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# Form 990

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2014

Open to Public Inspection

		C Name of organization	g 01-01-2014 , and ending 12-31-2	.014	D Emplo	vor ido	ntification number			
	eck if applical Tress change	SOCIETY FOR SCIENCE & THE PUBL	IC		·	•				
_	ne change	Doing burners			53-01	19648	5			
	ial return	Doing business as								
Fin		Number and street (or P O box if m	nail is not delivered to street address) Room	n/suite	E Telepho	E Telephone number				
	urn/terminate	d 1719 N STREET NW			(202)	785-2	2255			
┌ Am	ended return		ntry, and ZIP or foreign postal code							
┌ App	olication pend	WASHINGTON, DC 20036 ing			<b>G</b> Gross r	eceipts	\$ 26,545,238			
		<b>F</b> Name and address of prir	ncipal officer	H(a)	Is this a group	return	for			
		MAYA AJMERA	·	11(4)	subordinates?		┌ Yes ┌ No			
		1719 N STREET NW WASHINGTON, DC 20036		11/63						
		, ,		H(B)	Are all subordi included?	nates	Γ Y es Γ No			
<b>I</b> Ta	x-exempt sta	tus 🔽 501(c)(3)	insert no )		If "No," attach	a list	(see instructions)			
J W	ebsite: ►	WWW SOCIETYFORSCIENCE ORG	<u> </u>	H(c)	Group exempt	ion nu	mber 🕨			
<u></u>		tion 🔽 Corporation 🗆 Trust 🗀 Associatio		1, ' '						
		ion   Corporation   Trust   Association	n   Other <b>F</b>	L Yes	ar of formation 19	921 <b>M</b>	State of legal domicile DE			
Га		<b>.</b>								
		y describe the organization's mission ROMOTE PUBLIC UNDERSTANDI								
9										
Governance										
Ĕ.	3 Chan									
<u> </u>	Z Chec	k this box 🖣 II the organization di	scontinued its operations or dispose	ed of more	LIIAII 25% OI ILS	песаѕ	ssets			
ූල නේ	3 Numb	per of voting members of the govern	ing body (Part VI, line 1a)			з	14			
80			of the governing body (Part VI, line			4	14			
Activities &	<b>5</b> Total	number of individuals employed in	calendar year 2014 (Part V, line 2a	)		5	79			
ទ្ធ	<b>6</b> Total	number of volunteers (estimate if n	ecessary)			6	1,500			
_	<b>7a</b> Total	unrelated business revenue from P	art VIII, column (C), line 12			7a	286,315			
	<b>b</b> Net u	nrelated business taxable income f	rom Form 990-T, line 34			7b	-40,420			
					Prior Year		Current Year			
а.	<b>8</b> Co	ntrıbutıons and grants (Part VIII, lı	ne 1 h)		3,729,	689	8,021,259			
Revenue	<b>9</b> Pro	gram service revenue (Part VIII, li	ne 2g)	·	5,701,	634	5,413,438			
3			(A), lines 3, 4, and 7d)	•	652,		1,144,663			
	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line				248,	457	211,454			
		airevenue—add iines 8 through 11 )		line	10,331,	931	14,790,814			
			IX, column (A), lines 1-3)		3,216,	001	3,152,434			
	<b>14</b> Be	nefits paid to or for members (Part I	X, column (A), line 4)			0	0			
			ee benefits (Part IX, column (A), line	es	6,524,	240	6,937,020			
Expenses		10)			- / /-					
Ē		fessional fundraising fees (Part IX,	·		0	0				
五	<b>b</b> Tota	al fundraising expenses (Part IX, column (D	), line 25) •-240,363							
	<b>17</b> Ot	ner expenses (Part IX, column (A),		9,852,578		10,929,220				
			st equal Part IX, column (A), line 25		19,592,		21,018,674			
	<b>19</b> Re	venue less expenses Subtract line		-9,260,		-6,227,860				
\$ € 500				Beg	inning of Curre Year	nt	<b>End of Year</b>			
0 G	<b>20</b> To	cal assets (Part X, line 16)		84,374,	697	77,028,950				
Not Assets or Fund Balances					8,395,	-	8,254,050			
žĒ	<b>22</b> Ne	t assets or fund balances Subtract	line 21 from line 20		75,979,	569	68,774,900			
Pai	t III Si	gnature Block		<u> </u>		•				
my kı	nowledge a		amined this return, including accomposed in the manner of preparer (other accomposed in the manner of preparer (other accomposed in the manner of preparer (other accomposed in the manner of preparer of the manner							
	lk .	****			2015-05-06					
Sign	<del> </del>	signature of officer			Date					
Here	_ l.	1AYA AJMERA CHIEF EXECUTIVE OFFICER 8	R PRESIDENT							
		ype or print name and title								
		Print/Type preparer's name DOUGLAS BOEDEKER	Preparer's signature DOUGLAS BOEDEKER	Date	Check I if	PTIN P0036	6180			
Paid	t	Firm's name  TATE & TRYON	5 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		self-employed Firm's EIN > 5					
	parer		TTF 400							
Use	Only	Firm's address ► 2021 L STREET NW SU			Phone no (202	.) 293-2	200			
		WASHINGTON, DC 20	036		1					

✓ Yes No

Forn	1990 (201	4)				Page 2
Par		atement of Program eck if Schedule O contains			III	
1	Briefly de	scribe the organization's r	nission			
	MOTING T ANCEMEN		ND APPRECIATION (	OF SCIENCE AND TH	E VITAL ROLE IT PLAYS ON	I HUMAN
_						
2		ganızatıon undertake any : Form 990 or 990-EZ? .			r which were not listed on	
	If"Yes," o	describe these new service	es on Schedule O			
3	services?	ganızatıon cease conductı		t changes in how it co	nducts, any program	. ドYes 「No
	If "Yes," o	describe these changes on	Schedule O			
4	expenses		01(c)(4) organizations	are required to repor	ree largest program services, t the amount of grants and allo	
4a	(Code	) (Expenses	\$ 12,197,919	including grants of \$	2,999,434 ) (Revenue \$	779,178 )
	SCIENTIFI INDEPEND NEXT GENI OFFERED I	C INGENUITY THRIVES SSP IS P ENT RESEARCH AND INQUIRY-B ERATION CONFRONTS ITS CHALL	PROUD TO SUPPORT THE W MASED LEARNING SSP OFFI LENGES WITH THE CURIOS NLENT SEARCH, THE INTEL	/ORLD'S TOP YOUNG SCIEN ERS OUR COMPETITIVE, ED SITY, THE TOOLS AND THE ( INTERNATIONAL SCIENCE /	SCIENTISTS IS CRITICALLY IMPORT ITIFIC MINDS THROUGH ANNUAL CO UCATIONAL PROGRAMS TO ASPIRIN CAPACITY TO BUILD A BETTER WORL AND ENGINEERING FAIR AND THE BR MENT IN LIFE	MPETITIONS THAT ENCOURAGE 3 SCIENTISTS - TO ENSURE OUR D SCIENCE COMPETITIONS
4b	(Code	) (Expenses	5 \$ 6,832,733	ıncludıng grants of \$	) (Revenue \$	4,634,260 )
	INALL FIEL	DS OF SCIENCE IT PUBLISHES (	CONCISE, ACCURATE, TIMI	ELY ARTICLESTHAT APPEAL	WS MAGAZINE COVERS IMPORTANT TO BOTH GENERAL READERS AND SO ISITORS TO OUR WEBSITE WWW SCI	CIENTISTS, REACHING OVER
	(Code	) (Expenses	s \$ 686,859	including grants of \$	153,000 ) (Revenue \$	)
		H - THROUGH THE SSP FELLOWS /E UNDER-RESOURCED STUDEN	PROGRAM, SSP IS PROVII		G TO SELECTED UNITED STATES SCIE TS TO PERFORM HIGH-QUALITY INDI	
4d	Other pr	ogram services (Describe	ın Schedule O )			
	(Expense	-	including grants o	f \$	) (Revenue \$	)

