DLN: 93493228016396

# 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 <a href="www.IRS.gov/form990">www.IRS.gov/form990</a>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or th	e 2015 ca	lendar year, or tax y		01-2015 , and end	ding 12-31-20	015			
		applicable change	C Name of organization AMERICAN MATHEMA	TICAL SOCIETY					-	dentification number
	me ch	-						05-0	2647	97
	tial ret	-	Doing business as							
Fir	nal				not delivered to street a	ddress) Room/	suite	E Teleph	none nu	ımber
ret	urn/te	erminated	201 CHARLES STREET	-				(401	) 455	-4000
An	nended	d return	City or town, state or PROVIDENCE, RI 029		nd ZIP or foreign postal	code		<b>2</b> 6		+ 20 200 020
Ap	plicatio	on pending	PROVIDENCE, RI 029	9042294				<b>G</b> Gross	receipt	s \$ 39,390,830
				dress of principal	officer			s this a grou		
			DONALD E MCC 201 CHARLES S					ubordinates Are all subord		「Yes √No s 「Yes 「No
			PROVIDENCE, F	RI 029042294				ncluded?	ımate	s j řesj No
T Ta	av-eve	empt status	<u> </u>	01(c) ( ) <b>=</b> (uncort n	o)			-		t (see instructions)
_		·		01(c) ( ) <b>¬</b> (iiiseit ii	0 )   4947(a)(1) 01	1 327	H(c)	Group exemp	tion n	umber 🗠
			/W AMS ORG				1,			
			Corporation Trus	t Association C	ther 🟲		<b>L</b> Year	of formation 1	.888	<b>M</b> State of legal domicile DC
Pa	rt I		mary							
iance	l E	THE SOC EDUCATI	scribe the organization IETY'S BROAD MIS ION, WHICH IS ACC	SION IS TO FUE COMPLISHED TH	THER THE INTERE	ST OF MAT				CHOLARSHIP AND ACY IN EDUCATION,
Governance	2	Check th	nis box 🚩 if the orga	anızatıon dıscont	nued its operations	or disposed	of more th	an 25% of its	s net a	assets
	_	N 1	-£	inha azoroni	d (Daut 117 1	`			٦	1 ^
Activities &	1		of voting members of of independent voting						4	8 7
	1		mber of individuals e	_					5	233
ă	1		mber of volunteers (e	• •	•	•			6	544
	1		related business reve						7a	23,229
	b 1	Net unrela	ated business taxabl	e income from Fo	rm 990-T, line 34		<u></u>		7b	20,361
								Prior Year		Current Year
a)	8		butions and grants (				-	4,581		6,272,338
Revenue	10 Invest			n service revenue (Part VIII, line 2g)				22,871		22,879,117
Η			•					6,492	,322	2,889,375
	12		revenue—add lines 8				ne	33,945	06.5	32,040,830
		12)								
	13		s and similar amount					543	,563	767,062
	14		its paid to or for mem					18,448	0	0
\$	15	5-10		ther compensation, employee benefits (Part IX, column (A), lines						18,961,457
Expenses	16a	Profe:	ssional fundraising fe	es (Part IX, colu	mn (A), line 11e)			0		0
ਡੌ	b		ındraısıng expenses (Part		-					
	17		expenses (Part IX,					9,139		9,326,607
	18		expenses Add lines					28,131		29,055,126
× %	13	Keven	ue less expenses S	aptract fille 10 III	om me 12	<u> </u>				2,985,704
ည်းမှု							Beginn	ing of Current		End of Year
Not Assets or Fund Balances	20		assets (Part X, line 1					151,214	<del>`</del> +	152,487,903
5 E	21		liabilities (Part X, lin ssets or fund balance				•	23,455 127,759	_	24,222,820
	22 		ssets or fund balance	:s Subtract line 2	. I nom me 20 .			127,739	,000	120,205,083
Unde my k	er per nowle	nalties of	perjury, I declare tha belief, it is true, corr							ents, and to the best of Iformation of which
		****						2016-08-10		
Sigr		Signa	ature of officer					Date		
Her	e		Y D RILEY CFO							
			e or print name and title Print/Type preparer's nam	e Dra	parer's signature	<del></del>	Date	Charle T.	PTIN	<u> </u>
Pai	d		CRAIG KLEIN		AIG KLEIN		2016-08-10	Check if self-employed	1	734640
	u par	er 🗄	rım's name 🕨 CBIZ TO	FIAS				Firm's EIN 🕨	26-375	3134
	or	1 1	Firm's address ► 500 BOY	LSTON STREET				Phone no (61	7) 761	-0600
	- J1	,	BOSTON	, MA 02116						

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

. ▼Yes 「No

Forn	990 (2015) Pag.	e <b>2</b>
Pai	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u>₹</u> _
1	Briefly describe the organization's mission	
MAT CON MAT UND EDU FAC	SE SEE SCHEDULE O THE AMERICAN MATHEMATICAL SOCIETY, FOUNDED IN 1888 TO FURTHER THE INTERESTS OF HEMATICAL RESEARCH, SCHOLARSHIP, AND EDUCATION, SERVES THE NATIONAL AND INTERNATIONAL MATHEMATICAL MUNITY THROUGH ITS PUBLICATIONS, MEETINGS, ADVOCACY AND OTHER PROGRAMS, WHICH (A) PROMOTE HEMATICAL RESEARCH AND ITS USES, (B) ENCOURAGE AND PROMOTE THE TRANSMISSION OF MATHEMATICAL RESEARCH STANDINGS AND SKILLS TO ENSURE THE CONTINUED VITALITY OF THE PROFESSION, (C) SUPPORT MATHEMATICAL SATION AT ALL LEVELS, (D) ADVANCE THE STATUS OF THE PROFESSION OF MATHEMATICS, ENCOURAGING AND LITATING FULL PARTICIPATION OF ALL INDIVIDUALS, AND, (E) FOSTER AN AWARENESS AND APPRECIATION OF HEMATICS AND ITS CONNECTIONS TO OTHER DISCIPLINES AND EVERYDAY LIFE	
		_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
_	services?	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ 16,648,461 including grants of \$ ) (Revenue \$ 20,827,594)	
	PUBLICATION AND DISSEMINATION OF MATHEMATICAL LITERATURE, INCLUDING RESEARCH JOURNALS, BOOKS OF GENERAL MATHEMATICAL INTEREST, GRADUA AND UPPER LEVEL UNDERGRADUATE COURSE MATERIAL, PROCEEDINGS OF MEETINGS IN CURRENT TOPICAL AREAS AND HIGH LEVEL RESEARCH MONOGRAPHS AMS PUBLICATIONS ALSO INCLUDE THE MATHEMATICAL REVIEWS DATABASE, MATHSCINET, THE PREMIER MATHEMATICAL RESEARCH TOOL, CONTAINING CITATIONS AND REVIEWS OF MATHEMATICAL LITERATURE DATING BACK TO 1940, AND BIBLIOGRAPHIC ITEMS DATING BACK TO 1812 THE AMS ADDED 88,762 NEW REVIEWS TO MATHSCINET IN 2015 IN ADDITION, THE AMS PUBLISHED 25,860 PAGES OF NEW MATERIAL IN 79 NEW BOOKS ALSO, JOURNAL AND OTHER PUBLICATIONS INCLUDED 30,628 PAGES OF PUBLISHED MATERIAL	
4b	(Code ) (Expenses \$ 6,759,915 including grants of \$ 767,062 ) (Revenue \$ 661,571 )	
	MEMBERSHIP AND OUTREACH ACTIVITIES, AS WELL AS PROFESSIONAL SERVICES AND PROGRAMS FOR THE MATHEMATICAL COMMUNITY, SUCH AS EMPLOYMENT SERVICES, GRANT OR ENDOWMENT SUPPORTED CONFERENCES, SURVEYS OF THE PROFESSION, ENDOWMENT SUPPORTED PRIZES, AWARDS SCHOLARSHIPS AN FELLOWSHIPS FOR ACHIEVEMENTS IN MATHEMATICS, HIGH SCHOOL OUTREACH, PUBLIC AWARENESS, AND OTHER PROGRAMS THE SOCIETY HAS APPROXIMATE 30,000 INDIVIDUAL AND INSTITUTIONAL MEMBERS, WITH NO CRITERIA FOR MEMBERSHIP, WHO ARE SERVED THROUGH THE MEMBERSHIP PROGRAM TO SUPPORT ITS MISSION, THE SOCIETY AWARDED FELLOWSHIPS, PRIZES, AND OTHER AWARDS TO APPROXIMATELY 195 INDIVIDUALS AND ORGANIZATIONS, TOTALING MOR THAN \$767,000 THE SOCIETY ALSO RECEIVED FUNDING FROM INDIVIDUALS, FOUNDATIONS, AND FEDERAL GRANTS TO FUND EXPENSES FOR APPROXIMATELY 7 MATHEMATICIANS TO ENGAGE IN MATHEMATICAL RESEARCH AND COLLABORATION	ND ELY ORT LE
4c	(Code ) (Expenses \$ 1,268,016 including grants of \$ ) (Revenue \$ 1,298,507 )	—
	MEETINGS OF THE SOCIETY INCLUDING THE ANNUAL JOINT MATHEMATICAL MEETING HELD IN JANUARY EACH YEAR AND CO-SPONSORED WITH THE MATHEMATICAL ASSOCIATION OF AMERICA IN ADDITION, EIGHT TO NINE SECTIONAL MEETINGS ARE HELD IN FOUR REGIONS OF THE U S EACH YEAR THE JOI MATHEMATICS MEETING, HELD IN BALTIMORE, IN 2015 HAD ATTENDANCE OF 5,962 PARTICIPANTS	ίΝΤ
	See Additional Data	
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ 773,124 including grants of \$ ) (Revenue \$ 68,216)	
4e	Total program service expenses ► 25,449,516	

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Par	t IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	110
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
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 💆	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, 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 2	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI 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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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		No
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16	Yes	
	IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
	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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	206		

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? If "Yes," complete Schedule L, Part IV			
_		28a		No
	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	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part $I$ .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? 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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Pai	<b>Statements Regarding Other IRS Filings and Tax Compliance</b> Check if Schedule O contains a response or note to any line in this Pa						
	enesia ii denesiale e containe a response er note te any iine iii ane ri			Yes	No		
	· · · · · · · · · · · · · · · · · · ·		506				
		1b	0				
	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	vendors and reportable	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	2a	233				
b	If at least one is reported on line 2a, did the organization file all required federal emploisments. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (s	yment tax returns?	2b	Yes			
За	Did the organization have unrelated business gross income of \$1,000 or more during to	•	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	ın Schedule O	3b	Yes			
4a	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)?						
b	If "Yes," enter the name of the foreign country ►	and Financial Accounts					
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 ta	x 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 organization solicit any contributions that were not tax deductible as charitable contri		6a		Νo		
b	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?						
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?						
	<ul> <li>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</li> <li>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to</li> </ul>						
	file Form 8282?						
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person	al benefit contract? .	. <b>7</b> f		No		
g	If the organization received a contribution of qualified intellectual property, did the orgrequired?	anızatıon file Form 8899	as 7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, Form 1098-C?		<u> </u>				
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess busi		ie				
	during the year?		8				
	Did the sponsoring organization make any taxable distributions under section 4966?		9a	<u> </u>			
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or relate <b>Section 501(c)(7) organizations.</b> Enter	ea person?	9b				
		.0a					
		.0b					
	facilities	•					
11	Section 501(c)(12) organizations. Enter	4-					
	Gross income from members or shareholders	1a					
	· ·	1b					
	2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	.2b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Not</b> additional information the organization must report on Schedule O	t <b>e.</b> See the instructions	for <b>13a</b>				
b	Enter the amount of reserves the organization is required to maintain by the states	.3b	134				
c	,	.3c					
	Did the organization receive any payments for indoor tanning services during the tax y		14a		No		
	If "Vac " has it filed a Form 720 to report these nauments 2 if "No " provide an evaluative	C-b-d/- O	4.41				

