ki (Form 1065)	Primary activity		Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from fax under	Share of total income	Share of end-of-year	Disproportionate allocations?	amount in box	General or managing partner?	Percentage ownership
	nos	8	nty)		sections 512-514)		212222		K-1 (Form 1065)	Yes No	
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										_	_
	-										
								<u> </u>			

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

organizations treated as a corporation or trust during the tax year.	uring the tax year.								
(e)	(q)	(2)	Ō	(9)	€	(6)	ε	8	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Type of entity (C corp, S corp,	Sha	Share of end-of-year	ይል	Section 512(b)(13) controlled entity?	133 133 133
		country)		or trust)		assers		Yes	<u>و</u>
ASTRONOMYCOM, INC 46-2405753	PROVIDE SPEAKER		AMERICAN						
2000 PLORIDA AVE., NW	PRESENTATION SYSTEM &		ASTRONOMICAL						
WASHINGTON, DC 20009	ON-SITE MEETING	DE	SOCIETY	c corp	1.	1.	1. 100.00% X	×	
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SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2013

332162 09-12-13

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	elated organizations listed	in Parts II-IV?	-11"
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity				
b Gift, grant, or capital contribution to related organization(s)				4 X
c Gift, grant, or capital contribution from related organization(s)				1c ×
d Loans or loan guarantees to or for related organization(s)				Y X
e Loans or loan guarantees by related organization(s)				1e X
f Dividends from related organization(s)				14 ×
g Sale of assets to related organization(s)				
h Purchase of assets from related organization(s)				
i Exchange of assets with related organization(s)				
j Lease of facilities, equipment, or other assets to related organization(s)				Y it
k Lease of facilities, equipment, or other assets from related organization(s)				1k X
	anization(s)			= X
m Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			T X
n Sharng of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			-t
 Sharing of paid employees with related organization(s) 				10 X
				×
p Reimbursement paid to related organization(s) for expenses				×
q Reimbursement paid by related organization(s) for expenses .				61
r Other transfer of cash or property to related organization(s)				×
s Other transfer of cash or properly from related organization(s)	•			1s X
for infor	vho must complete t	his line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds.	:
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved
ONT MODAMONOGES &	Ω	250.000.	250.000.BOOK VALUE	
1	4			
(2)				
(3)				
(4)				
(9)	4 5		•	2,00
332163 09-12-13	C#		Schedule	Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 AMERICAN ASTRONOMICAL SOCIETY

Part Vi Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) (b) (c) (d)	(q)	(0)	(0)	(e)	3	(6)	ε	6	5	(K)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income part (related, unrelated, 50	9 partners sec 501(c)(3) orgs?	Share of total	Share of end-of-year	Dispropor- tionate allocations'	Depropor Code V-UBI General or Percentage floating amount in box 20 managing ownership alloadions?	General managin partner	Percentage 9 ownership
	:	country)	under section 512-514) Ye	Yes No	ıncome	assets	Yes	(Form 1065)	Yes No	
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					:			Schedule	R For	Schedule R (Form 990) 2013
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332164 09-12-13

Form 88	68 (Rev. 1-2014)					Page 2	
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension.	complete only Part II and check thi	s box	•	X	
	nly complete Part II if you have already been granted an					سب	
	are filing for an Automatic 3-Month Extension, comple						
Part				nal (no cop	es needed).		
					iumber, seë inst	nuctions	
Type or	Name of exempt organization or other filer, see Instru	ctions			entification numb		
print	Traine of exempt organization of other may, see motion	0110113.		Linployoride	sittino atlori riginio	Or (C114) Or	
File by the	AMERICAN ASTRONOMICAL SOCIE	TΥ) 2	1-073517	3	
qne qaje (r			tions		ity number (SSN)		
filing your return See	DOOD ELOBIDA AMENDIE NIM		itoris.	Cociai socoi	ity floriloer (GGN)		
instructions		oreign edo	frees see instructions				
	WASHINGTON, DC 20009	oreign auc	mess, see instructions.				
							
F-4 4b	District and firstly waters to a till a series of first (fit)		4			01	
Enter the	e Return code for the return that this application is for (file	e a separa	ite application for each return)	•••••	•••••••••••••••••••••••	VII	
Applicat	rion	Return	Application			Return	
Is For	1001	Code	Is For				
	0 or Form 990-EZ	01	TO THE CONTRACT OF THE CONTRAC	+ 38 *(- 202 -	~~**********	Code	
Form 99		02	Form 1041-A	**** (382 - **** 22	****************		
	20 (individual)	03	Form 4720 (other than individual)			<u>08</u>	
		03	Form 5227			10	
Form 990·T (sec. 401(a) or 408(a) trust) 05 Form 6069 11							
Form 990·T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990·T (trust other than above) 06 Form 8870 12							
Form 990-T (trust other than above) 06 Form 8870 12 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.							
SIOPIL			ORGE F. BENEDICT -			VF.	
A T L - L	cooks are in the care of NW SUITE 400 -			2000 1	HORIDA A	V L	
	hone No. ► 512-471-3448	WAOII	Fax No. ▶				
	•	n in tha life				\Box	
	organization does not have an office or place of business is for a Group Return, enter the organization's four digit					Land Sook thin	
	. If it is for part of the group, check this box	7	ich a list with the names and EINs o				
box ▶			BER 15, 2014.	r all members	(He extension is	101.	
	r calendar year 2013, or other tax year beginning						
				Final retu		 ·	
6 Ift	he tax year entered in line 5 is for less than 12 months, o	neck reas	on: miliai return	Filial fetu	111		
- CA	Change in accounting period						
7 St	ate in detail why you need the extension HE INFORMATION NECESSARY TO 1	PTT.F	A COMPLETE AND ACC	ש שתעמון	ETIDN HA	<u> </u>	
	OT YET BEEN OBTAINED.	LIUD A	A COM BELL MAD MCC	ORTILL I	CBIOICI IIA		
14.	SI TEI DEEN OBIAINED:		······································				
0 - 164			and the tentative tay less one				
	his application is for Forms 990-BL, 990-PF, 990-T, 4720,	, or ouds,	enter the tentative tax, less any	8a \$			
	nrefundable credits. See instructions.						
	his application is for Forms 990-PF, 990-T, 4720, or 6069						
	c payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid				
-	eviously with Form 8868.		the Above of the second by the second	8b \$	·		
	lance due. Subtract line 8b from line 8a. Include your pa	-	in this form, if required, by using	م ا ء ا			
<u> </u>	TPS (Electronic Federal Tax Payment System). See instru		st be completed for Part II o	8c \$			
Hadas ass					ı knowladas and ha	liaf	
	nalties of perjury, I dectare that I have examined this form, includ correct, and complete and that I am authorized to prepare this fo		oanying schoolies and statements, and t		KITOWIEUUJE DIIO DE	uoi,	
<u>Signature</u>	Title >	<u>CPA</u>		<u>Date</u> ►	איטן דייןט		
					Form 8868 (Rev	v. 1-2014)	