19,717,511

4e

Total program service expenses ►

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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 $IV^{\square}$	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νo
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$ ?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	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 725			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	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 the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	II.	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
0~	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	even	ue Cod	e.)
		requi	ired by the Internal R		ue Cod Yes	e.) <b>No</b>
10a	Did the organization have local chapters, branches, or affiliates?			10a		
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization.	 tıvıtıe: on's e	s of such chapters, xempt purposes?			No
10a b	Did the organization have local chapters, branches, or affiliates?	 tıvıtıe: on's e	s of such chapters, xempt purposes?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of its	tivitie: on's e ts gov	s of such chapters, xempt purposes? erning body before filing	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	tivitie on's e ts gov  Form 9	s of such chapters, xempt purposes? erning body before filing	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov  Form 9	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov  Form 9 	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov . Form 9 . ly inte . i the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov  form 9  ly inte  the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov  form 9  ly inte the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov  form 9  ly inte  the p  the p  lew an	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov  form 9  ly inte  the p  the p  lew an	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov  form 9  ly inte  the p  the p  lew an	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov  form 9  ly inte the p  tiew an e deli	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AL , AK , AR , AZ , CA , CO , CT , DC , FL , GA , IL , KS , KY ,  $\mathsf{LA}$  ,  $\mathsf{MA}$  ,  $\mathsf{MD}$  ,  $\mathsf{ME}$  ,  $\mathsf{MI}$  ,  $\mathsf{MN}$  ,  $\mathsf{MO}$  ,  $\mathsf{MS}$  ,  $\mathsf{NC}$  ,  $\mathsf{ND}$  ,  $\mathsf{NH}$  ,  $\mathsf{NJ}$  ,  $\mathsf{NM}$  ,  $\mathsf{NY}$  ,  $\mathsf{OH}$  ,  $\mathsf{OK}$  ,  $\mathsf{OR}$  ,  $\mathsf{PA}$  ,  $\mathsf{RI}$  ,  $\mathsf{SC}$  ,  $\mathsf{TN}$  ,  $\mathsf{UT}$  ,  $\mathsf{VA}$  ,  $\mathsf{WA}$  , WI, WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records ►CHARLES FEENEY 1719 N STREET NW

Form 990 (2014)	
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# 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 **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	ndividual trans	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	1,523,603	0	277,391

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►12

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

#### Section B. Independent Contractors

1 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) Name and business address	(B) Description of services	(C) Compensation
QUADGRAPHICS N61 W23044 HARRYS WAY SUSSEX, WI 53089	PRINTING	746,074
NAHAN PRINTING PO BOX 697 ST CLOUD, MN 56302	PRINTING	517,974
INTERACTIVE MEDIA 124 NORTH FIRST STREET LOUISVILLE, KY 40202	PRODUCTION SERVICES	361,289
3 PILLAR GLOBAL 3975 FAIR RIDGE DRIVE STE 200S FAIRFAX, VA 22033	IT CONSULTING	295,138
JOBSPRING PARTNERS 131 CLARENDON STREET 3RD FLOOR BOSTON, MA 02116	TEMPORARY SERVICES	205,850
2 Total number of independent contractors (including but not limited to those listed above	) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part V		Statement o	of Revenue ule O contains a
	1a	Federated cam	paigns
ant	ь	Membership du	ies
ffs, Grant ir Amount	С	Fundraising ev	ents
iffs ar /	d	Related organiz	zations
imil	е	Government grant	s (contributions)
ntion er S	f	All other contribute	ons, gifts, grants, an ot included above
Contributions, Ond Other Simi	g	Noncash contributi 1a-1f \$	ons included in lines
Con	h	Total. Add line	s 1a-1f
	2a	SCIENCE NEWS	
e Ke	ь	SCIENCE EDUCATI	ON PROGRAMS
ě G	c	SCIENCE NEWS AL	
er w	d		
رة ج	e		
Program Serwice Revenue	f	All other progra	am service reven
	g	Total. Add line	
	3	Investment inc	ome (including d ar amounts) .
	4	Income from inves	stment of tax-exemp
	5	Royalties .	
	6a	Gross rents	(ı) Real
	Ь	Less rental	
	c	expenses Rental income	
	d	or (loss) Net rental inco	me or (loss) .
			(ı) Securities
	7a	Gross amount from sales of assets other than inventory	12,206,
	ь	Less cost or other basis and	11,754,
		sales expenses	452,
	c d	Gain or (loss)  Net gain or (los	
	8a	•	rom fundraising
Other Revenue		events (not inc \$	 s reported on line
Other	b c	Less direct ex Net income or	penses (loss) from fundra
	9a	Gross income f See Part IV, lir	rom gaming activ
	ь	Less direct ex	penses
	C		(loss) from gamır
	10a	Gross sales of returns and allo	• • •
	ь	Less cost of g	oods sold
	С		(loss) from sales
	11a	Miscellaneou MISCELLANEO	
	ь	LIST RENTAL	<i>,</i> , , , , , , , , , , , , , , , , , ,
	С		
	d	All other reven	
	e 12	Total revenue	
	12	i otal revenue.	See Instructions

VIII	Statement o		an ar note to any lin	o in this Doub VIII			
	Check IT Scheal	<u>ile O contains a respor</u>	ise 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
1a b c d	Federated camp Membership du Fundraising eve Related organiz Government grants	ents 1b ations 1d	72,000				
f g h	sımılar amounts no	ons included in lines	7,949,259	8,021,259			
2a b c d	SCIENCE NEWS SCIENCE EDUCATION		Business Code 511120 611710 541800	4,347,945 779,178 286,315	4,347,945 779,178	286,315	
f g 3	<b>Total.</b> Add lines	m service revenue  2a-2f  ome (including dividence ar amounts)	ds, interest,	5,413,438 692,585			692,585
4 5		tment of tax-exempt bond p	oroceeds	54,029			54,029
6a b c d	Gross rents Less rental expenses Rental income or (loss) Net rental incor	me or (loss)					
7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(1) Securities 12,206,502 11,754,424	(II) Other				
c d 8a	Gain or (loss)  Net gain or (los  Gross income fi			452,078			452,078
	events (not incl	uding  reported on line 1c)					
b c 9a	Net income or (		events				
		penses b loss) from gaming activ	vities				
b	Less cost of go	а	antory				
	Miscellaneous		Business Code				
Ь	MISCELLANEC		900099	109,264 48,161			109,264 48,161
C	A 11 - +1-	<del></del>					
d	All other revenu	ı	🕨				
e			· · · • •	157,425			
12	Total revenue.	See Instructions		14,790,814	5,127,123	286,315	1,356,117

Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A )	
Check if Schedule O contains a response or note to any line in this	Part IX			
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundrais expens