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 8			
	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 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records ►EMILY D RILEY 201 CHARLES ST PROVIDENCE, RI 029042294 (401) 455-4000 Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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 for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	chelic Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) RUTH CHARNEY	2 00	x				8		0	0	0
(2) MARK L GREEN	2 00	х						0	0	0
TRUSTEE  (3) WILLIAM H JACO	2 00	х						0	0	0
TRUSTEE  (4) KAREN VOGTMANN  TRUSTEE	2 00	х						0	0	0
(5) DAVID A VOGAN JR PRESIDENT	20 00	х		х				0	0	0
(6) JANE M HAWKINS TREASURER	3 00	х		х				0	0	0
(7) ZBIGNIEW H NITECKI ASSOCIATE TREASURER	3 00	x		х				0	0	0
(8) JOSEPH SILVERMAN TRUSTEE	2 00	х						0	0	0
(9) ROBERT BRYANT PRESIDENT	20 00	х						30,000	0	0
(10) ROBERT K LAZARSFELD TRUSTEE	2 00	х						0	0	0
(11) CARLA SAVAGE SECRETARY	25 00			х				116,389	0	0
(12) DONALD MCCLURE  EXECUTIVE DIRECTOR	40 00			х				280,398	0	48,787
(13) EMILY RILEY CHIEF FINANCIAL OFFICER	40 00			х				161,233	0	27,198
(14) EDWARD DUNNE  EXECUTIVE EDITOR - MI	40 00				х			169,375	0	40,490
	•	•		_	_					Form <b>990</b> (2015)

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

(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- 2/1099-		(E) Reportable compensation from related organizations		(F) Estimated amount of other compensation from the organization	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W-2/10) MISC)		(W- 2/1099 MISC)	-	and re organiz	lated
(15) SAMUEL RANKIN	40 00				x			2	34,528		0		44,015
ASSOC EXEC DIR (16) ROBERT HARINGTON	40 00												
ASSOC EXEC DIR					Х			2	09,027		0		44,882
(17) T CHRISTINE STEVENS	40 00				x			1	64,910		0		14,591
ASSOC EXEC DIR	40 00							_	01,510				
(18) THOMAS BLYTHECHIEF INFORMATION OFFICER	40 00				х			1	56,723		0		38,638
(19) EROL OZIL	40 00					×		1	E1 402		0		26 459
SYSTEM SUPPORT MANAGER								1	51,403				26,458
(20) SERGEI GELFAND	40 00					x		1.	43,734		0		31,421
PUBLISHER (21) GERARD LOON	40 00												
DIRECTOR INFO SYSTEMS						Х		141,141			0		17,106
(22) ASSEN DONTCHEV	40 00					x		140,696			0		28,081
ASSOCIATE EDITOR (23) INA METTE	40 00												
SENIOR EDITOR						х		1.	34,406		0		36,469
SENTON EDITON													
1b Sub-Total			•		•	ı							
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	•		•	•	•			2,233,963		0			398,136
Total number of individuals (including b \$100,000 of reportable compensation)	ut not limited to	those			oove	e) who			than	<u> </u>		•	330,130
3 Did the organization list any <b>former</b> offi on line 1a? If "Yes," complete Schedule J			e, key	y em	ploy	/ee, o	r hıg	Jhest compe	nsate	d employee		Yes	No
4 For any individual listed on line 1a, is the organization and related organizations of individual	ne sum of report	able c								om the	3	V = -	No
5 Did any person listed on line 1a receive services rendered to the organization? I								_	n or ır	idividual for	4 5	Yes	
												•	
Section B. Independent Contracto	ors												

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	<b>(C)</b> Compensation
		_
		_

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Part V	/ • • •	Statement of						
		Check If Sched	ule O contains a respor	nse or note to any lin	e in this Part VIII (A)	(B)	(C)	
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
e e	1a	Federated cam	npaigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership di	ues <b>1b</b>	2,428,624				
وَ قِ	С	Fundraising ev	ents 1c					
ifts Paru	d	Related organi	zations 1d					
S,E	e	Government grant	ts (contributions) <b>1e</b>	1,142,633				
ioi I Si	f		ions, gifts, grants, and <b>1f</b>	2,701,081				
the the	_	similar amounts n		042.740				
å å	9	y Noncash contributions included in lines 1a-1f \$		913,749				
Cont	h	<b>Total.</b> Add line	s 1a-1f		6,272,338			
an				Business Code				
Program Service Revenue	2a   .	PUBLICATIONS		541900	20,222,514	20,222,514		
<u>æ</u>	b	MEETINGS	ITDEACH	541900	1,321,736	1,298,507	23,229	
Š	C d	SERVICES AND OU		541900 541900	661,571	661,571		
<u>%</u>	e	OTHER		900099	68,216	68,216		
<u> </u>	f		am service revenue	300033	00,210	00,210		
) နို	_				22 070 447			
	g 3		s 2a-2f		22,879,117			
		and other simil	lar amounts)	•	2,889,375			2,889,37
	4		stment of tax-exempt bond	proceeds • •				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross rents	(i) iteal	(II) I CISOIIII				
	ь	Less rental						
		expenses Rental income						
	C	or (loss)						
	a	Net rental inco	ome or (loss)  (i) Securities	<b>►</b> (II) O ther				
	7a	Gross amount from sales of assets other than inventory	7,350,000	(ii) o tilei				
	b c	Less cost or other basis and sales expenses Gain or (loss)	7,350,000					
	d	Net gain or (lo	ss)					
Other Revenue	8a	events (not inc	s reported on line 1c)					
the	 	ا حمل موم	a h					
0	b c		(penses <b>b</b> (loss) from fundraising	events 🛌				
	9a	Gross income	from gaming activities ne 19 a	ř				
	ь	Less direct ex	cpenses <b>b</b>					
	c	Net income or	(loss) from gamıng actı	vities				
	10a	Gross sales of returns and all						
	ь	Less cost of g	goods sold <b>b</b>					
	С		(loss) from sales of inv					
	44	Miscellaneou	s Revenue	Business Code				
	11a							
	b							
	C d	All other reven						
	e		s 11a-11d	🕨				
	12		See Instructions .	_  -				
	l			• • • • •	32,040,830	22,855,888	23,229	2,889,37

	art IX Statement of Functional Expenses								
Section	n 50:	1(c)(3) and 501(c)(4) organizations must complete all columns A	All other organiz	ations must com	plete column (A)				
		Check if Schedule O contains a response or note to any line in th	ıs Part IX			<u> </u>			
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses			
1		its and other assistance to domestic organizations and estic governments See Part IV, line 21	488,415	488,415					
2		its and other assistance to domestic	253,897	253,897					
3	gove	its and other assistance to foreign organizations, foreign ernments, and foreign individuals See Part IV, lines 15	,	233,037					
_		16	24,750	24,750					
4		efits paid to or for members							
5		pensation of current officers, directors, trustees, and employees	1,751,184	1,233,568	517,616				
6	(as c	pensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)	12,633,433	11,561,774	883,708	187,951			
7	Othe	er salaries and wages							
8		sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	1,291,753	1,166,026	107,250	18,477			
9		er employee benefits	2,264,164	2,030,689	220,989	12,486			
10		roll taxes	1,020,923	911,102	95,647	14,174			
11	Fees	for services (non-employees)			,	·			
а	Mana	agement							
b	Lega		7,157	3,752	1,234	2,171			
C	Acco	ounting	108,590	19,305	87,910	1,375			
d	Lobb	yying							
e	Profe	essional fundraising services See Part IV, line 17							
f	Inve	stment management fees							
g		er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)							
12	Adve	ertising and promotion	85,731	75,429		10,302			
13		e expenses							
14		rmation technology							
15		alties	449,187	449,187					
16		upancy	472,002	402,637	68,114	1,251			
17		el	730,224	483,734	231,798	14,692			
18		ments of travel or entertainment expenses for any federal, e, or local public officials							
19	Conf	erences, conventions, and meetings	1,225,670	1,225,328	337	5			
20		rest	3,750			3,750			
21	-	ments to affiliates							
22		reciation, depletion, and amortization	621,167	457,483	161,163	2,521			
23		rance	178,560	142,218	35,782	560			
24	mısc 10%	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds of line 25, column (A) amount, list line 24e expenses on edule O)							
а	оит	SIDE SERVICES	1,974,287	1,491,250	464,287	18,750			
b	PRIN	NTING/PUBLICATIONS	1,027,974	1,008,870	2,802	16,302			
c	POS	TAGE AND SHIPPING	608,315	575,120	10,315	22,880			
d	SER	VICE CONTRACTS - EQU	433,986	250,812	180,353	2,821			
е	Allo	ther expenses	1,400,007	1,194,170	189,306	16,531			
25	Tota	l functional expenses. Add lines 1 through 24e	29,055,126	25,449,516	3,258,611	346,999			
26	repo educ	t costs.Complete this line only if the organization rted in column (B) joint costs from a combined cational campaign and fundraising solicitation ck here ► ☐ if following SOP 98-2 (ASC 958-720)							

Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . . . . . . . . . . . . . (A) (B) End of year Beginning of year 1 1,022,196 1 1.018.326 Cash-non-interest-bearing . . . . . 2 Savings and temporary cash investments . . 14,933,203 2 15, 164, 171 147,057 3 3 100,985 Pledges and grants receivable, net . . . 508,695 1,049,422 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . 5 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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 8 8 Inventories for sale or use . . . . 1,194,235 1,291,914 9 2,141,470 9 2,448,614 Prepaid expenses and deferred charges . . . . 10a Land, buildings, and equipment cost or other basis 14,384,529 Complete Part VI of Schedule D 10a 10b 10,004,679 4.449.507 10c 4,379,850 b Less accumulated depreciation . 126.818.565 127.034.621 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . 14 14 15 15 Other assets See Part IV, line 11 . . . . . . Total assets.Add lines 1 through 15 (must equal line 34) . . 151,214,928 16 152,487,903 16 4.595.550 **17** 4.288.374 **17** Accounts payable and accrued expenses . 18 18 Grants payable 11,451,092 19 19 12,613,091 20 Tax-exempt bond liabilities . . . . 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . \_iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 7,408,478 25 7,321,355 23,455,120 24.222.820 26 26 **Total liabilities.**Add lines 17 through 25 . . . . Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. 27 111,171,200 27 111,903,368 Unrestricted net assets . . . . . . 28 11,050,480 28 10,665,546 Temporarily restricted net assets . . . . . . 5.538.128 5.696.169 29 29 Permanently restricted net assets . . . . . . . . . Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 

and complete lines 30 through 34. Net Assets or 30 30 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds 33 127,759,808 128,265,083 Total net assets or fund balances 33 Total liabilities and net assets/fund balances . . . . . . . . . . . 152,487,903 151.214.928 34