Part X Balance Sheet

	1	Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B)
	1		Beginning or year		End of year
		Cash-non-interest-bearing	4,740,098	1	3,206,394
	2	Savings and temporary cash investments	144,846	2	4,325
	3	Pledges and grants receivable, net	53,512,488	3	47,311,437
	4	Accounts receivable, net	512,694	4	194,545
	5	Loans and other receivables from current and former officers, directors, trustees, employees, and highest compensated employees Complete Part II of Schedule L	key	5	
Assets	6	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 employ and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficial organizations (see instructions) Complete Part II of Schedule L	/ers	6	
× 1	7	Notes and loans receivable, net		7	
<b>4</b>	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	344,670	9	363,440
1	10a	Land, buildings, and equipment cost or other basis Complete	3,782		555, 1,15
	b	Less accumulated depreciation 10b 2,79	7,389 782,527	10c	506,393
1	11	Investments—publicly traded securities	24,337,374	11	25,442,416
1	12	Investments—other securities See Part IV, line 11		12	
1	13	Investments—program-related See Part IV, line 11		13	
1	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	84,374,697	16	77,028,950
	17	Accounts payable and accrued expenses	559,555	17	777,030
	18	Grants payable	8,367	18	· · ·
	19	Deferred revenue	4,657,856	19	3,776,357
	20	Tax-exempt bond liabilities	, ,	20	· , ,
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ا ش	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
홅ㅣ		persons Complete Part II of Schedule L		22	
_ <b>`</b>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
2	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	3,169,350		3,700,663
	26	Total liabilities. Add lines 17 through 25	8,395,128	26	8,254,050
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
[등 ] 2	27	Unrestricted net assets	13,853,564	27	13,718,814
盎   2	28	Temporarily restricted net assets	61,137,201	28	54,039,495
된   2	29	Permanently restricted net assets	988,804	29	1,016,591
or Fund Balance		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		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	22	Total net assets or fund balances	75,979,569	33	68,774,900
	33	Total net assets of fund parances	13,313,303		

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				<del>.</del> .
1	Total revenue (must equal Part VIII, column (A), line 12)	1		14.7	790,814
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1				18,674
_		3		-6,2	27,860
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		75,9	79,569
5	Net unrealized gains (losses) on investments	5		_ =	345,809
6	Donated services and use of facilities				7 13,003
7	Investment expenses	6			
-		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			31,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	_			-
Day	t XII Financial Statements and Reporting	10		68,7	774,900
Par	Tinancial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
	, , , , , , , , , , , , , , , , , , ,			Yes	No
	Accounting method used to prepare the Form 990				
1	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version:

**EIN:** 53-0196483

Name: SOCIETY FOR SCIENCE & THE PUBLIC

Form 990, Part VII - Compensation Compensated Employees, and Inde	n of Officers,	Direct	ors,	Tru	ste	es, k	(ey	Employees, Higl	hest	
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, u an of trus	inless ficer tee)		(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1033-11130/	2/1033-11136/	related organizations
(1) H ROBERT HORVITZ	3 00	х		х				0	0	0
CHAIR (1) ROBERT W SHAW JR	3 00									
TREASURER		Х		Х				0	0	0
(2) ALAN LESHNER	3 00	x		х				0	0	0
SECRETARY (3) CRAIG BARRETT	1 00			<u> </u>						,
		х						0	0	o
TRUSTEE (4) MARY SUE COLEMAN	1 00									
TRUSTEE		Х						0	0	0
(5) MICHELA ENGLISH	1 00	x						0	0	0
TRUSTEE (6) TOM LEIGHTON	1 00								-	
		х						0	0	0
TRUSTEE (7) PAUL J MADDON	1 00									
TRUSTEE		Х						0	0	0
(8) STEPHANIE PACE MARSHALL	1 00	x						0	0	0
TRUSTEE										
(9) JOE PALCA	1 00	х						0	0	0
TRUSTEE (10) VIVIAN SCHILLER	1 00									
TRUSTEE		X						0	0	0
(11) FRANK WILCZEK	1 00	х						0	0	0
TRUSTEE (12) GEORGE YANCOPOULOS									_	
	1 00	х						0	0	0
TRUSTEE (13) SEAN B CARROLL	1 00									
TRUSTEE		X						0	0	0
(14) JENNIFER E YRUEGAS	1 00	х						0	0	0
VICE CHAIR (OCT 2014) (15) MAYA AJMERA	37 50							,		,
	37 30			х				102,742	0	17,142
PRESIDENT AND CEO (AUG-DEC) (16) RICK BATES	37 50									
INTERIM CEO/CAO				Х				260,098	0	35,112
(17) GREGORY MITCHELL	37 50			x				146,180	0	25,880
CHIEF FINANCIAL OFFICER (JAN-SEP) (18) CHARLES FEENEY	37 50									
CHIEF FINANCIAL OFFICER (DEC)				х				9,595	0	2,864
(19) MICHAEL MILLS	37 50								_	
CHIEF CONTENT OFFICER					Х			252,927	0	47,065
(20) MICHELE GLIDDEN	37 50				x			150,404	0	19,675
DIRECTOR SCIENCE EDU PROGRAMS (21) EVA EMERSON	37 50		<u> </u>				_	,		·
EDITOR IN CHIEF - SCIENCE NEWS						х		146,475	0	30,118
(22) JANET RALOFF	37 50					ļ ,,			-	
SEN EDITOR/WRITER - SCIENCE NEWS						Х		120,659	0	19,645
(23) JAMES MOORE	37 50					х		120,196	0	23,687
NETWORK MANAGER (24) BRUCE BOWER	37 50									
WRITER/BEHAVIORAL SCIENCE						х		109,746	0	20,380
In Service Colline					1		1	l .	I.	L

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pore so a not with the person of the person or director	ion (d nan o n is b	ne b oth ctor/	ox, u an of trus	nless ficer tee)	Forme	( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(26) HYUNJUNG KIM CHIEF OF STAFF	37 50					х		104,581	0	35,823

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As Filed Data -

DLN: 93493126005065

#### 1: 93493126005065

OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

## **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

Open to Public Inspection

		e organization SCIENCE & THE PUBLIC					Employer identification	ation number
SOCIL	.II I OK	SCIENCE & THE POBLIC					53-0196483	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mplete this p		ns.
		zation is not a private fo						
1		A church, convention	of churches, o	r association of churc	hes described i	n <b>section 170(</b>	o)(1)(A)(i).	
2		A school described in	-			•	,,,,,,,	
3	Ē	A hospital or a cooper				tion 170(b)(1)	(A)(iii).	
4	Ė	A medical research or		<del>-</del>				i <b>).</b> Enter the
_	_	hospital's name, city,	and state	61 6 11				
5	ı	An organization opera			versity owned o	or operated by a	a governmental unit d	escribed in
_	_	section 170(b)(1)(A)						
6	<u> </u>	A federal, state, or loc						
7	ı	An organization that n				om a governme	ental unit or from the g	general public
8	$\vdash$	described in <b>section 1</b> A community trust des				+ 11 )		
9	<u> </u>	An organization that n					hutions membershin	fees and aross
	,	receipts from activitie						
		its support from gross						
		acquired by the organi						
10	Г	An organization organ						
11	,	An organization organ	•	· · · · · · · · · · · · · · · · · · ·	-	·		out the purposes of
	'	one or more publicly s						
	_	the box in lines 11a th						
а	ı	Type I. A supporting of						
		supported organization organization You mus				ty of the direct	ors or trustees of the	supporting
b	Γ	Type II. A supporting				with its suppo	rted organization(s), l	by having control or
		management of the su			same persons t	hat control or r	nanage the supported	organization(s) You
	_	must complete Part I					16	
С	ı	Type III functionally supported organization						grated with, its
d	Г	Type III non-function						ianization(s) that is
	·	not functionally integr						
	_	(see instructions) Yo						
е	ı	Check this box if the contegrated, or Type III					s a Type I, Type II, T	ype III functionally
f		Enter the number of su						
g		Provide the following i						
		_		.,				
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
	(	organization		organization	listed in your		monetary support	other support (see
				(described on lines 1-9 above or IRC	docume	ent?	(see instructions)	ınstructions)
				section (see				
				ınstructions))				
					Yes	No		
				<del>                                     </del>				l

Sch	edule A (Form 990 or 990-EZ) 2014						Page <b>2</b>
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI )						
11	<b>Total support</b> Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto				<del></del>	<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		<del> </del>	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	<b>33 1/3% support test—2014.</b> If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and <b>stop here.</b> The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	<b>-2014.</b> If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	<b>▶</b> ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		<b>▶</b> ┌
18	<b>Private foundation.</b> If the organizations	on ala not check	cabox on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• <b>▶</b> □

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.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 20	014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,425,506	2,414,289	2,313,004	1,510,842	1,	,193,883	13,857,524
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	6,198,917	5,819,028	5,619,453	5,266,716	5,	,127,123	28,031,237
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	<b>Total.</b> Add lines 1 through 5	12,624,423	8,233,317	7,932,457	6,777,558	6,	,321,006	41,888,761
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	6,029,896	1,909,425	1,432,277	531,474		651,682	10,554,754
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							0
c	Add lines 7a and 7b	6,029,896	1,909,425	1,432,277	531,474		651,682	10,554,754
8	<b>Public support</b> (Subtract line 7c from line 6)							31,334,007
Se	ction B. Total Support							
				<u> </u>				
	ndar year (or fiscal year beginning in) 🏲	(a) 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	<b>(e)</b> 20	14	(f) Total
	ndar year (or fiscal year beginning in)  A mounts from line 6	(a) 2010 12,624,423	<b>(b)</b> 2011 8,233,317	(c) 2012 7,932,457	( <b>d</b> ) 2013		14 321,006	<b>(f)</b> Total 41,888,761
Cale	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					6,		
Cale 9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	12,624,423 951,855	8,233,317 791,698	7,932,457 909,935	6,777,558 682,919	6,	746,614	41,888,761 4,083,021
Cale 9 Oa b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	12,624,423	8,233,317	7,932,457	6,777,558	6,	321,006	41,888,761
Cale  9  Oa  b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	12,624,423 951,855	8,233,317 791,698	7,932,457 909,935	6,777,558 682,919	6,	746,614	41,888,761 4,083,021
Cale 9 Oa b	hdar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	12,624,423 951,855	8,233,317 791,698	7,932,457 909,935	6,777,558 682,919	6,	746,614	41,888,761 4,083,021 4,083,021
Cale  9  0a  b	hdar year (or fiscal year beginning in)  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,	951,855 951,855	8,233,317 791,698 791,698	7,932,457 909,935 909,935	6,777,558 682,919 682,919	6,	746,614 746,614	41,888,761 4,083,021 4,083,021 767,581
Cale 9 00a  b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is a check this box and stop here	951,855 951,855 951,855 87,772 13,664,050 for the organization	8,233,317 791,698 791,698 140,508 9,165,523 on's first, second,	7,932,457 909,935 909,935 188,919 9,031,311	6,777,558 682,919 682,919 192,957 7,653,434	7,	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363
Cale 9 0a b c 11 12 13 14 Se	ndar year (or fiscal year beginning in) ►  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is incheck this box and stop here  ction C. Computation of Pub	951,855 951,855 951,855 87,772 13,664,050 for the organization	8,233,317 791,698 791,698 140,508 9,165,523 on's first, second,	7,932,457 909,935 909,935 188,919 9,031,311 third, fourth, or fi	6,777,558 682,919 682,919 192,957 7,653,434	7,	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363
Cale 9 0a b c 11 12 13 14 Se 15	ndar year (or fiscal year beginning in) ►  A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub Public support percentage for 2014	951,855  951,855  87,772  13,664,050  for the organization (fic Support Per (line 8, column (fine 8))	8,233,317 791,698 791,698 140,508 9,165,523 on's first, second,	7,932,457 909,935 909,935 188,919 9,031,311 third, fourth, or fi	6,777,558 682,919 682,919 192,957 7,653,434	7, section	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363 3) organization, 67 040 %
Cale 9 00a  b c 11 12 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is incheck this box and stop here  ction C. Computation of Pub Public support percentage from 201	951,855  951,855  87,772  13,664,050  for the organization  lic Support Pe (line 8, column (fine 8, column (fi	8,233,317 791,698 791,698 140,508 9,165,523 on's first, second, ercentage divided by line :	7,932,457 909,935 909,935 188,919 9,031,311 third, fourth, or fi	6,777,558 682,919 682,919 192,957 7,653,434	7,	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363
Cale 9 0a b c 11 12 Se 15 16 Se	ndar year (or fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is incheck this box and stop here  ction C. Computation of Pub  Public support percentage from 201  ction D. Computation of Inve	951,855  951,855  87,772  13,664,050 for the organization lic Support Period (line 8, column (for 10, 20)) (3 Schedule A, Parestment Incomparison)	8,233,317  791,698  791,698  140,508  9,165,523  on's first, second,  ercentage  f) divided by line :  ort III, line 15  me Percentage	7,932,457 909,935 909,935 909,935 188,919 9,031,311 third, fourth, or fi	6,777,558 682,919 682,919 192,957 7,653,434 fth tax year as a	7, section 15 16	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363 3) organization, 67 040 % 68 520 %
Cale 9 0a b c 11 12 13 14 Se 15 16 Se 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub Public support percentage from 201  ction D. Computation of Inve	951,855  951,855  951,855  87,772  13,664,050  for the organization  lic Support Period (line 8, column (for 8,	8,233,317  791,698  791,698  140,508  9,165,523  on's first, second,  ercentage  ort III, line 15  me Percentag  lumn (f) divided b	7,932,457  909,935  909,935  188,919  9,031,311  third, fourth, or fill  L3, column (f))  e  y line 13, column	6,777,558 682,919 682,919 192,957 7,653,434 fth tax year as a	7, section 15 16 17	746,614 746,614 157,425 225,045	41,888,761 4,083,021 4,083,021 767,581 46,739,363 3) organization, 67 040 % 68 520 % 8 740 %
Cale 9 0a b c 11 12 13 14 Se 15 16 Se 17 18	ndar year (or fiscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is incheck this box and stop here  ction C. Computation of Pub  Public support percentage from 201  ction D. Computation of Inve	951,855  951,855  951,855  87,772  13,664,050  for the organization (line 8, column (for the standard for th	791,698  791,698  791,698  140,508  9,165,523  on's first, second,  ercentage  on's lirt III, line 15  me Percentag  lumn (f) divided b	7,932,457 909,935 909,935 909,935 188,919 9,031,311 third, fourth, or fi	6,777,558 682,919 682,919 192,957 7,653,434 fth tax year as a	7, section 15 16 17 18	746,614 746,614 746,614 157,425 225,045 501(c)(3	41,888,761 4,083,021 4,083,021 767,581 46,739,363 3) organization, 67 040 % 68 520 % 8 740 % 8 200 %