Pai	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		32,0	040,830
2	Total expenses (must equal Part IX, column (A), line 25)				
_		2		29,0	055,126
3	Revenue less expenses Subtract line 2 from line 1	3		2,9	985,704
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		127	750 000
5	Net unrealized gains (losses) on investments	4		127,	759,808
J	Net difficultied gams (1055e5) of five stiffenes	5		-2,6	574,364
6	Donated services and use of facilities	6			
7	Investment expenses				
		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Not accept as find belonged at and of year Combine lines 2 through 0 (must equal Dart V line 22	9		:	193,935
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		128,	265,083
Par	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·	<u> </u>	Yes	. I No
				163	NO
1	Accounting method used to prepare the Form 990	_			
	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 a separate basis, consolidated basis, or both	reviewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
U	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a	senarate	20	res	
	basis, consolidated basis, or both	эсрагасс			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsight			
	of the audit, review, or compilation of its financial statements and selection of an independent accoun	tant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O	ain in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ın the			
	Single Audit Act and OMB Circular A-133?	* • •	За	Yes	
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	Yes	

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

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

(Code ) (Expenses \$ 773,124 including grants of \$ ) (Revenue \$ 68,216)

GOVERNMENT RELATIONS IS A DIVISION OF THE SOCIETY WHICH MAINTAINS CONTACT WITH OTHER PROFESSIONAL SCIENTIFIC ORGANIZATIONS AS WELL AS AGENCIES AND INDIVIDUALS IN THE GOVERNMENT WHOSE PURPOSE IS TO SUPPORT SCIENCE AND MATHEMATICAL RESEARCH AND EDUCATION THE OFFICE PROVIDES INFORMATION BOTH TO THE GOVERNMENT ABOUT ISSUES RELATED TO SCIENCE AND MATHEMATICAL RESEARCH AND EDUCATION, AS WELL AS TO THE MATHEMATICAL COMMUNITY ABOUT THE GOVERNMENT'S EFFORTS AND INITIATIVES IN THESE AREAS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228016396

**Employer identification number** 

OMB No 1545-0047

# **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

AMERICAN MATHEMATICAL SOCIETY

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection

							05-0264797			
Pa	rt I	Reason for Publi	ic Charity S	<b>Status</b> (All organiza	itions must co	mplete this i	part.) See instructio	ns.		
The	organı	zation is not a private f	oundation bec	auseıtıs (Forlines 1	through 11, ch	eck only one b	ox)			
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n <b>section 170(</b>	b)(1)(A)(i).			
2	$\sqcap$	A school described in	section 170(b	<b>)(1)(A)(ii).</b> (Attach So	chedule E (Form	n 990 or 990-E	EZ))			
3	$\Gamma$	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	$\Gamma$	A medical research or	rganızatıon ope	erated in conjunction v	vith a hospital d	lescribed in <b>se</b>	ction 170(b)(1)(A)(iii	<b>).</b> Enter the		
	_	hospital's name, city,								
5	 	An organization opera <b>170(b)(1)(A)(iv).</b> (C		_	iversity owned	or operated by	a governmental unit d	escribed in <b>section</b>		
6		A federal, state, or loc	al governmen	t or governmental unit	described in <b>s</b> e	ection 170(b)(	1)(A)(v).			
7	Г	An organization that n				om a governme	ental unit or from the g	eneral public		
8	Г	described in <b>section 1</b> A community trust de			-	tII)				
9	<u></u>	An organization that i	normally recei	ves (1) more than 33	1/3% of its sup	port from contr	ributions, membership	fees, and gross		
		•		•	-		and (2) no more than :			
							.1 tax) from businesse	s acquired by the		
10	Г	An organization organ		see <b>section 509(a)(2).</b> Sted exclusively to tes			n 509(a)(4).			
11	Ĺ.	An organization organ	•	•	•	•		ut the purposes of		
		one or more publicly s								
	_	the box in lines 11a th								
а	ı	Type I. A supporting of								
		supported organizatio organization <b>You mus</b>				ty of the direct	ors or trustees of the	supporting		
b	Г	Type II. A supporting				with its suppo	orted organization(s), b	y having control or		
	·	management of the su								
	_	must complete Part I								
С	ı	Type III functionally supported organization						grated with, its		
d	Г	Type III non-function						anization(s) that is		
_	'	not functionally integr			•					
	_	(see instructions) <b>Yo</b>								
e	ı	Check this box if the					s a Type I, Type II, T	ype III functionally		
f	Ento	integrated, or Type II r the number of support								
g g	Liite	Provide the following i					· · · · · · · · —			
9		Trovide the following i	mormation ab	out the supported orge	11112411011(3)					
		(i)	(ii)EIN	(iii)	(iv)		(v)	(vi)		
Nan	ne of s	supported organization	(,	Type of	Is the organ		A mount of	A mount of other		
				organization	listed in your		monetary support	support (see		
				(described on lines	docume	ent?	(see instructions)	instructions)		
				1- 9 above (see instructions))						
					Yes	No				
Teta										
Tota										

	rt II Support Schedule for (Complete only if you Part III. If the organization	checked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiz	ation failed to c	ualify under
S	ection A. Public Support						
	Calendar year	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	<b>(e)</b> 2015	(f)Total
	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do	(-,	(-,===	(9,2323	(4,232)	(3,2323	(1)/1000
2	not include any unusual grants ) Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
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						
6	(f) <b>Public support.</b> Subtract line 5  from line 4						
Se	ection B. Total Support		Γ	1	T		Γ
(or	Calendar year fiscal year beginning in) 🕨	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
7	Amounts 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 activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
	ection C. Computation of Pul			4 4 1 700			
14	Public support percentage for 201			e 11, column (f))		14	
15	Public support percentage for 201	•	*			15	
	33 1/3% support test—2015. If the and stop here. The organization quasi 1/3% support test—2014. If the box and stop here. The organizatio	alıfıes as a publıc organızatıon dıd	ly supported orgonot check a box	anızatıon on lıne 13 or 16a			<b>▶</b> ┌
	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me organization	— <b>2015.</b> If the organtion meets the facts the "facts-an	anization did not icts-and-circums d-circumstances	check a box on lii tances test, chec " test The organ	ck this box and <b>st</b> ization qualifies a	op here. Explain is a publicly supp	. ,
18	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization Private foundation. If the organizations	nization meets th ition meets the "f	e "facts-and-circ acts-and-circum	umstances" test stances" test Th	c, check this box ane organization qu	and <b>stop here.</b> Jalifies as a public	:ly ▶┌

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.)

Se	ction A. Public Support	•						
	Calendar year	(2)2011	<b>(b)</b> 2012	(a)2012	(d)2014	(0)201	_	( <b>6)</b> Total
(or f	iscal year beginning in) 🟲	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 201	2	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,593,131	3,633,274	4,902,889	4,581,648	6,2	72,338	22,983,280
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	21,910,586	22,431,481	22,224,687	22,849,699	22,8	55,888	112,272,341
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	Total. Add lines 1 through 5	25,503,717	26,064,755	27,127,576	27,431,347	29,12	28,226	135,255,621
	Amounts included on lines 1, 2, and 3 received from disqualified persons	3,980	5,390	7,506	11,445		9,630	37,951
b	A mounts 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	3,980	5,390	7,506	11,445		9,630	37,951
8	Public support. (Subtract line 7c			,				135,217,670
	from line 6 )							133,217,070
Se	ction B. Total Support							
	ction B. Total Support  Calendar year	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 201	5	<b>(f)</b> Total
(or f	ction B. Total Support  Calendar year iscal year beginning in) ▶							
(or f	ction B. Total Support  Calendar year iscal year beginning in)  Amounts from line 6	(a)2011 25,503,717	<b>(b)</b> 2012 26,064,755	(c)2013 27,127,576	( <b>d)</b> 2014 27,431,347		5 28,226	<b>(f)</b> T otal 135,255,621
(or f	Ction B. Total Support  Calendar year iscal year beginning in) ►  A mounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from					29,12		
(or f	Ction B. Total Support  Calendar year iscal 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	25,503,717	26,064,755	27,127,576	27,431,347	29,12 2,88	28,226	135,255,621
(or f 9 10a	Ction B. Total Support  Calendar year iscal 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	25,503,717 2,279,581	26,064,755 3,342,514	27,127,576 2,010,166	27,431,347 3,588,750	29,12 2,88	28,226 89,375	135,255,621 14,110,386
(or f 9 10a	Calendar year iscal 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	25,503,717 2,279,581 21,502	26,064,755 3,342,514 22,963	27,127,576 2,010,166 17,673	27,431,347 3,588,750 19,401	29,12 2,88	28,226 89,375 21,361	135,255,621 14,110,386 102,900
(or f 9 10a b	Calendar year iscal 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	25,503,717 2,279,581 21,502	26,064,755 3,342,514 22,963	27,127,576 2,010,166 17,673	27,431,347 3,588,750 19,401	29,12 2,88	28,226 89,375 21,361	135,255,621 14,110,386 102,900
(or f 9 10a b	Calendar year  iscal 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	25,503,717 2,279,581 21,502	26,064,755 3,342,514 22,963	27,127,576 2,010,166 17,673	27,431,347 3,588,750 19,401	29,12 2,88	28,226 89,375 21,361	135,255,621 14,110,386 102,900
(or f 9 10a b	Calendar year  iscal 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,	25,503,717 2,279,581 21,502	26,064,755 3,342,514 22,963	27,127,576 2,010,166 17,673	27,431,347 3,588,750 19,401	29,12	28,226 89,375 21,361	135,255,621 14,110,386 102,900 14,213,286
(or f 9 10a b c 11	Calendar year  iscal 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	25,503,717 2,279,581 21,502 2,301,083 27,804,800	26,064,755 3,342,514 22,963 3,365,477	27,127,576 2,010,166 17,673 2,027,839	27,431,347 3,588,750 19,401 3,608,151 31,039,498	29,12	28,226 89,375 21,361 10,736	135,255,621 14,110,386 102,900 14,213,286
(orf 9 110a b c 111 12 13 14	Calendar year  iscal 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	25,503,717 2,279,581 21,502 2,301,083 27,804,800 for the organizati	26,064,755  3,342,514  22,963  3,365,477  29,430,232 on's first, second	27,127,576 2,010,166 17,673 2,027,839	27,431,347 3,588,750 19,401 3,608,151 31,039,498	29,12	28,226 89,375 21,361 10,736	135,255,621 14,110,386 102,900 14,213,286
(or f 9 110a b c 111 12	Calendar year  iscal 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	25,503,717  2,279,581  21,502  2,301,083  27,804,800  for the organizati	26,064,755  3,342,514  22,963  3,365,477  29,430,232 on's first, second	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or four	27,431,347 3,588,750 19,401 3,608,151 31,039,498	29,12	28,226 89,375 21,361 10,736	135,255,621  14,110,386  102,900  14,213,286  149,468,907 ) organization,
(or f 9 110a b c 111 12 13 14 See 15	Calendar year  iscal 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 Pu Public support percentage for 201	25,503,717  2,279,581  21,502  2,301,083  27,804,800  for the organizati  blic Support P  5 (line 8, column	26,064,755  3,342,514  22,963  3,365,477  29,430,232  on's first, second  ercentage  (f) divided by line	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or four	27,431,347 3,588,750 19,401 3,608,151 31,039,498	29,12 2,88 2,99 32,00 section 50	28,226 89,375 21,361 10,736	14,110,386  102,900  14,213,286  149,468,907 ) organization,
(or f 9 110a b c 111 12 13 14 See 15 16	Calendar year  iscal 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 Pu  Public support percentage from 201	25,503,717  2,279,581  21,502  2,301,083  27,804,800  for the organizati  blic Support P  5 (line 8, column ) 14 Schedule A, F	26,064,755  3,342,514  22,963  3,365,477  29,430,232  on's first, second  ercentage (f) divided by line Part III, line 15	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or the second se	27,431,347 3,588,750 19,401 3,608,151 31,039,498	29,12 2,86 2,92 32,03 32,03 1 section 5 0	28,226 89,375 21,361 10,736	135,255,621  14,110,386  102,900  14,213,286  149,468,907 ) organization,
(or f 9 110a b c 11 12 13 14 See 15 16 See	Calendar year  iscal 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 Pu  Public support percentage from 20  Ction D. Computation of Invented in the sale of capital assets of the sale of capital assets of 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 Pu  Public support percentage from 20  Ction D. Computation of Invented in the sale of capital assets of the sale of c	25,503,717  2,279,581  21,502  2,301,083  27,804,800  for the organizati  blic Support P  5 (line 8, column )14 Schedule A, F  vestment Inco	26,064,755  3,342,514  22,963  3,365,477  29,430,232 on's first, second ercentage (f) divided by line eart III, line 15 ome Percenta	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or the second se	27,431,347 3,588,750 19,401 3,608,151 31,039,498 fifth tax year as a	29,12 2,86 2,92 32,03 section 5 0	28,226 89,375 21,361 10,736	14,110,386  102,900  14,213,286  149,468,907 ) organization,  90 470 % 90 190 %
(or f 9 110a b c 111 12 13 14 See 15 16 See 17	Calendar year  iscal 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 Pu Public support percentage for 201 Public support percentage from 20  ction D. Computation of Inv Investment income percentage for	25,503,717  2,279,581  21,502  2,301,083  27,804,800  for the organizati  blic Support P 5 (line 8, column 0.14 Schedule A, F vestment Incompany 10, column 0.14 Schedule A, F vestment Incompany 10, column 0.14 Schedule A, F	26,064,755  3,342,514  22,963  3,365,477  29,430,232  on's first, second  ercentage (f) divided by line Part III, line 15  ome Percenta column (f) divided	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or the second of	27,431,347 3,588,750 19,401 3,608,151 31,039,498 fifth tax year as a	29,12 2,88 2,99 32,00 section 50 15 16	28,226 89,375 21,361 10,736	14,110,386  102,900  14,213,286  149,468,907  organization,  90 470 % 90 190 %  9 510 %
(or f 9 10a b c 111 12 13 14 See 15 16 See 17 18	Calendar year  iscal 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 Pu  Public support percentage from 20  Ction D. Computation of Invented in the sale of capital assets of the sale of capital assets of 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 Pu  Public support percentage from 20  Ction D. Computation of Invented in the sale of capital assets of the sale of c	25,503,717  2,279,581  21,502  2,301,083  27,804,800 for the organizati  blic Support P 5 (line 8, column 0.14 Schedule A, F vestment Income 2015 (line 10 c, come 2014 Schedule 10 c, come 2014 Sch	26,064,755  3,342,514  22,963  3,365,477  29,430,232  on's first, second  ercentage (f) divided by line Part III, line 15  ome Percenta  olumn (f) divided A, Part III, line 1	27,127,576  2,010,166  17,673  2,027,839  29,155,415 , third, fourth, or the second of	27,431,347 3,588,750 19,401 3,608,151 31,039,498 fifth tax year as a	29,12 2,86 2,92 2,92 32,02 32,02 15 16 17 18	28,226 89,375 21,361 10,736 38,962 01(c)(3	14,110,386  102,900  14,213,286  149,468,907  ) organization,  90 470 % 90 190 %  9 510 % 9 780 %