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V  $\,)$ 

Section A. All Supporting Organizations
---

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)$ ? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)							
S	ection B. Type I Supporting Organizations							
			Yes	No				
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1						
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.							
S	ection C. Type II Supporting Organizations							
			Yes	No				
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1						
S	ection D. All Type III Supporting Organizations							
			Yes	No				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?							
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2						
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3						
S	ection E. Type III Functionally-Integrated Supporting Organizations							
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see  The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.							
2	Activities Test Answer (a) and (b) below.		Yes	No				
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a						
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b						
3								
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a						
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1					

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

#### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

#### Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	anızatıons		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> From 2012			
d From 2013			

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER	INCOME FROM ACTIVITIES NOT NORMALLY RECURRING
INCOME	

Schedule A (Form 990 or 990-EZ) 2014

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#### DLN: 93493126005065

#### OMB No 1545-0047

Open to Public

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 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 <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Inspection

Na	nme of the organization CIETY FOR SCIENCE & THE PUBLIC			Employer identification number
50	CLETT FOR SCIENCE & THE PUBLIC			53-0196483
Pä	art I Organizations Maintaining Donor Adv		Similar Fu	
	organization answered "Yes" to Form 990	, Part IV, line 6.  (a) Donor advised fu	ınde	(b) Funds and other accounts
1	Total number at end of year	(a) Dollor advised to	ilius	(b) I unus and other accounts
<u>.</u>	Aggregate value of contributions to (during year)			
2	Aggregate value of grants from (during year)			
1	Aggregate value at end of year			
- 5	Did the organization inform all donors and donor advisor	ore in writing that the accete	held in dono	radvised
-	funds are the organization's property, subject to the or	ganızatıon's exclusive legal (	control?	☐ Yes ☐ No
•	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the benef conferring impermissible private benefit?			
Pa	rt III Conservation Easements. Complete if	the organization answere	ed "Yes" to	Form 990, Part IV, line 7.
L	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education)	vation of an h	nistorically important land area ertified historic structure
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contr	rıbutıon ın th	e form of a conservation
	,		Γ	Held at the End of the Year
а	Total number of conservation easements			2a
Ь	Total acreage restricted by conservation easements			2b
c	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)		2c
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not	on a	2d
3	Number of conservation easements modified, transferr	ed, released, extinguished, o	r terminated	by the organization during
	the tax year <b>F</b>			
1	Number of states where property subject to conservati	on easement is located 🕨		
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		ection, handl	ing of violations, and <b>Yes No</b>
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conserva	ation easeme	ents during the year
_	Amount of expenses incurred in monitoring, inspecting	and enforcing conservation	easements	during the year
/	► \$	, and emoreing conservation	casements	daming the year
2	Does each conservation easement reported on line 2(o	I) above satisfy the requirem	ents of sect	ion 170(h)(4)(R)(i)
•	and section $170(h)(4)(B)(H)^2$	i) above satisty the requirem	icitis of sect	Yes
•	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization		
a	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Tre		r Other Similar Assets.
la	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, e	education, o	r research in furtherance of public
b		16 (ASC 958), to report in it ts held for public exhibition, (	ts revenue s	tatement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
а	Revenue included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , ,		<b>▶</b> \$
b	Assets included in Form 990, Part X			<b>►</b> \$

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	storic	al Tr€	<u>easu</u>	res, or Ot	<u>her</u>	<u>Similar Ass</u>	ets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cl	heck a	ny of th	ne foll	owing that a	re a s	significant use c	of its	
а	Public exhibition		d	Γ	Loan o	rexcl	hange progra	ams			
b	Scholarly research		e	$\Gamma$	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w they	further	the o	organization'	sexe	empt purpose in		
5	During the year, did the organization solicit									_	_
	assets to be sold to raise funds rather than t								•	Yes	│ No
Par	<b>t IV</b> Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered		es" to Form 99	, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	/ for co	ntrıbut	ions d	or other asse	ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing ta	ıble		_				
									Amo	unt	
C	Beginning balance							1c			
d	Additions during the year						<u>                                     </u>	1.d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21,	for es	crow or	custo	odial accoun	t lıab	oility?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatıo	n has b	een p	rovided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete										
	•	(a)Current year		Prior y	ear	b (c)			Three years back (	( <b>e)</b> Four y	ears back
1a	Beginning of year balance	1,005,658			965,939						
b	Contributions	11,408			16,865		965,939	1			
C	Net investment earnings, gains, and losses	23,178			22,854						
d	Grants or scholarships										
e	Other expenditures for facilities	22.652									
	and programs	23,653									
f	Administrative expenses	1 215 521					255.00	_			
g	End of year balance	1,016,591			005,658		965,939	1			
2	Provide the estimated percentage of the cur	rent year end baland	e (lır	ne 1g,	column	(a)) l	neld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ► 100 000 %										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	ation	that a	re held	and a	dmınıstered	for t	he		
	organization by									Yes	No
	(i) unrelated organizations							•	3a(i)		No
b	(ii) related organizations								3a(ii	<u>'                                       </u>	No I
4	Describe in Part XIII the intended uses of the	· ·						•	30		<u> </u>
	t VI Land, Buildings, and Equipme					ansv	vered 'Yes'	to F	orm 990, Par	t IV, lı	ne
	11a. See Form 990, Part X, line								•		
	Description of property				Cost or o		( <b>b)</b> Cost or o basis (othe		(c) Accumulated depreciation	(d) B	ook value
1a	Land						26	,946			26,946
Ь	Buildings						1,521	,182	1,427,620	0	93,562
c	Leasehold improvements										
d I	Equipment						552	,923	524,78	2	28,141
e	Other		<u>.                                      </u>				1,202	,731	844,98	7	357,744
Tota	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part 2	X, colι	umn (B	), line 1	0(c).)					506,393
									Schedule D (	Form 9	

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	omplete if the organization	answered 'Yes' to For	rm 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of vo	
(1)Financial derivatives		Cost of end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>		
Part VIII Investments—Program Related. (	Complete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.	425		
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
		,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>*</b>		
Part IX Other Assets. Complete if the organization		0, Part IV, line 11d See	
(a) Desc	Inpulati		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. Complete if the org	ganization answered 'Yes'	to Form 990, Part IV,	line 11e or 11f. See
Form 990, Part X, line 25.  1 (a) Description of liability	(b) Book value		
	(b) book value		
Federal income taxes AWARDS PAYABLE	1 0 3 5 1 4 5		
ACCRUED POSTRETIREMENT LIABILITY	1,825,145 1,872,000		
DEFERRED LEASE LIABILITY	3,518		
	5,510		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 3,700,663		
2 Liphility for uncertain tay positions. In Bart VIII. provi	•		