b 33 1/3% support tests—2014. 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

<sup>18</sup> is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 20 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)

Se	ction	Δ ΔΙ	Sunna	rtina	Orgai	nizations
Je	CUUII	A. A.	Subbl	, unu	Oluai	IIIZativiis

	··		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 $(2)^2$ 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.	3a		
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?	3с		
<b>4</b> a	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.  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 $(2)$ ?			
	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		
5 <b>a</b>	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? If "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		
10a	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		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	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		
	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		

Pai	Supporting Organizations (continued)			
Se	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.	2		
Se	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		
Se	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?	1		
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		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
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 <b>Part VI identify those supported organizations and explain</b> 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		
Ŀ	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	Parent of Supported Organizations Answer (a) and (b) below.			
	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? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

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

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	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		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	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)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
<b>i</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	· · · · · · · · · · · · · · · · · · ·
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp			
4 A mounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
<b>d</b> From 2013			
e From 2014			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<ul> <li>Carryover from 2010 not applied (see instructions)</li> </ul>			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			

### Part VI 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	Circum	stances	Test
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Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2015

DLN: 93493228016396

05-0264797

# **SCHEDULE C**

(Form 990 or 990-EZ)

AMERICAN MATHEMATICAL SOCIETY

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

**Inspection** 

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** 

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the or	ganızatıon's dırect and ındırect po	lıtıcal campaıgn act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
ar	t I-B Complete if the or	ganization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization	under section 4955	5	\$
2	Enter the amount of any excis	e tax incurred by organization mai	nagers under sectio	n 4955 <b>&gt;</b>	\$
3	If the organization incurred a s	┌ Yes ┌ No			
la	Was a correction made?				┌ Yes ┌ No
Ь	If "Yes," describe in Part IV				
ar	t I-C Complete if the or	ganization is exempt und	er section 501(	c), except section 50	1(c)(3).
L	Enter the amount directly expe	ended by the filing organization foi	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	o other organization	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b ►	\$
1	Did the filing organization file <b>F</b>	orm 1120-POL for this year?			⊤ Yes
	separate segregated fund or a	ns received that were promptly an political action committee (PAC)	If additional space	e is needed, provide informa	tion in Part IV
	(a) Name	( <b>b)</b> A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
_					
or F	Paperwork Reduction Act Notice, s	l ee the instructions for Form 990 or 9	990-EZ.	 Cat No 50084S <b>Schedule C (</b>	Form 990 or 990-EZ) 2015

ŀ	e C (Form 990 or 990-EZ) 2015						Page <b>2</b>
1	CI-A Complete if the organization is under section 501(h)).	exempt under	section 501(	c)(3) and f	ilec	l Form 5768	(election
c	ck 🕨 🗆 if the filing organization belongs to an af		list in Part IV ea	ch affiliated g	roup	member's name	e, address, EIN,
c	expenses, and share of excess lobbying ck		l" provisions app	olv			
	Limits on Lobbying			·· /		(a) Filing	(b) Affiliated
	(The term "expenditures" means					organization's totals	group totals
	al lobbying expenditures to influence public opinions bying)	on (grass roots					
	oring) al lobbying expenditures to influence a legislative	e body (direct lobb	yıng)				
t	al lobbying expenditures (add lines 1a and 1b)						
h	ner exempt purpose expenditures						
t	al exempt purpose expenditures (add lines 1c and	d 1d)					
b	bying nontaxable amount Enter the amount from	the following table	ın both columns				
t	he amount on line 1e, column (a) or (b) is:	e lobbying nontaxal	ole amount is:				
t	over \$500,000 20°	% of the amount on li	ne 1e				
_	r \$500,000 but not over \$1,000,000 \$1	00,000 plus 15% of the	e excess over \$500 (	000			
		75,000 plus 10% of the	<u> </u>				
		, ·		<u></u>			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000							
_	h \$17,000,000 \$1,	,000,000					
a	ssroots nontaxable amount (enter 25% of line 1f	·)					
h	otract line 1g from line 1a  If zero or less, enter -0	) <b>-</b>					
b	otract line 1f from line 1c If zero or less, enter -0	-					
	here is an amount other than zero on either line 1  orting section 4911 tax for this year?	h or line 11, did the	organization file	Form 4720			
,,	orting section 4911 tax for this year?		Г	Yes	_ N	o	
			<u>'</u>		,		
	4-Year Aver	aging Period U	Inder section	501(h)			
	(Some organizations that made a sec	tion 501(h) el	ection do not	have to co			e five
	columns below. See the	separate instr	uctions for li	nes 2a thro	oug	h 2f.)	
	Lobbying Expend	itures During	4-Year Avera	ging Perio	d		
	Calendar year (or fiscal year beginning in)	(a)2012	<b>(b)</b> 2013	<b>(c)</b> 2014		<b>(d)</b> 2015	(e) Total
2	bbying nontaxable amount						
_	, , ,				$\dashv$		
	bbying ceiling amount						
_	50% of line 2a, column(e))				$\dashv$		
o	otal lobbying expenditures						
_					十		
r	assroots nontaxable amount						
0	50% of line 2a, column(e)) stal lobbying expenditures						

Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

	rt II-B Complete if the organization is exempt under section 501(c)(3) and ha filed Form 5768 (election under section 501(h)).	s NOT		<u></u>	age 3
			a)	(b)	)
activ	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.		No	Amou	ınt
		Yes	'.		
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum,				
	through the use of				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
C	Media advertisements?		No		
d	Mailings to members, legislators, or the public?	Yes			30,68
e	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			143,20
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes			30,68
i	O ther activities?		No		
j	Total Add lines 1c through 1i				204,58
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c	)(5), o	r sectio	on
	301(0)(0).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	+
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	+
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c	)(5), o	r section	on
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere				
_	line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
•	Current year	2a	İ		
a b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ss			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	group list)	, Part II	A, lines	1 and
2 (	see instructions), and Part II-B, line 1 Also, complete this part for any additional information				
	Return Reference Explanation				
PAR	T II-B, LINE 1 THE AMERICAN MATHEMATICAL SOCIETY MAINTAINS AN OFF	ICE OF G	OVERNI	MENTAL	
	AFFAIRS IN WASHINGTON, DC WITH TWO STAFF MEMBERS TH				
	OFFICE IS TO (1) STAY ABREAST OF EVENTS, LEGISLATION, A				
	IMPACT THE SCIENCES IN GENERAL, IN AREAS OF EDUCATIO				
	OTHER, (2) TO ACT AS A RESOURCE TO THE GOVERNMENT IN SCIENTIFIC EDUCATION OR RESEARCH OR THE IMPORTANCE				
	TO PROVIDE INFORMATION TO THE MEMBERSHIP AND THE WI				(-)
	COMMUNITY ABOUT GOVERNMENT INITIATIVES AND POLICIES THE AMS EDUCATES THE				

MATHEMATICAL COMMUNITY ABOUT THE GOVERNMENT AND THE VARIOUS GROUPS WITHIN THE GOVERNMENT THE AMS LOBBIES REGARDING THE FUNDING LEVELS OF THE VARIOUS GOVERNMENTAL AGENCIES THAT SUPPORT THE MATHEMATICAL COMMUNITY, SUCH AS THE NATIONAL SCIENCE FOUNDATION THE AMS HAS ALSO ENGAGED IN DIRECT

LOBBYING REGARDING LEGISLATION AFFECTING MATHEMATICAL PUBLISHING

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DLN: 93493228016396

OMB No 1545-0047

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	me of the organization		Empl	oyer identification number
ME	RICAN MATHEMATICAL SOCIETY		05-0	264797
Ра		Advised Funds or Other Similar Fed "Yes" on Form 990, Part IV, line 6.		
	Total number at end of year	(a) Donor advised funds	(b)	Funds and other accounts
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor a funds are the organization's property, subject to t		nor advis	sed Yes No
	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			purpose <b>Yes No</b>
a	rt III Conservation Easements. Comple	ete if the organization answered "Yes" o	on Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by th  Preservation of land for public use (e.g., recre  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization leasement on the last day of the tax year	ation or education)  Preservation of a	certified	cally important land area historic structure of a conservation
	easement on the last day of the tax year			Held at the End of the Year
a	Total number of conservation easements		2a	
)	Total acreage restricted by conservation easeme	nts	2b	
	Number of conservation easements on a certified	historic structure included in (a)	2c	
I	Number of conservation easements included in (c historic structure listed in the National Register	e) acquired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, training tax year ▶	nsferred, released, extinguished, or terminat	ed by the	e organization during the
	Number of states where property subject to cons	ervation easement is located ►		
	Does the organization have a written policy regar violations, and enforcement of the conservation e		idling of	┌ Yes ┌ No
	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing cons	ervation easements during the
	<b>*</b>			
	A mount of expenses incurred in monitoring, inspe	ecting, handling of violations, and enforcing c	conserva	tion easements during the year
	Does each conservation easement reported on lin (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17	0(h)(4)
	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		
Ğ	TIII Organizations Maintaining Collec	tions of Art, Historical Treasures,	or Oth	er Similar Assets.
	Complete if the organization answere	ed "Yes" on Form 990, Part IV, line 8.		
	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foots	assets held for public exhibition, education,	or resea	arch in furtherance of public
)	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
(	i) Revenue included on Form 990, Part VIII, line 1	L	<b>►</b> \$_	
(i	i) Assets included in Form 990, Part X		<b>►</b> \$	
	If the organization received or held works of art, he following amounts required to be reported under S			ial gain, provide the
1	Revenue included on Form 990, Part VIII, line 1			<b>▶</b> - \$

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

Par	(continued)	g Collections of	Art, His	torical	Treas	sures, or	Oth	er Similar A	ssets	
3	Using the organization's acquisition, ac collection items (check all that apply)	cession, and other re	ecords, ch	eck any	of the fo	ollowing tha	t are	a significant us	e of its	
а	Public exhibition		d	┌ Loa	an or ex	change pro	gram	ıs		
b	Scholarly research		e	┌ ot	her					
С	Preservation for future generations									
4	Provide a description of the organization	n's collections and ex	xplaın how	they fur	ther the	e organizati	on's (	exempt purpose	ın	
	Part XIII									
5	During the year, did the organization so assets to be sold to raise funds rather t							mılar <b>🕝 Yes</b>	┌ No	
Pai	Complete if the organization Part X, line 21.		on Form 9	990, Par	t IV, lı	ne 9, or r	epor	ted an amour	nt on Fori	n 990,
La	Is the organization an agent, trustee, cu included on Form 990, Part X?	ıstodıan or other ınte	ermediary	for contr	butions	s or other a	ssets	s not <b>Yes</b>	┌ No	
b	If "Yes," explain the arrangement in l	Part XIII and comple	ete the foll	owing tal	ble		Γ	Am	ount	
c	Beginning balance					1	Lc			
d	Additions during the year					1	Ld			
e	Distributions during the year					1	Le l			
f	Ending balance					<b>⊢</b>	Lf			
2a	Did the organization include an amount	on Form 000 Bart V	lina 21 f	or ocero	w or cue			Lability 2 <b>Ves</b>	No	
b Pa	If "Yes," explain the arrangement in Pai									Г
		(a)Current year	( <b>b)</b> Prior			vo years back	<del></del>	Three years back	(e)Four ye	ears back
.a	Beginning of year balance	125,950,063	114	4,540,023		93,592,283	3	81,005,555	7	9,253,08
b	Contributions	2,648,873	;	2,252,727		1,980,666	5	2,253,825		4,112,08
С	Net investment earnings, gains, and losses	213,824	1:	1,513,778		20,945,637	7	12,560,503		-222,060
d	Grants or scholarships									
е	Other expenditures for facilities and programs	2,520,618	;	2,356,465		1,978,563	3	2,227,600		2,137,550
f	Administrative expenses									
g	End of year balance	126,292,142	12!	5,950,063		114,540,023	3	93,592,283	8	1,005,55
2	Provide the estimated percentage of the	current year end ba	ılance (lıne	e 1g, col	L umn (a)	) held as				
а	Board designated or quasi-endowment		•							
b	Permanent endowment ► 4 510 %									
	r ermanent endowment <b>F</b>	6 980 %								
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c									
За	Are there endowment funds not in the po	•		hat are h	neld and	l admınıste	red fo	or the		
	organization by  (i) unrelated organizations							3-	Yes	No No
	•					•			(ii)	No
ь	(ii) related organizations If "Yes" on 3a(ii), are the related organi								8b	
	Describe in Part XIII the intended uses	-				- ·			I	
	t VI Land, Buildings, and Equi									
	Complete if the organization		Form 99	90, Part	IV, lın	e 11a.Se	e For			
	Description of property			(a) st or other (investmer		<b>(b)</b> Cost or other l (other)	basıs	Accumulated (c) depreciation	( <b>d)</b> Boo	ok value
La	Land					422	,507			422,507
b	Buildings					7,847	,598	6,037,82	29	1,809,769
С	Leasehold improvements									
d	Equipment					5,381	.,785	3,714,01	.3	1,667,772
_						722		252.05	_	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

4,379,850

Part VII	See Form 990, Part X, line 12.				
	(a) Description of security or category		( <b>b)</b> Book value	(c)Method of valua	
(1)Financia	(including name of security) al derivatives			Cost or end-of-year ma	rket value
	-held equity interests				
<b>(3)</b> 0 ther					
	Investments—Program Related.	<u>* </u>			
Pait VIII	Complete if the organization answered	d 'Yes' on Form 99	0, Part IV, line 11c. <sub>S</sub>	ee Form 990. Part X. line	13.
	(a) Description of investment		(b) Book value	(c) Method of valua	tıon
				Cost or end-of-year mar	ket value
	nn (b) must equal Form 990, Part X, col (B) line 13 )	<b>▶</b>	5 000 B 17V I	1116 5 000 0 1 1 1	
	Other Assets. Complete if the organization	on answered 'Yes' or	Form 990, Part IV, line		
		on answered 'Yes' or	n Form 990, Part IV, line	11d See Form 990, Part X, III  (b) Book value	
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
Total. (Colum Part IX	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	n Form 990, Part IV, line		
	Other Assets. Complete if the organization	on answered 'Yes' or	Form 990, Part IV, line		
Part IX	Other Assets. Complete if the organization	on answered 'Yes' or ription	Form 990, Part IV, line	(b) Book value	
Part IX	Other Assets. Complete if the organization (a) Described (	on answered 'Yes' or ription		(b) Book value	
Total. (Colu.	Other Assets. Complete if the organization (a) Described (	n answered 'Yes' or ription  15.)  anization answere	· · · · · · · · · · · · · · · · · · ·	(b) Book value	
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.	on answered 'Yes' or ription	· · · · · · · · · · · · · · · · · · ·	(b) Book value	
Total. (Colu.	mn (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability	n answered 'Yes' or ription  15.)  anization answere	· · · · · · · · · · · · · · · · · · ·	(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	mn (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability	n answered 'Yes' or ription  15.)  anization answere	· · · · · · · · · · · · · · · · · · ·	(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal Incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X  1. Federal incomp	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	n answered 'Yes' or ription  15.)  anization answere		(b) Book value	
Total. (Column Part X 1.  Federal Incomposition of the column part X 1.	The man (b) must equal Form 990, Part X, col.(B) line  Other Liabilities. Complete if the org See Form 990, Part X, line 25.  (a) Description of liability  ome taxes	anization answere  (b) Book val		(b) Book value	

	(		. agc .
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	29,560,401
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments   2a   -2,674,364		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-2,480,429
3	Subtract line <b>2e</b> from line <b>1</b>	3	32,040,830
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	32,040,830
Par	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per audited financial statements	1	29,055,126
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII).............. 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	29,055,126
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)...............4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	29,055,126

## Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART V, LINE 4	THE INCOME FROM ENDOWMENT FUNDS FROM DONORS IS USED FOR SPECIFIC PURPOSES, SUCH AS PRIZES, LECTURES, SCHOLARSHIPS, GRANTS AND OUTREACH PROJECTS THE MAJORITY OF THE ENDOWMENT FUNDS ARE BOARD-DESIGNATED FUNDS THESE FUNDS INCLUDE (1) THE JOURNAL ARCHIVE FUND, WHICH PROVIDES FUNDING FOR THE SOCIETY TO CHANGE ITS ARCHIVAL FORMATTING OF ITS PUBLICATION WHEN REQUIRED IN THE FUTURE, (2) THE YOUNG SCHOLARS FUND, WHICH PROVIDES SUPPORT TO SUMMER MATH CAMPS FOR TALENTED YOUNG STUDENTS, (3) THE OPERATING SUPPORT FUND, WHICH SUPPORTS THE OPERATING ACTIVITIES OF THE SOCIETY, (4) THE ECONOMIC STABILIZATION FUND, WHICH IS A TRUE RESERVE FUND FOR THE SOCIETY TO USE SHOULD ECONOMIC EMERGENCIES ARISE, (5) THE BACKFILE DIGITIZATION FUND, WHICH PROVIDES FUNDS FOR THE DIGITIZATION OF THE SOCIETY'S BOOKS, (6) THE ENDOWMENT INCOME STABILIZATION FUND, WHICH SUPPORTS ENDOWED PROGRAMS WHEN ENDOWMENT INCOME FALLS SHORT OF AMOUNTS NEEDED
PART X, LINE 2	THE SOCIETY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS THE SOCIETY HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AND ITS DETERMINATIONS TO CLASSIFY INCOME AS RELATED AND UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITIONS, HOWEVER, THE SOCIETY HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION THE SOCIETY IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION THE SOCIETY'S FEDERAL AND STATE TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED
PART XI, LINE 2D - OTHER ADJUSTMENTS	POSTRETIREMENT BENEFIT CHANGES 247,745 DEPRECIATION OF LABOR FOR IN HOUSE SOFTWARE DEVELOPMENT -53,810

Part XIII Supplemental Information (continued)						
Return Reference	Explanation					

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228016396

SCHEDULE F (Form 990)