PART XI, LINE 4B - OTHER

PART XII, LINE 2D - OTHER

PART XII, LINE 4B - OTHER

ADJUSTMENTS

ADJUSTMENTS

ADJUSTMENTS

Par		evenue per Audited Financial Statements With Revered 'Yes' to Form 990, Part IV, line 12a.	venue p	er R	<b>eturn</b> Complete If
1	Total revenue, gains, and othe	r support per audited financial statements		1	14,429,501
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses)	on investments 2a	-345,809		
b	Donated services and use of fa	acılıtıes			
C	Recoveries of prior year grants	s 2c			
d	Other (Describe in Part XIII )	2d			
e	Add lines <b>2a</b> through <b>2d</b> .	<del></del>		2e	-345,809
3	Subtract line ${f 2e}$ from line ${f 1}$ .		[	3	14,775,310
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>			
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII )	4b	15,504		
c	Add lines <b>4a</b> and <b>4b</b>			4c	15,504
5		d <b>4c.</b> (This must equal Form 990, Part I, line 12)		5	14,790,814
Pari		xpenses per Audited Financial Statements With E swered 'Yes' to Form 990, Part IV, line 12a.	xpenses	per	Return. Complete
1		raudited financial statements		1	21,634,170
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25	ļ		
а	Donated services and use of fa	acilities			
b	Prior year adjustments	2b			
С	Otherlosses				
d	Other (Describe in Part XIII )		631,000		
e	Add lines $2a$ through $2d$	<del></del> .		2e	631,000
3	Subtract line ${f 2e}$ from line ${f 1}$ .		[	3	21,003,170
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:			
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII )	4b	15,504		
С	Add lines <b>4a</b> and <b>4b</b>	<del></del> .		<b>4</b> c	15,504
5	Total expenses Add lines 3 ar	nd <b>4c.</b> (This must equal Form 990, Part I, line 18)		5	21,018,674
Par	Supplemental Inf	ormation			
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete t			de any additional
	Return Reference	Explanation			
PART	V, LINE 4	THE ORGANIZATION'S ENDOWMENT IS TO BE USED TO S THAT IMPACT K-12 STUDENTS, AND IF NECESSARY, FOR			
PART	X, LINE 2	THE SOCIETY BELIEVES THAT IT HAS APPROPRIATE SUP TAKEN, AND THEREFORE DOES NOT HAVE ANY UNCERTA MATERIAL TO THE FINANCIAL STATEMENTS GENERALLY CURRENT YEAR AND THE THREE PRIOR YEARS REMAIN SUTAXING AUTHORITIES	IN TAX PO	SITI	ONS THAT ARE RETURNS FOR THE

MAILING LIST RENTAL INCOME 15,504

MAILING LIST RENTAL EXPENSE 15,504

ACCRUED POSTRETIREMENT ADJUSTMENT BENEFIT 631,000

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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DLN: 93493126005065

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2014

OMB No 1545-0047

(Form 990)

SCHEDULE F

Department of the Treasury

Internal Revenue Service

**Statement of Activities Outside the United States** 

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

► Attach to Form 990.

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

Open to Public Inspection

Name of the organization SOCIETY FOR SCIENCE & THE PUBL	IC			Employer ident	ification number
SUCTERY FOR SCIENCE & THE PUBL	_1C			53-0196483	
Part I General Information "Yes" to Form 990, Part 10 (1997)			<b>e United States.</b> Co	omplete if the organiz	ation answered
1 For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	antees' eligibili	ty for the gran	ts or assistance, and	the selection criteria	✓ Yes
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitorii	ng the use of its grant	s and other
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed )	
<b>(a)</b> Region	<b>(b)</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
(1) See Add'l Data		-			
( 2)					
(3)					
(4)					
(5)					
<b>3a</b> Sub-total	0	0			1,179,821
<b>b</b> Total from continuation sheets to Part I	0	0			35,721
c Totals (add lines 3a and 3b)	0	0			1,215,542

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	<b>(c)</b> Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
( 2)								
(3)								
(4)								
(5)								
( 6)								
(7)								
(8)								
(9)								
(10)								
(11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
			l	l .	l			l .

2 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 . . . . .

Schedule F (Form 990) 2014 Page **3** Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of (a) Type of grant or assistance recipients cash grant disbursement non-cash of non-cash valuation assistance assistance (book, FMV, appraisal, other) 7 (1) AWARD PAYMENTS CENTRALAMERICA 2,000 EFT FOR INDIVIDUAL & CARIBBEAN WINNERS IN SSP'S SCIENCE COMPETITIONS (2) AWARD PAYMENTS EAST ASIA & 55 137,383 EFT FOR INDIVIDUAL PACIFIC WINNERS IN SSP'S SCIENCE COMPETITIONS (3) AWARD PAYMENTS EUROPE 36 82,601 EFT FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE COMPETITIONS 9,917 EFT (4) AWARD PAYMENTS MIDDLE EAST & 19 FOR INDIVIDUAL NORTH AFRICA WINNERS IN SSP'S SCIENCE COMPETITIONS (5) AWARD PAYMENTS 14,900 EFT NORTH AMERICA 14 FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE COMPETITIONS (6) AWARD PAYMENTS RUSSIA & NEWLY 13 8,100 EFT FOR INDIVIDUAL INDEPENDENT WINNERS IN SSP'S STATES SCIENCE COMPETITIONS (7) AWARD PAYMENTS SOUTH AMERICA 9 4,600 EFT FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE COMPETITIONS (8) AWARD PAYMENTS SOUTH ASIA 17 26,201 EFT FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE COMPETITIONS (9) AWARD PAYMENTS SUB-SAHARAN 4 7,000 EFT FOR INDIVIDUAL AFRICA WINNERS IN SSP'S SCIENCE COMPETITIONS (10) (11) (12) (13) (14) (15) (16) (17)

(18)

#### Part IV Foreign Forms

1	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)	Γ	Yes	ি	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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; do not file with Form 990)	Г	Yes	<b>~</b>	Νo
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)	Γ	Yes	ত	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<b>~</b>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	া	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; do not file with Form 990)	<b>▼</b>	Yes	Г	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5** 

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

#### 990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVE THEIR NEED FOR A HOUSING/TRAVEL GRANT TO ATT END ISEF INDIVIDUAL RECIPIENTS ARE PAID THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL AND VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE AWARD

#### **Additional Data**

Software ID: Software Version:

**EIN:** 53-0196483

Name: SOCIETY FOR SCIENCE & THE PUBLIC

Form 990 Schedule F Part I - Activities Outside The United States

I OI III DDO OGIICUUIC I		<del>1100 0410140 1</del>	no omitou otu too		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARRIBEAN	0		HOUSING/TRAVEL GRANTS TO COMPETITION PARTICIPANTS &	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	29,619
EAST ASIA AND THE PACIFIC	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	417,861
EUROPE (INCLUDING ICELAND AND GREENLAND)	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	241,540

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
MIDDLE EAST AND NORTH AFRICA	0		AWARDS/PAYMENTS & HOUSING/TRAVEL GRANTS TO COMPETITION PARTICIPANTS & SPONSORING SCIENCE FAIRS	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	181,278		
NORTH AMERICA	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	50,592		
RUSSIA AND THE NEWLY INDEPENDENT STATES	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	87,673		

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
SOUTH AMERICA	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	101,225			
SOUTH ASIA - AFGHANISTAN, BANGLADESH,	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	70,033			
SUB SAHARAN AFRICA	0		HOUSING/TRAVEL GRANTS TO COMPETITION	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP SCIENCE COMPETITIONS	35,721			

, Form 990 Schedu'	le F Part II	- Grants or Entiti	ies Outside The Uni	ited States	_		_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

, Form 990 Schedu	le F Part II	- Grants or Entition	es Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨

Form 990 Schedi	ule F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	6,860	WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedu	le F Part II	- Grants or Entitie	es Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		CENTRAL AMERICA & CARIBBEAN	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		CENTRAL AMERICA & CARIBBEAN	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨

Form 990 Sched	ule F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedi	ule F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	5,427	WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SOUTH ASIA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	7,295	WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedv	ale F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	7,790	WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedu	ile F Part II	- Grants or Entiti	es Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	12,174	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	6,986	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	6,156	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SUB-SAHARAN AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	5,763	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Sched	ule F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedv	ale F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SOUTH ASIA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		NORTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Sched	ule F Part II	- Grants or Entit	ties Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, i	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SUB-SAHARAN AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, i	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		& CARIBBEAN	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
			HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Sched	1	1	ties Outside The Uni	ited States	1	1	1	I (1) Martin das
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	1	WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	, ,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨

, Form 990 Schedu	le F Part II	- Grants or Entition	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	·	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

(a) Name of organization	(b) IRS code section and EIN(if applicable)	1	(d) Purpose of grant	ited States (e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	<del></del>	EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
	<b>I</b>	EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		MIDDLE EAST & NORTH AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE	,	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EUROPE	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	6,900	WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		RUSSIA & NEWLY INDEPENDENT STATES	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		SOUTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨

Form 990 Schedu	ile F Part II	- Grants or Entiti	es Outside The Uni	ted States			_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		EAST ASIA & PACIFIC	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	7,070	WIRE	7,070	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FM∨
		NORTH AMERICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS	6,070	WIRE	6,070	CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV
		SUB-SAHARAN AFRICA	HOUSING AND TRAVEL FOR SCIENCE COMPETITION PARTICIPANTS		WIRE		CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE FAIR	FMV

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

(Form 990)

See Additional Data Table

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

DLN: 93493126005065 OMB No 1545-0047

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

Open to Public **Inspection** 

Attach to Form 990. Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number SOCIETY FOR SCIENCE & THE PUBLIC 53-0196483 Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organiza	ation's procedures for	monitoring the use of	grant funds in the Unite	ed States			
Part II Grants and Other A Form 990, Part IV, lin							s" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 26 

Part III Grants and Other Assistance to Domestic Individuals. 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>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) AWARDS FOR PARTICIPATION IN SSP SCIENCE EDUCATION COMPETITIONS	981	1,714,892			

Part IV Supplemental I	<b>nformation.</b> Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
	ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVIDE A WRITTEN REQUEST DETAILING HOW THE FUNDS WILL BE USED INDIVIDUAL RECIPIENTS ARE PAID THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL AND VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE AWARD

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 53-0196483

Name: SOCIETY FOR SCIENCE & THE PUBLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLIED LEARNING ACADEMY7060 CAMP BOWIE BLVD FORT WORTH,TX 76116	75-2613482		8,500				FELLOWS GRANT

orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BALDWIN COUNTY BOARD OF EDUCATIONBALDWIN HIGH SCHOOL110 N ABC STREET STREET MILLEDGEVILLE,GA 31061	58-6000184		8,500				FELLOWS GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BERGAN CO BOARD OF EDUCATION200 HACKENSACK AVENUE HACKENSACK,NJ 07601	22-6002432		7,000				SCHOOL AWARDS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BRENTWOOD UNIOIN FREE SCHOOL DISTRICT52 THIRD AVE BRENTWOOD,NY 11717	11-6002032		8,500				FELLOWS GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BRONX HIGH SCHOOL OF SCIENCE75 WEST 205TH STREET BRONX,NY 10468	13-6400434		7,000				SCHOOL AWARDS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BYRAM HILLS HIGH SCHOOL12 TRIPP LANE ARMONK,NY 10504	13-6007152		8,000				SCHOOL AWARDS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CALUMET REGIONAL AND ENGINEERING FAIR7400 W 84TH PL CROWN POINT,IN 46307	35-6200140		8,500				FELLOWS GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CALUMET REGIONAL AND ENGINEERING FAIR7400 W 84TH PL CROWN POINT,IN 46307	35-6200140		8,500				FELLOWS GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CLARK MAGNET HIGH SCHOOL4747 NEW YORK AVE LA CRESCENTA,CA 91214	87-0755181		8,500				FELLOWS GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DISTRICT OF COLUMBIA GOVERNMENT1100 4TH STREET SW 2ND FLOOR WASHINGTON, DC 20024	53-6001131		8,500				FELLOWS GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HAMPTON HIGH SCHOOL 1491 W QUEEN ST HAMPTON,VA 23669	54-6001338		8,500				FELLOWS GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
JERICHO SENIOR HIGH SCHOOL99 CEDAR SWAMP ROAD JERICHO,NY 11753	11-6002037		8,000				SCHOOL AWARDS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LEE COUNTY SCH DIST- SOUTH FORT MYERS HIGH SCHOOL14020 PLANTATION RD FORT MYERS,FL 33912	59-6000701		8,500				FELLOWS GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MITCHELL SCHOOL DISTRICT821 N CAPITAL ST MITCHELL,SD 57301	46-6001338		8,500				FELLOWS GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTGOMERY BLAIR HIGH SCHOOL51 UNIVERSITY BLVD E SILVER SPRING, MD 20901	52-6000989		9,000				SCHOOL AWARDS

<u>Form 990,Schedule I, Pai</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
NC SCH OF SCIENCE AND MATHEMATICS1219 BROAD STREET BOX 2733 DURHAM,NC 27705	56-1250756		9,000				SCHOOL AWARDS					

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
NEW CENTURY TECHNOLOGY HIGH SCHOOL2500 MERIDIAN STREET NW HUNTSVILLE,AL 35811	63-6000813		8,500				FELLOWS GRANT				

<u> Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
NOXUBEE COUNTY SCHOOL DISTRICT15867 HWY 14 WEST MACON,MS 39341	64-6000920		8,500				FELLOWS GRANT				

<u> Form 990,Schedule I, Pa</u>	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
ROYAL SCHOOL DISTRICT PO BOX 486 ROYAL CITY, WA 99357	91-6012307		8,500				FELLOWS GRANT					

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
SANTIAGO HIGH SCHOOL 1395 FOOTHILL PARKWAY CARONA,CA 92881	33-0277305		8,500				FELLOWS GRANT					

form 990, Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SIMSBORO HIGH SCHOOL 1 TIGER DRIVE SIMSBORO,LA 71275	72-6000674		8,500				FELLOWS GRANT			

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
STUYVESANT HIGH SCHOOL345 CHAMBERS STREET NEWYORK,NY 10282	13-6608981		11,000				SCHOOL AWARDS				

<u>Form 990,Schedule I, Pa</u>	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
THE HARKER SCHOOL500 SARATOGA AVENUE SAN JOSE,CA 95129	94-1613808		10,000				SCHOOL AWARDS				

<u>Form 990,Schedule I, Pa</u>	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
THE INGENUITY PROJECT INC1400 WEST COLD SPRING LANE BALTIMORE,MD 21209	52-1942495		8,500				FELLOWS GRANT					

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
THORNTON TOWNSHIP HIGH SCHOOLS465 EAST 170TH STREET SOUTH HOLLAND,IL 60473	36-6004396		8,500				FELLOWS GRANT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UTAH SCHOOLS FOR THE DEAF & THE BLIND742 HARRISON BLVD OGDEN,UT 84404	87-6000545		8,500				FELLOWS GRANT			

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DLN: 93493126005065

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization SOCIETY FOR SCIENCE & THE PUBLIC **Employer identification number** 

53-0196483

Pa	Tt Questions Regarding Compensatio	n							
					Yes	No			
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	Γ	Housing allowance or residence for personal use						
	Travel for companions	Γ	Payments for business use of personal residence						
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees						
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)						
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes				
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe				V				
			noctor, rogarding the reams effected in the 14	2	Yes				
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply	·						
	▼ Compensation committee		Written employment contract						
	✓ Independent compensation consultant	굣	Compensation survey or study						
	Form 990 of other organizations	굣	Approval by the board or compensation committee						
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization						
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo			
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo			
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo			
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III						
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	itions mi	ust complete lines 5-9.						
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of								
а	The organization?			5a		No			
b	Any related organization?			5b		No			
	If "Yes," to line 5a or 5b, describe in Part III								
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any						
а	The organization?			6a		No			
b	Any related organization?			6b		Νo			
	If "Yes," to line 6a or 6b, describe in Part III								
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7	Yes				
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was						
	subject to the initial contract exception described i								
	ın Part III			8		Νo			
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$ ?	e rebutta	able presumption procedure described in Regulations	9					