## **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. 2015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.

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

Open to Public Inspection

**Employer identification number** 

AMER	ICAN MATHEMATICAL SOCIE	TY			05-0264797	
Par	General Information Complete if the organi				14b.	
	For grantmakers. Does the cand other assistance, the graused to award the grants or a	ntees' eligibili	ty for the grar	its or assistance, and	the selection criteria	✓ Yes
	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its grant	s and other
3 .	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace is needed )	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	See Add'l Data					
( 2)						
(3)						
(4)						
(5)						
3a	Sub-total	0	2			63,778
	Total from continuation sheets to Part I	0	0			0
С	<b>Totals</b> (add lines 3a and 3b)	0	2			63,778

0

L (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) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
(1)								
( 2)								
(3)								
(4)								

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 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. (b) Region (a) Type of grant or (c) Number of (d) A mount of (e) Manner of cash (f) Amount of (g) Description (h) Method of assistance of non-cash valuation recipients cash grant disbursement non-cash assistance assistance (book, FMV, appraisal, other) (1) RESEARCH PRIZE 5,000 WIRE TRANSFER EUROPE 1 (INCLUDING ICELAND & GREENLAND) (2) RESEARCH PRIZE 1 5,000 CHECK EUROPE (INCLUDING ICELAND & GREENLAND) (3) RESEARCH PRIZE 1 250 CHECK EUROPE (INCLUDING ICELAND & GREENLAND) (4) RESEARCH PRIZE EUROPE 1 1,000 CHECK (INCLUDING ICELAND & GREENLAND) (5) RESEARCH PRIZE 1,000 WIRE TRANSFER EAST ASIA AND THE 1 PACIFIC (6) RESEARCH PRIZE EAST ASIA AND THE 1 500 CHECK PACIFIC (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

# Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	ত	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>~</u>	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)	Г	Yes	IZ	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)	Γ	Yes	<u>~</u>	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)	Γ	Yes	দ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	<b>অ</b>	Yes	Г	No

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 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	THE AMERICAN MATHEMATICAL SOCIETY AWARDS VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND COLLABORA TE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONITORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLAN S FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER, A REPORT ON THE USE OF THE FUNDS IS ALSO REQUIRED THE A PPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WOR K OR RESEARCH RESULTS THAT HAVE ALREADY BEEN COMPLETED

### **Additional Data**

Software ID: Software Version:

**EIN:** 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

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
NORTH AMERICA	0	0	GRANTMAKING		5,400
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		12,450
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		4,000

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	0	GRANTMAKING					
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		2,900			
EUROPE (INCLUDING ICELAND & GREENLAND)	0	2		SALES - MATH PUBLICATIONS	39,028			

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						
NORTH AMERICA	0	0		SALES - MATH PUBLICATIONS							
SUB-SAHARAN AFRICA	0	0		SALES - MATH PUBLICATIONS							
EAST ASIA AND THE PACIFIC	0	0		SALES - MATH PUBLICATIONS							

Form 990 Schedule Fil	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	0		SALES - MATH PUBLICATIONS							
SOUTH ASIA	0	0	l	SALES - MATH PUBLICATIONS	_						
SOUTH AMERICA	0	0		SALES - MATH PUBLICATIONS							

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						
RUSSIA AND NEIGHBORING STATES	0	0		SALES - MATH PUBLICATIONS							

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

(Form 990)

Department of the

Internal Revenue Service Name of the organization

Treasury

DLN: 93493228016396 OMB No 1545-0047

Open to Public

Employer identification number

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

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

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

Attach to Form 990. **Inspection** 

AMERICAN MATHEMATICAL SOCIETY						05-0264797	
Part I General Information on C	Grants and	Assistance				•	
<ul> <li>Does the organization maintain records the selection criteria used to award the</li> <li>Describe in Part IV the organization's part IV</li> </ul>	grants or assi procedures for	stance? monitoring the use o	of grant funds in the Un	ted States			✓ Yes
Part II Grants and Other Assistance to that received more than \$5,000	Domestic Orga Part II can be	nizations and Domes e duplicated if additi	<b>stic Governments.</b> Com onal space is needed	plete if the organization	answered "Yes" on For	m 990, Part IV, line 21	., for any recipient
(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	( <b>d)</b> 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	( <b>h)</b> Purpose of gran
See Additional Data Table							
2 Enter total number of section 501(c)(3	) and governm	ent organızatıons lıs	ted in the line 1 table .				30

Enter total number of other organizations listed in the line 1 table . . . . . .

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Addıtıonal Data Table					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
	THE AMERICAN MATHEMATICAL SOCIETY AWARDS VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND COLLABORATE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONTIORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLANS FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER, A REPORT ON THE USE OF THE FUNDS IS ALSO REQUIRED THE APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WORK OR RESEARCH RESULTS THAT HAVE ALREADY BEEN COMPLETED
, , ,	GRANTS AND AWARDS TO ORGANIZATIONS AND INDIVIDUALS OCCUR UNDER THE VARIOUS OUTREACH ACTIVITIES OF THE SOCIETY, EACH WITH ITS OWN SET OF CRITERIA FOR THE AWARDEE AND HOW THAT AWARDEE IS EXPECTED TO USE THE FUNDS MANY GRANTS/AWARDS HAVE NO CRITERIA AS TO USE, SUCH AS THE MANY PRIZES SUPPORTED BY TRUE ENDOWMENT FUNDS FOR THOSE THAT DO HAVE CRITERIA AS TO USE, SUCH AS THE EPSILON AWARDS TO ORGANIZATIONS AND THE MATH IN MOSCOW GRANTS TO INDIVIDUAL STUDENTS, ADHERENCE TO THE TERMS OF THE GRANT/AWARD IS MONITORED BY STAFF IN THE MEMBERSHIP AND PROFESSIONAL PROGRAMS DEPARTMENT APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES ADDITIONALLY, ONCE THE PURPOSE FOR WHICH THE AWARD OR GRANT WAS MADE IS COMPLETE, THE AWARDEE IS REQUIRED TO FILE A REPORT WITH THE SOCIETY

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

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 section if applicable	( <b>d)</b> 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
GOVERNOR'S INSTITUTES OF VERMONT INC 4049 WILLISTON ROAD SOUTH BURLINGTON, VT 05403	03-0308967	501(C)(3)	5,000				EPSILON AWARD
PROMYS 111 CUMMINGTON STREET BOSTON,MA 02215	04-2103547	501(C)(3)	5,000				EPSILON AWARD
THE PRESIDENT & TRUSTEES OF WILLIAMS COLLEGE PO BOX 624 WILLIAMSTOWN, MA 01267	04-2104847	501(C)(3)	9,500				EPSILON AWARD

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 section if applicable	<b>(d)</b> A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HAMPSHIRE COLLEGE - SUMMER STUDIES IN MATH BOX NS 893 WEST STREET AMHERST, MA 01002	04-6130872	501(C)(3)	5,000				EPSILON AWARD			
RUTGERS UNIVERSITY 110 FRELINGHUYSEN RD PISCATAWAY,NJ 08854	22-6001086	115	5,000				CHINA EXCHANGE GRANT AWARD			
TEXAS TECH UNIVERSITY TEXPREP LUBBOCK PO BOX 41042 LUBBOCK,TX 79409	15-6043842	115	8,250				EPSILON AWARD			

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 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			
MAA 1529 EIGHTEENTH STREET NW WASHINGTON, DC 20036	16-0743079	501(C)(3)	25,000				ANNUAL SUPPORT & PROJECT NEXT FELLOWS SUPPORT			
THE ART OF PROBLEM SOLVING FOUNDATION PO BOX 4499 NEW YORK, NY 10163	20-1239616	501(C)(3)	5,000				EPSILON AWARD			
MATHPATH 4052 94TH AVENUE SE MERCER ISLAND, WA 98040	20-1290489	501(C)(3)	5,000				EPSILON AWARD			

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 section if applicable	( <b>d)</b> 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		
NEW YORK MATH CIRCLE PO BOX 1992 NEW YORK, NY 10113	26-1162539	501(C)(3)	5,000				EPSILON AWARD		
FRIENDS OF THE IMU 201 CHARLES STREET PROVIDENCE,RI 02904	26-3185549	501(C)(3)	5,000				ANNUAL SUPPORT		
EUCLID LAB 160 MILLEDGE TERRACE ATHENS,GA 30606	27-2340588	501(C)(3)	5,000				EPSILON AWARD		

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 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		
OSU - ROSS MATHEMATICS PROGRAM 231 W 18TH AVE COLUMBUS,OH 43210	31-1145986	115	5,000				EPSILON AWARD		
NORTHWESTERN UNIVERSITY 2033 SHERIDAN RD ECANSTON,IL 60208	36-2167817	501(C)(3)	5,000				CHINA EXCHANGE GRANT AWARD		
UNIVERSITY OF CHICAGO YOUNG SCHOLARS PROGRAM DEPARTMENT OF MATHEMATICS 5734 SOUTH UNIVERSITY AVENUE CHICAGO,IL 60637	36-2177139	115	5,000				EPSILON AWARD		

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 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		
KSURSF 1000 CHASTAIN ROAD KENNESAW, GA 30144	37-1535589	501(C)(3)	5,000				EPSILON AWARD		
UNIVERSITY OF MICHIGAN - MICHIGAN MATH AND SCIENCE SCHOLARS 2074 EAST HALL 530 CHURCH ST ANN ARBOR, MI 48109	38-6006309	115	5,000				EPSILON AWARD		
IOWA STATE UNIVERSITY - DEPARTMENT OF MATH 396 CARVER HALL AMES,IA 50011	42-6004224	115	5,000				EXEMPLARY PROGRAM AWARD		

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	nts.	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	( <b>d)</b> Amount of cash grant		<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MATHILY 278 BAY ROAD HADLEY,MA 01035	46-1813949	501(C)(3)	8,250				EPSILON AWARD
CENTER FOR EXCELLENCE IN EDUCATION 8201 GREENSBORO DRIVE SUTIE 215 MCLEAN,VA 22102	52-1256563	501(C)(3)	5,000				EPSILON AWARD
SACNAS PO BOX 8526 SANTA CRUZ,CA 950618526	52-1443811	501(C)(3)	5,000				ANNUAL SUPPORT

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	to Domestic Orga	anizations and D	omestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF AMERICAN UNIVERSITIES 1200 NEW YORK AVENUE NW SUITE 550 WASHINGTON, DC 20005	52-2947112	501(C)(3)	5,000				GOLDEN GOOSE AWARD
AAAS - DC 1200 NEW YORK AVENUE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	9,500				PROJECT NEXT FELLOWS SUPPORT
MATHEMATICS FOUNDATION OF AMERICA CANADAUSA MATHCAMP 129 HANCOCK STREET CAMBRDIGE, MA 02139	57-1035414	501(C)(3)	5,000				EPSILON AWARD

Form 990,Schedule I, Part	t II, Grants and	1 Other Assistance	e to Domestic Org	anizations and D	omestic Governm€	≟nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
UNIVERSITY OF SOUTH FLORIDA FOUNDATION 4202 E FOWLER AVENUE TAMPA,FL 33620	59-0879015	501(C)(3)	5,000				EPSILON AWARD
ASU FOUNDATION PO BOX 2260 TEMPE,AZ 85280	86-6051042	501(C)(3)	5,000				EPSILON AWARD
UNIVERSITY OF UTAH MATHEMATICS DEPT 155 S 1400 EAST JWB 233 SALT LAKE CITY,UT 84112	87-6000525	115	9,500				EPSILON AWARD

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	<u>omestic Governme</u>	nts.	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant		<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON DEPT OF MATH BOX 354350 SEATTLE, WA 98195	91-6001537	115	9,500				EPSILON AWARD
STANFORD UNIVERSITY SUMAC 220 PANAMA ST STANFORD,CA 94305	94-1156360	115	5,000				EPSILON AWARD
TEXAS STATE UNIVERSITY MATHWORKS 601 UNIVERSITY DRIVE SAN MARCOS,TX 78666	94-2960235	115	5,000				EPSILON AWARD

### Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

FELLO WSHIP

(a)Type of grant or assistance	<b>(b)</b> Number of	(c)A mount of	(d)A mount of	(e)Method of valuation (book,	(f)Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
	1 1		I	1	
BIRKOFF	1	5,000			
DISTINGUISHED PUBLIC SERVICE AWARD	1	500			
IMPACT AWARD - NEW	1	1,000			
MATH IN MOSCOW SCHOLARSHIP	11	107,800			
MENGER AWARD	6	5,000			
MORGAN PRIZE	1	1,200			
SATTER	1	5,000			
STEELE PRIZE - LIFETIME ACHIEVEMENT	1	5,000			
STEELE PRIZE - MATH EXPO	1	5,000			
STEELE PRIZE - SEMINAL CONTRIBUTION	1	5,000			
TRJITZINSKY SCHOLARSHIPS - 2015	7	21,000			
2014-2015 CONGRESSIONAL FELLOWSHIP	1	54,046			
2015-2016 CONGRESSIONAL	1	38,351			

DLN: 93493228016396

**Compensation Information** 

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

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Internal Revenue Service Name of the organization AMERICAN MATHEMATICAL SOCIETY

**Schedule J** (Form 990)

Department of the Treasury

**Employer identification number** 

05-0264797

Pa	rt I	<b>Questions Regarding Compensation</b>	1				
						Yes	No
1a				ny of the following to or for a person listed on Form ride any relevant information regarding these items			
	ΓF	irst-class or charter travel	$\vdash$	Housing allowance or residence for personal use			
	Гт	ravel for companions	$\sqcap$	Payments for business use of personal residence			
	Гт	ax idemnification and gross-up payments	$\Gamma$	Health or social club dues or initiation fees			
		Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		of the boxes in line 1a are checked, did the orbursement or provision of all of the expenses de		ion follow a written policy regarding payment or i above? If "No," complete Part III to explain	1b		
2		ne organization require substantiation prior to r tors, trustees, officers, including the CEO/Exec		sing or allowing expenses incurred by all Director, regarding the items checked in line 1a?	2		
					<u> </u>		
3	organ	ate which, if any, of the following the filing organ nization's CEO/Executive Director Check all th by a related organization to establish compens	at apply				
	<b>▼</b> 0	Compensation committee		Written employment contract			
	Г	ndependent compensation consultant	<u> </u>	Compensation survey or study			
	F	orm 990 of other organizations	굣	Approval by the board or compensation committee			
4		g the year, dıd any person listed on Form 990, elated organization	Part VI	I, Section A, line ${f 1}{f a}$ with respect to the filing organization			
а	Recei	ive a severance payment or change-of-control	paymen	nt?	4a		No
b	Partio	cipate in, or receive payment from, a supplemer	ntal non	qualified retirement plan?	4b		No
c	Partic	cipate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		No
		es" to any of lines 4a-c, list the persons and pro					
	Only	501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.			
5		ersons listed on Form 990, Part VII, Section A ensation contingent on the revenues of	, line 1a	a, did the organization pay or accrue any			
а	The o	organization?			5a		No
b	Any r	related organization?			5b		No
	If"Y∈	es," on line 5a or 5b, describe in Part III					
6		ersons listed on Form 990, Part VII, Section A ensation contingent on the net earnings of	, line 1a	a, did the organization pay or accrue any			
а	The o	organization?			6a		No
b	Any r	related organization?			6b		Νo
	If"Y∈	es," on line 6a or 6b, describe in Part III					
7		ersons listed on Form 990, Part VII, Section A ents not described in lines 5 and 6? If "Yes," d	•	· · · · · · · · · · · · · · · · · · ·	7		No
8				accured pursuant to a contract that was stions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9		es" on line 8, did the organization also follow the	e rebutt	able presumption procedure described in Regulations	9		140

#### 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 on 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	SC compensation	(C) Retirement and	` '	(E) Total of columns	
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2015

#### Part III Supplemental Information

Return Reference
FORM 990, PART VII, LINE 5
CARLA SAVAGE RECIEVED COMPENSATION FROM NORTH CAROLINA STATE UNIVERSITY, AN UNRELATED ORGANIZATION, FOR SERVICES RENDERED TO THE ORGANIZATION IN THE AMOUNT OF \$116,389 ROBERT BRYANT RECIEVED COMPENSATION FROM DUKE UNIVERSITY,

AN UNRELATED ORGANIZATION, FOR SERVICES RENDERED TO THE ORGANIZATION IN THE AMOUNT OF \$30,000

Schedule J (Form 990) 2015

# Software ID: Software Version:

**EIN:** 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

(A) Name and Title			f W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1ROBERT BRYANTPRESIDENT	(1)	30,000	0	0	0	0	30,000	C
	(11)	0	0	0	0	0	0	
1CARLA SAVAGESECRETARY	(1)	116,389	0	0	0	0	116,389	C
	(11)	- 0		 	- - 0			(
2DONALD MCCLURE EXECUTIVE DIRECTOR	(1)	274,334	0	6,064	33,968	14,819	329,185	C
ENESSITE SENES. S.	(11)			0			0	
3EMILY RILEY CHIEF FINANCIAL OFFICER	(1)	159,824	0	1,409	18,925	8,273	188,431	C
CHIEF I INMINEME OF FICER	(11)							
4EDWARD DUNNE EXECUTIVE EDITOR - MI	(1)	167,822	0	1,553	20,979	19,511	209,865	C
EXECUTIVE EDITOR - FIT	(11)			0				
<b>5</b> SAMUEL RANKIN ASSOC EXEC DIR	(1)	228,234	0	6,294	29,474	14,541	278,543	C
ASSUC LALC DIN	(11)							
<b>6</b> ROBERT HARINGTON ASSOC EXEC DIR	(1)	208,155	0	872	26,573	18,309	253,909	C
ASSUC LALC DAN	(11)			0				(
7T CHRISTINE STEVENS ASSOC EXEC DIR	(1)	160,783	0	4,127	6,253	8,338	179,501	(
ASSOC ENEC DIN	(11)				- - 0			
8THOMAS BLYTHE CHIEF INFORMATION	(1)	155,255	0	1,468	19,206	19,432	195,361	(
OFFICER	(11)		- - 0	0	- - 0		0	
9EROL OZIL SYSTEM SUPPORT MANAGER	(1)	150,699	0	704	17,614	8,844	177,861	(
	(11)	0		0	- 0	- - 0		
10SERGEI GELFAND PUBLISHER	(1)	141,435	0	2,299	16,801	14,620	175,155	(
	(11)	0	0	0	0	0	0	(
11GERARD LOON DIRECTOR INFO SYSTEMS	(1)	140,500	0	641	15,699	1,407	158,247	(
	(11)	- 0		0	- 0		0	
12ASSEN DONTCHEV ASSOCIATE EDITOR	(1)	137,160	0	3,536	15,925	12,156	168,777	(
ASSOCIATE ESTICA	(11)			0				
13INA METTESENIOR EDITOR	(1)	133,785	0	621	15,470	20,999	170,875	.1
	(11)							
		0	0	0	o	0	0	ļ

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DLN: 93493228016396

OMB No 1545-0047

#### **SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

## **Noncash Contributions**

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Open to Public Inspection

	ne of the organization RICAN MATHEMATICAL SOCIETY				Employer identificat	ion numbe	r
AME	CICAN MATHEMATICAL SOCIETY				05-0264797		
Pa	rt I Types of Property						
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of do noncash contrib	etermining	
	Art—Works of art						
2	Art—Historical treasures .						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	goods						
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded .	X	1	913,749	P FM V		
	Securities—Closely held stock		_	, , , , ,			
	Securities—Partnership, LLC, or trust interests						
12	Securities—Miscellaneous						
13	Qualified conservation contribution—Historic structures						
14	Qualified conservation contribution—Other						
15	Real estate—Residential .						
16	Real estate—Commercial						
17	Real estate—O ther						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies .						
	Taxidermy						
	Historical artifacts						
	Scientific specimens						
	Archeological artifacts						
	Other ► ()						
	Other ► ()						
	Other ► ()						
	Other ► () Number of Forms 8283 received	by the oran	Northern during the tay year	r for contributions	1 1		
29	for which the organization comple				29	Yes	0 <b>s No</b>
30a	During the year, did the organization of the best bulleting to the period of the best three years.						
				and winer is not requ	to be used		
_	for exempt purposes for the enti					30a	No
b	If "Yes," describe the arrangem	ent in Part i	11				
31	Does the organization have a gif					<b>31</b> Yes	<u>s                                     </u>
32a	Does the organization hire or us contributions?	e third part		to solicit, process, or sell	noncash • • •	32a	No
	If "Yes," describe in Part II						
33	If the organization did not report	t an amount	: in column (c) for a type of	property for which column	(a) is checked,		

describe in Part II

Part II Supplement	al Information.
--------------------	-----------------

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER SHOWN IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTORS

Schedule M (Form 990) (2015)

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DLN: 93493228016396

OMB No 1545-0047

2015

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### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Name of the organization
AMERICAN MATHEMATICAL SOCIETY

Employer identification number

05-0264797

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE SOCIETY HAS APPROXIMATELY 30,000 MEMBERS, INDIVIDUAL AND INSTITUTIONAL, WITH NO CRITERIA FOR MEMBERSHIP

Return Reference	Explanation
,	THE INDIVIDUAL MEMBERSHIP ELECTS ALL BOARD MEMBERS, EXCEPT THE TREASURER AND ASSOCIATE TREASURER THE TREASURER AND ASSOCIATE TREASURER SERVE WITH APPROVAL OF THE COUNCIL A SECOND GOVERNING BODY, THE COUNCIL, HAS SOME MEMBERS THAT ARE ELECTED BY THE MEMBERSHIP CHANGES TO THE BY LAWS MUST BE APPROVED BY THE MEMBERSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE INDIVIDUAL MEMBERSHIP ELECTS ALL BOARD MEMBERS, EXCEPT THE TREASURER AND ASSOCIATE TREASURER THE TREASURER AND ASSOCIATE TREASURER SERVE WITH APPROVAL OF THE COUNCIL A SECOND GOVERNING BODY, THE COUNCIL, HAS SOME MEMBERS THAT ARE ELECTED BY THE MEMBERSHIP CHANGES TO THE BY LAWS MUST BE APPROVED BY THE MEMBERSHIP

Return Reference	Explanation
′	THE 990 IS PREPARED BY THE FISCAL DEPARTMENT AND THE SOCIETY'S TAX ADVISORS, CBIZ TOFIAS WHEN THE FINAL DRAFT IS PREPARED, IT IS REVIEWED BY THE CHIEF FINANCIAL OFFICER AND THE EXECUTIVE DIRECTOR AFTER THIS REVIEW, THE BOARD OF TRUSTEES IS ASKED TO REVIEW THE 990 ELECTRONICALLY BY ACCESSING A SECURE INTERNET SITE. THEY ARE GIVEN APPROXIMATELY THREE TO FIVE BUSINESS DAYS TO REVIEW THE DRAFT. AFTER RESPONDING TO ANY FEEDBACK FROM THE TRUSTEES, THE FILING IS MADE.

FORM 990, PART VI, PART VI, SECTION B, LINE 12C  AMS OFFICERS, TRUSTEES, AND KEY EMPLOYEES, WHO ARE DEFINED AS INTERESTED PERSONS, ARE REQUIRED TO DISCLOSE ANNUALLY FINANCIAL INTERESTS THAT COULD GIVE RISE TO CONFLICTS BY SIGNING OFF ON THE CONFLICT OF INTEREST POLICY THE AMS ADOPTED THIS POLICY IN NOVEMBER 2011 AND TRUSTEES SIGNED OFF ON THIS POLICY IN NOVEMBER EACH NOVEMBER TRUSTEES AND KEY EMPLOYEES WILL BE ASKED TO AGAIN SIGN OFF ON THE POLICY AND DISCLOSE ANY POSSIBLE OR ACTUAL CONFLICTS AN INTERESTED PERSON MUST DISCLOSE A FINANCIAL INTEREST, AS DEFINED BY THE IRS, THAT IS A POTENTIAL CONFLICT TO THE BOARD OF TRUSTEES OR COMMITTEE WHO WILL DECIDE IF A CONFLICT EXISTS IF THE BOARD OF TRUSTEES OR COMMITTEE WITH BOARD-DELEGATED POWERS, EXCLUDING THE INTERESTED PERSON, DECIDES THAT A CONFLICT EXISTS, ALTERNATIVE TRANSACTIONS OR ARRANGEMENTS MIGHT BE MADE AFTER INVESTIGATING IN ORDER TO AVOID THE CONFLICT ALTERNATIVELY, DISINTERESTED PERSONS ON THE BOARD OF TRUSTEES OR COMMITTEE MAY DETERMINE THAT A TRANSACTION IS FAIR OR REASONABLE AND IN THE BEST INTERESTS OF THE ORGANIZATION THE INTERESTED PERSON WHO HAS A CONFLICT MAY NOT VOTE ON MATTERS FOR WHICH THERE IS A CONFLICT OF INTEREST AND THEY MUST BE EXCLUDED FROM DISCUSSIONS OF MATTERS FOR WHICH THERE IS A CONFLICT OF INTEREST.	Return Reference	Explanation
, ·	PART VI, SECTION B,	DISCLOSE ANNUALLY FINANCIAL INTERESTS THAT COULD GIVE RISE TO CONFLICTS BY SIGNING OFF ON THE CONFLICT OF INTEREST POLICY THE AMS ADOPTED THIS POLICY IN NOVEMBER 2011 AND TRUSTEES SIGNED OFF ON THIS POLICY IN NOVEMBER EACH NOVEMBER TRUSTEES AND KEY EMPLOYEES WILL BE ASKED TO AGAIN SIGN OFF ON THE POLICY AND DISCLOSE ANY POSSIBLE OR ACTUAL CONFLICTS AN INTERESTED PERSON MUST DISCLOSE A FINANCIAL INTEREST, AS DEFINED BY THE IRS, THAT IS A POTENTIAL CONFLICT TO THE BOARD OF TRUSTEES OR COMMITTEE WHO WILL DECIDE IF A CONFLICT EXISTS IF THE BOARD OF TRUSTEES OR COMMITTEE WITH BOARD-DELEGATED POWERS, EXCLUDING THE INTERESTED PERSON, DECIDES THAT A CONFLICT EXISTS, ALTERNATIVE TRANSACTIONS OR ARRANGEMENTS MIGHT BE MADE AFTER INVESTIGATING IN ORDER TO AVOID THE CONFLICT ALTERNATIVELY, DISINTERESTED PERSONS ON THE BOARD OF TRUSTEES OR COMMITTEE MAY DETERMINE THAT A TRANSACTION IS FAIR OR REASONABLE AND IN THE BEST INTERESTS OF THE ORGANIZATION THE INTERESTED PERSON WHO HAS A CONFLICT MAY NOT VOTE ON MATTERS FOR WHICH THERE IS A CONFLICT OF INTEREST AND THEY MUST BE EXCLUDED FROM DISCUSSIONS OF MATTERS FOR WHICH

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES REVIEWS AND APPROVES WITH THE EXECUTIVE DIRECTOR THE PROCESS BY WHICH THE EXECUTIVE DIRECTOR ESTABLISHES THE SALARY AND BENEFITS OF THE CHIEF FINANCIAL OFFICER AND KEY EMPLOYEES FOR THE UPCOMING YEAR INCLUDED IN THIS REVIEW IS COMPARISON DATA FROM COMPENSATION SURVEYS WITH RESPECT TO THE EXECUTIVE DIRECTOR, THE BOARD IS GIVEN SALARY AND BENEFIT AMOUNTS APPROVED FOR THE CURRENT YEAR, AND PROFORMA AMOUNTS FOR THE UPCOMING YEAR THE BOARD IS ALSO GIVEN COMPARISON DATA FROM COMPENSATION SURVEYS TO ASSIST WITH COMPENSATION DECISIONS FOR THE EXECUTIVE DIRECTOR THE BOARD TAKES INTO CONSIDERATION THE INFORMATION PROVIDED BY STAFF AS WELL AS COMPENSATION SURVEYS AND PERFORMANCE IN SETTING HIS/HER COMPENSATION FOR THE FOLLOWING YEAR ALL COMPENSATION SURVEYS USED FOR SETTING THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES SALARIES ARE FROM INDEPENDENT SOURCES, AND THEY ARE GATHERED BY A HUMAN RESOURCES PROFESSIONAL THE BOARD DOCUMENTS THEIR PROCESS FOR SETTING THE SALARIES EACH YEAR

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	SHORTLY AFTER FILING, THE SOCIETY'S FORM 990 AND ALL SCHEDULES (EXCLUDING SCHEDULE B) IS COPIED AND MADE AVAILABLE TO THE SOCIETY'S THREE LOCATIONS IF ANY ONE REQUESTS TO SEE THE FORM 990 AND SCHEDULES, COPIES ARE PROVIDED BY STAFF MAIL OR EMAIL THE SOCIETY'S GOVERNING DOCUMENTS ARE ON THE SOCIETY'S WEBSITE. THE ANNUAL REPORT OF THE TREASURER, INCLUDING THE FINANCIAL STATEMENT, IS PUBLISHED EACH YEAR IN THE SOCIETY'S PUBLICATION, NOTICES OF THE AMERICAN MATHEMATICAL SOCIETY, AS WELL AS THE ANNUAL REPORT. THESE PUBLICATIONS ARE AVAILABLE ON THE WEBSITE. THE 990 IS ALSO AVAILABLE ON THE GUIDESTAR WEBSITE.

Return Reference	Explanation
FORM 990, PART XI, LINE 9	POSTRETIREMENT BENEFIT - RELATED CHANGES 247,745 DEPRECIATION OF LABOR FOR IN HOUSE SOFTWARE -53,810

#### DLN: 93493228016396

## OMB No 1545-0047

2015

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## **SCHEDULE R** (Form 990)

Name of the organization AMERICAN MATHEMATICAL SOCIETY

Internal Revenue Service

Department of the Treasury

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

**Related Organizations and Unrelated Partnerships** 

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

Inspection **Employer identification number** 

				05-02647	97		
Part I Identification of Disregarded Entities Con	mplete if the organization	n answered "Yes" o	on Form 990, Pa	rt IV, line 33.			
<b>(a)</b> Name, address, and EIN (ıf applıcable) of dısregarded entıty	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations during		the organization a	nswered "Yes" o	on Form 990, Pai	rt IV, line 34 because it h	nad on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity state (if section 501(c)(3	us Direct controlling 3)) entity	Section (13) co	
						Yes	No
(1)MATHEMATICAL REVIEWS INC 416 FOURTH STREET	INACTIVE	MI	501(C)(3)		AMERICAN MATHEMATICAL SOCIETY	Yes	
ANN ARBOR, MI 48103 38-2489014							
(2)INTERNATIONAL CONGRESS OF MATHEMATICIANS CO AMS 201 CHARLES STREET	INACTIVE	RI	501(C)(3)		AMERICAN MATHEMATICAL SOCIETY	Yes	
PROVIDENCE, RI 02094 05-0405879							$\perp$
							—

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III Identification of Related ( because it had one or more i						ation answ	ered "Ye	s" on	Form	990, Part I	V, lır	ıe 34	;
<b>(a)</b> Name, address, and Ei related organization		Direct controlling	(f) Share of total income	(g) Share of end-of-year assets		n) prtionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	(j) eral or laging tner?	(k) Percent owners			
					514)			Yes	No		Yes	No	
IV Identification of Related (34 because it had one or mo							ation ansv	wered	"Yes'	" on Form 9	€90, I	Part	IV, line
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of entit (C corp, S corp, or trust)		total Share e of	(g) of end- year ssets		(h) ercentage ownership	Section (b) cont	(i) on 512 (13) trolled tity?	
											Yes		No

Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end- of-year assets	Percentage ownership	Section 512 (b)(13) controlled entity?		
								Yes	No	_
									+	
										-
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Part V	Transactions With Related Organizations Complete If the organization answer	red "Yes" on Form	990, Part IV, lıne	34, 35b, or 36.			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				,	Yes	No
<b>1</b> During	he tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?				
<b>a</b> Rec	ipt of (i) interest, (ii)annuities, (iii)royalties, or(iv)rent from a controlled entity				1a		No
<b>b</b> Gıft,	grant, or capital contribution to related organization(s)	. <b></b> .			1b		No
<b>c</b> Gıft,	grant, or capital contribution from related organization(s)				1c		No
<b>d</b> Loar	s or loan guarantees to or for related organization(s)	. <b></b> .			1d		No
<b>e</b> Loar	s or loan guarantees by related organization(s)				1e		No
<b>f</b> Divi	ends from related organization(s)				1f		No
<b>g</b> Sale	of assets to related organization(s)				1g		No
<b>h</b> Purc	hase of assets from related organization(s)				1h		No
i Exch	ange of assets with related organization(s)				1i		No
<b>j</b> Leas	e of facilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> 1639	e of facilities, equipment, or other assets from related organization(s)				1k		No
	rmance of services or membership or fundraising solicitations for related organization(s)				11		No
	rmance of services or membership or fundraising solicitations by related organization(s)				1m		No
	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
	ing of paid employees with related organization(s)				10		No
<b>p</b> Rein	bursement paid to related organization(s) for expenses				<b>1</b> p		No
<b>q</b> Rein	bursement paid by related organization(s) for expenses				1q		No
r Othe	r transfer of cash or property to related organization(s)				1r		No
	r transfer of cash or property from related organization(s)				1s		No
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds			
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amo	ount inv	olved	

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 1	
					•							_	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

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