## 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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation				
1 RICK BATES, INTERIM CEO/CAO	(i) (ii)	152,798 0	107,000	300 0	15,047 0	23,060	298,205 0	0
2 GREGORY MITCHELL, CHIEF FINANCIAL OFFICER (JAN-SEP)	(i) (ii)	136,014 0	0	10,166 0	13,860	17,613 0	177,653 0	0
3 MICHAEL MILLS, CHIEF CONTENT OFFICER	(i) (ii)	252,091 0	0	836 0	25,500 0	25,265 0	303,692	0
4 MICHELE GLIDDEN, DIRECTOR SCIENCE EDU PROGRAMS	(i) (ii)	149,493 0	0	911	14,835 0	7,816	173,055 0	0
5 EVA EMERSON, EDITOR IN CHIEF - SCIENCE NEWS	(i) (ii)	146,185 0	0	290 0	14,579 0	25,854 0	186,908 0	0

Schedule J (Form 990) 2014

## Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	THE ORGANIZATION REIMBURSES HEALTH CLUB DUES FOR EMPLOYEES THE BENEFIT IS TREATED AS TAXABLE COMPENSATION TO THESE INDIVIDUALS
· ·	JAMES MOORE,NETWORK MANAGER, RECEIVED A BONUS PAYMENT HYUNJUNG KIM, CHEIF OF STAFF, RECEIVED A BONUS PAYMENT RICHARD BATES, INTERIM CEO, RECEIVED A BONUS PAYMENT

Schedule J (Form 990) 2014

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SCHEDULE O Sumplement

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

DLN: 93493126005065

2014

Open to Public Inspection

Name of the organization	Employer identification number
SOCIETY FOR SCIENCE & THE PUBLIC	
	53-0196483

990 Schedule O, Suppleme	
Return Reference	Explanation
FORM 990, PART III, LINE 3	
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WAS PROVIDED TO SSP'S AUDIT COMMITTEE FOR REVIEW AND COMMENTS PRIOR TO FILIN
	G, THE FORM 990 WAS ALSO PROVIDED TO THE REST OF SSP'S BOARD FOR REVIEW
FORM 990, PART VI, SECTION B, LINE 12C	ONCE A YEAR, OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND ALL OTHER EMPLOYEES ARE REQ UIRED TO AFFIRMATIVELY DISCLOSE ANY POTENTIAL CONFLICTS BY FILING OUT A FORM RESPONDING TO THIS INQUIRY THESE REPONSES ARE REVIEWED BY SSP MANAGEMENT AND THE SSP AUDIT COMMITTEE.
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE CEO, AS WELL AS THE OFFICERS AND KEY EMPLOYEES, WAS REVIEWED AND APPR OVED BY THE EXECUTIVE COMMITTEE WHO ARE INDEPENDENT AND THEIR DELIBERATIONS AND DECISIONS ARE DOCUMENTED SSP HIRED AN INDEPENDENT OUTSIDE COMPENSATION CONSULTANT TO BENCHMARK SALA RIES FOR EACH ORGANIZATIONAL POSITION THIS DATA WAS PROVIDED TO THE EXECUTIVE COMMITTEE W HO CONSIDERED IT WHEN MAKING THEIR COMPENSATION DECISIONS FOR THE CEO, OFFICERS, AND KEY E MPLOYEES
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE MADE AVAILABLE UPON REQUEST AND ON SSP'S WEBSITE
FORM 990, PART IX, LINE 11G	WEB HOSTING AND IT SERVICES PROGRAM SERVICE EXPENSES 513,415 MANAGEMENT AND GENERAL EXPE NSES 127,972 FUNDRAISING EXPENSES 2,113 TOTAL EXPENSES 643,500 AV PRODUCTION AND EXHIBIT SERVICES PROGRAM SERVICE EXPENSES 448,582 MANAGEMENT AND GENERAL EXPENSES 111,811 FUN DRAISING EXPENSES 1,847 TOTAL EXPENSES 562,240 TEMPORARY HELP PROGRAM SERVICE EXPENSES 260,313 MANAGEMENT AND GENERAL EXPENSES 64,884 FUNDRAISING EXPENSES 1,072 TOTAL EXPENSE S 326,269 MAGAZINE CONSULTANTS PROGRAM SERVICE EXPENSES 58,442 MANAGEMENT AND GENERAL E XPENSES 14,567 FUNDRAISING EXPENSES 241 TOTAL EXPENSES 73,250 TRANSLATION SERVICES PRO GRAM SERVICE EXPENSES 14,884 MANAGEMENT AND GENERAL EXPENSES 3,710 FUNDRAISING EXPENSES 61 TOTAL EXPENSES 18,655 COPY EDITOR PROGRAM SERVICE EXPENSES 86,6720 MANAGEMENT AND GE NERAL EXPENSES 16,630 FUNDRAISING EXPENSES 275 TOTAL EXPENSES 83,625 FREELANCE WRITERS PROGRAM SERVICE EXPENSES 195,895 MANAGEMENT AND GENERAL EXPENSES 88,828 FUNDRAISING EXPENSES 61 TOTAL EXPENSES 16,630 FUNDRAISING EXPENSES 275 TOTAL EXPENSES 88,625 FREELANCE WRITERS PROGRAM SERVICE EXPENSES 195,895 MANAGEMENT AND GENERAL EXPENSES 88,828 FUNDRAISING EXP ENSES 806 TOTAL EXPENSES 245,529 SECURITY SERVICES PROGRAM SERVICE EXPENSES 70,466 MAN AGEMENT AND GENERAL EXPENSES 17,564 FUNDRAISING EXPENSES 31,872 MANAGEMENT AND GENERAL EXPE ENSES 805 TOTAL EXPENSES 17,564 FUNDRAISING EXPENSES 31,872 MANAGEMENT AND GENERAL EXPE ENSES 806 TOTAL EXPENSES 17,564 FUNDRAISING EXPENSES 31,872 MANAGEMENT AND GENERAL EXPE ENSES 806 TOTAL EXPENSES 17,564 FUNDRAISING EXPENSES 31,872 MANAGEMENT AND GENERAL EXPE ENSES 805,100 ENTERTAINMENT/TALENT SERVICES PROGRAM SERVICE EXPENSES 36,003 MANAGEMENT AND GENERAL EXPENSES 8,974 FUNDRAISING EXPENSES 148 TOTAL EXPENSES 45,125 OTHER SERVICE EXPENSES 55,100 ENTERTAINMENT/TALENT SERVICES PROGRAM SERVICE EXPENSES 45,125 OTHER SERVICE EXPENSES 709 TOTAL EXPENSES 172,344 MANAGEMENT AND GENERAL EXPENSES 45,958 FUNDRAISING EXPENSES 709 TOTAL EXPENSES 216,011
FORM 990, PART XI, LINE 9	ACCRUED POSTRETIREMENT ADJUSTMENT BENEFIT -631,000
FORM 990, PART XII, LINE 2C	THE AUDIT COMMITTEE OVERSEES THE AUDIT AND SELECTION OF THE AUDIT FIRM THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR