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DLN: 93493225025136

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 www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A F	or the	e 201	calendar year, or tax year be	ginning 01-01-2015 , and ending 12-31-20	15		
B Ch	eck if a	applica	le C Name of organization AMERICAN PHILOSOPHICAL S	SOCIETY		D Employer ide	entification number
☐ Add	lress c	change	THE RESIDENCE OF THE SECOND PROPERTY OF THE S	33321		23-135326	59
┌ Na	ne cha	ange	Doing business as			_	
┌ Init	ıal retu	um				E Telephone nur	nhar
_ Fin			404 COUTH FIFTH CTREET	pox if mail is not delivered to street address) Room/s	uite	· ·	
ret			104 30011111111 318221			(215)440-	3400
Am			PHILADELPHIA, PA 19106	ce, country, and ZIP or foreign postal code		G Gross receipts	¢ 25 536 605
☐ App	licatio	n pen	ng			G Gloss receipts	\$ 23,330,093
			F Name and address	of principal officer	H(a) Is	this a group returi	
			Dr Keith S Thomson 41 Summit Street		1	bordinates?	Tyes No
			Philadelphia, PA 191:	18		e all subordinates cluded?	□Yes □No
							(see instructions)
I Ta	x-exer	mpt s	cus 🔽 501(c)(3) 🗌 501(c) () ◀ (Insert no)	H(c) G	roup exemption nu	ımber ►
J W	ebsit	e: 🕨	www amphilsoc org				
K For	n of o	rganız	ion Corporation Trust As	sociation	L Year o	f formation 1743	1 State of legal domicile PA
Pa	rt I	9	ımmary		•	•	
Governance	tl <u>fu</u> 	he A he pu	nerican Philosophical Society pose of "promoting useful know within	nission or most significant activities	istains this	mission with vario	ous programs described
		Cned	this box 🞮 if the organizat	ion discontinued its operations or disposed	or more than	1 25% OF ITS NET as	ssets
Activities &	3	Num	er of voting members of the g	overning body (Part VI, line 1a)		з	32
ij.	4	Num	er of independent voting mem	bers of the governing body (Part VI, line 1b)	4	31
Ę	5	Tota	number of individuals employ	ed ın calendar year 2015 (Part V, lıne 2a)		5	73
∢	6	Tota	number of volunteers (estima	te if necessary)		6	42
	I			rom Part VIII, column (C), line 12		7a	0
	b N	let u	elated business taxable inco	me from Form 990-T, line 34	<u> </u>	7b	-11,207
					P	rior Year	Current Year
o.	8		•	'III, line 1h)		2,490,457	3,582,044
		יט			I		115 560
eur	9			/III, line 2g)		100,579	115,569
Revenue	10	Ιr	estment income (Part VIII, o	column (A), lines 3, 4, and 7d)		16,828,184	12,632,678
Revenu	10 11	I r O	estment income (Part VIII, d ier revenue (Part VIII, colum	column (A), lines 3, 4, and 7d)		16,828,184 97,473	12,632,678 66,792
Revenu	10	I r O	estment income (Part VIII, o ier revenue (Part VIII, colum al revenue—add lines 8 throu	column (A), lines 3, 4, and 7d)		16,828,184	12,632,678
Revenu	10 11	Ir O T	estment income (Part VIII, c ier revenue (Part VIII, colum al revenue—add lines 8 throu	column (A), lines 3, 4, and 7d)		16,828,184 97,473	12,632,678 66,792 16,397,083
Revenu	10 11 12	Ir O T 1	estment income (Part VIII, o ier revenue (Part VIII, colum al revenue—add lines 8 throu nts and similar amounts paid	column (A), lines 3, 4, and 7d) In (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Igh 11 (must equal Part VIII, column (A), lir	ne	16,828,184 97,473 19,516,693	12,632,678 66,792 16,397,083
	10 11 12	Irr O T 1. G B	estment income (Part VIII, of ter revenue (Part VIII, colum al revenue—add lines 8 throu nts and similar amounts paid tefits paid to or for members aries, other compensation, er	column (A), lines 3, 4, and 7d)	ne	16,828,184 97,473 19,516,693	12,632,678 66,792 16,397,083
	10 11 12 13 14	Irr O T 1. G B	estment income (Part VIII, of er revenue (Part VIII, colum al revenue—add lines 8 throu nts and similar amounts paid efits paid to or for members of aries, other compensation, en	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368	12,632,678 66,792 16,397,083 1,047,155
	10 11 12 13 14 15	Ir O T G B S 5	estment income (Part VIII, of ier revenue (Part VIII, colum al revenue—add lines 8 throu ints and similar amounts paid refits paid to or for members of aries, other compensation, en 10)	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654
Expenses Revenu	10 11 12 13 14 15 16a b	Irr O T 1. G B S 5- P	estment income (Part VIII, columner revenue (Part VIII, columnal revenue—add lines 8 throughts and similar amounts paid refits paid to or for members earies, other compensation, end to the compensation of the columns	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654
	10 11 12 13 14 15	Ir O Tr 1. G B S S 5 P	estment income (Part VIII, columner revenue (Part VIII, columnal revenue—add lines 8 throughts and similar amounts paid refits paid to or for members earies, other compensation, er and significant fundraising fees (Part IX, columnar expenses (Part IX, co	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654 0
	10 11 12 13 14 15 16a b	Irr O T- 1. G B S 5. P To	estment income (Part VIII, columner revenue (Part VIII, columnal revenue—add lines 8 throughts and similar amounts paid refits paid to or for members earies, other compensation, end to the compensation of the column fees (Part IX, columnal expenses (Part IX, columnal expenses Add lines 13–1	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363 4,817,104 9,977,835	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654 0 3,738,646 8,847,455
Expenses	10 11 12 13 14 15 16a b 17	Irr O T- 1. G B S 5. P To	estment income (Part VIII, columner revenue (Part VIII, columnal revenue—add lines 8 throughts and similar amounts paid refits paid to or for members earies, other compensation, end to the compensation of the column fees (Part IX, columnal expenses (Part IX, columnal expenses Add lines 13–1	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654 0
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Expenses	10 11 12 13 14 15 16a b 17 18 19	Irr O Ti G B Si 5- P Td O Tr R	estment income (Part VIII, of the revenue (Part VIII, column al revenue—add lines 8 through the first paid to or for members of the first paid to or for members or for members of the first paid to or for member	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363 4,198,363 4,817,104 9,977,835 9,538,858 g of Current Year 197,652,256 7,512,501	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654 0 3,738,646 8,847,455 7,549,628 End of Year 189,825,689
Not Assets or Expenses Fund Balances	10 11 12 13 14 15 16a b 17 18 19	Irr O Ti 1 G B S S S S O O Ti R	estment income (Part VIII, columnar revenue (Part VIII, columnar revenue—add lines 8 through the fits paid to or for members paries, other compensation, end of the fits paid to or for members paries, other compensation, end of the fits paid to or for members (Part IX, columnar expenses (Part IX, columnar expenses (Part IX, columnar expenses Add lines 13–1 tenue less expenses Subtraction all assets (Part X, line 16) all liabilities (Part X, line 26) that assets or fund balances Sultractions.	column (A), lines 3, 4, and 7d)		16,828,184 97,473 19,516,693 962,368 4,198,363 4,817,104 9,977,835 9,538,858 g of Current Year 197,652,256	12,632,678 66,792 16,397,083 1,047,155 0 4,061,654 0 3,738,646 8,847,455 7,549,628 End of Year 189,825,689
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Philadelphia, PA 19107

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

. ▼Yes 「No

orn	n 990 (2015)				Page 2
Par	t IIII Statemen	t of Program Service A	ccomplishments		
	Check ıf Sch	edule O contains a response	or note to any line in this Part III		
1	Briefly describe the	e organization's mission			
ourp enga oppo disc rese Soci	ose of "promoting using using a distinguished scortunities for interdiscovery through grants arch library of manus	eful knowledge " In the 21st of lentists, humanists, social social siplinary, intellectual fellowsh and fellowships, lectures, pub cripts and other collections ii	d society in the United States, was century the Society sustains this re- cientists, and leaders in civic and of ip, particularly in the semi-annual plications, prizes, exhibitions, and internationally recognized for their of inquiry, provide a forum for the f	nission in three principal ways I cultural affairs through elected m Meetings in Philadelphia It supp public education It serves scho enduring historic value The Ame	t honors and embership and oorts research and lars through a erican Philosophical
2			ogram services during the year wh		
	•	or 990-EZ?			Yes √No
3	· ·	n cease conducting, or make s	significant changes in how it condu		Yes ▼No
	If "Yes," describe t	hese changes on Schedule O			
4	expenses Section		omplishments for each of its three inizations are required to report th program service reported		
4a	(Code) (Expenses \$	5,602,780 including grants of \$	1,047,155) (Revenue \$	115,569)
	The Society's printed Y and research grants ar	rearbook for 2015 gives a complete re on hand and are available for insp	account of the Society's activities A copy bection at the Society's office	will be furnished upon request Details o	concerning contributions
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)

(Expenses \$ including grants of \$

) (Revenue \$

Part IV	Checklist o	f Required	Schedule

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 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		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)			Page
Pai	TTV Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			.୮
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 42			
	Enter the number of Forms W-2G included in line 1a. Enter -0 - if not applicable.			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		Νo
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ▶			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	o l		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		No
••	Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
	during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
L	If "Vee " has it filed a Form 7.20 to report these payments 2 If "No." provide an explanation in Schodule O	1.46	1	1

Se	check it schedule 0 contains a response or note to any line in this Part VI	•	• •	<u> v</u>
	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			
	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 31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	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	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed CA, MA, NJ, NY, PA			
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)			

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

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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2015)

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

	(A) Name and Title	hours per week (list any hours and a director/trustee)							(D) Reportable compensation from the organization (W-		(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	organization and related organizations
See	Addıtıonal Data Table											
					\vdash	\vdash						
				1	\vdash	\vdash		1				
								_				
1b c	Sub-Total	ts to Part VII, S	ection A	١.	•			I	77-	7 204		122 207
d	Total (add lines 1b and 1c) .									7,384		122,297
2	Total number of individuals (in \$100,000 of reportable compe						d abov	'e) w	ho receive	d more th	nan	
3	Did the organization list any fo on line 1a? <i>If "Yes," complete</i> S					key •	emplo	yee,	or highest	compen		Yes No
4	For any individual listed on ling organization and related organ individual										uch	4 Yes
5	Did any person listed on line 1 services rendered to the organ									anızatıon		5 No
Se	ection B. Independent Co	ntractors										
1	Complete this table for your five compensation from the organization	ve highest comp										
		(A) lame and business		a (1011	101	cire C	arend	ы уе	ar enuling v		(B) scription of services	(C) 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 \blacktriangleright 0

Form **990** (2015)

Part V	/ 🛊 🛊 1	Statement of						
		Check If Schedu	ile O contains a respon	ise or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated camp	oaigns 1a					
Grants mounts	Ь	Membership due	es	-				
Gra not	l c	Fundraising eve						
ts.								
Giffs, iilar Ai	d	Related organiz						
ons, Gifts, Grants Similar Amounts	e	Government grants	(contributions) 1e					
itio er S	f	All other contributions similar amounts not	ns, gifts, grants, and 1f t included above	3,582,044				
ig ig	g	Noncash contributio	ns included in lines					
Contributions, and Other Sim		1a-1f \$	4 - 46		3,582,044			
<u>ة ت</u>	_ <u> </u>	Total. Add lines	1a-1f	· · · · •	3,302,044			
en				Business Code				
Program Serwce Revenue	2a	Publications sales		511130	115,569	115,569		
2 <u>2</u>	b							
ÄÇ.	C C							
S.	d e							
ra E	f	All other progra	m service revenue					
ાં	·							
<u></u>	g		2a-2f		115,569			
	3		ome (including dividend ir amounts)		6,659,783			6,659,783
	4	Income from invest	ment of tax-exempt bond p	proceeds 🕨	0			
	5	Royalties		🕨	0			
	6a	Gross rents	(1) Real 65,122	(II) Personal				
	b	Less rental	57,004					
		expenses Rental income	,					
	C	or (loss)	8,118					
	d	Net rental incon	me or (loss)		8,118			8,118
	7a	Gross amount from sales of assets other than inventory	(1) Securities 15,055,503	(II) Other				
	ь	Less cost or other basis and sales expenses	8,933,874	148,734				
	c	Gain or (loss)	6,121,629	-148,734				
	d		s)		5,972,895			5,972,895
Other Revenue	8a	Gross income frevents (not incl \$ of contributions See Part IV, line	uding reported on line 1c)					
the			a					
δ	b		oenses b loss)from fundraising e	avents :	0			
	9a		om gaming activities	events 🅦	· ·			
			a					
	Ь		penses b					
		•	loss) from gaming activ	/ities≱-	0			
	104	Gross sales of i returns and allo						
			a					
	b	Less cost of go	L		-1			
	С	Net income or (loss) from sales of inve		0			
	11a	Digitization Roy		Business Code 900099	9,821			9,821
		Exhibition Sales		451211	30,613			30,613
	c	Misc Inc Photo		900099	15,454			15,454
	d	All other revenu			2,786			2,786
	e		11a-11d	🕨	F0 47.			
	12	Total revenue.	See Instructions		16 207 082	115 500		12,699,470
	ı			I	16,397,083	115,569		12,099,470

	Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns				
	Check if Schedule O contains a response or note to any line in t	his Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	15,000	15,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22	982,255	982,255		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15		·		
	and 16	49,900	49,900		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	501,965	96,728	355,041	50,196
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	2,661,026	2,181,111	191,812	288,103
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	131,632	106,465	9,693	15,474
9	Other employee benefits	534,760	442,819	28,139	63,802
10	Payroll taxes	232,271	173,431	34,248	24,592
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	27,210		27,210	
С	Accounting	70,430		70,430	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	274,725		274,725	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	115,522		115,522	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	526,129	526,129		
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	283,703	283,703		
20	Interest	38,021	38,021		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	665,126	585,994	75,200	3,932
23	Insurance	107,427		107,427	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Library operations	252,076	252,076		
b	FASB benefits expenses	204,174	148,670	33,636	21,868
c	Printing and Publications	198,866	198,866		
d	Equip rental and maintenance	180,529	35,203	138,105	7,221
e	All other expenses	794,708	486,409	250,679	57,620
25	Total functional expenses. Add lines 1 through 24e	8,847,455	6,602,780	1,711,867	532,808
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ▼ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 11,702 11,702 1 Cash-non-interest-bearing 1 2 Savings and temporary cash investments . . 8,649,085 2 5,462,458 2,206,954 3 1,917,342 3 Pledges and grants receivable, net . . . 36,378 4 19,377 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

						5	0
	6	Loans and other receivables from other disqualified per					
		section $4958(f)(1)$), persons described in section 4958 contributing employers and sponsoring organizations of					
s		voluntary employees' beneficiary organizations (see in					
Assets		II of Schedule L				6	0
A S	7	Notes and loans receivable, net		-		7	0
_	8	Inventories for sale or use		l l			0
	9	Prepaid expenses and deferred charges		ŀ	87.853	9	88,485
	10a	Land, buildings, and equipment cost or other basis		27,718,076	21,222		33,133
	L	Complete Part VI of Schedule D	10a	13,740,800	14,526,384	10-	13 077 276
	b	Less accumulated depreciation	10b	· · ·	139,962,785	10c	13,977,276 132,161,422
	11 12	Investments—publicly traded securities			32,145,155	11	36,131,102
	13	Investments—other securities See Part IV, line 11			32, 143, 133	13	30, 131, 102
	14	Investments—program-related See Part IV, line 11 Intangible assets		F	42,961	14	39.524
	15	Other assets See Part IV, line 11		ř	42,301	15	09,324
	16	Total assets. Add lines 1 through 15 (must equal line 34		, , , , , , , , , , , , , , , , , , ,	197,652,256	16	189,825,689
	17	Accounts payable and accrued expenses			91.644	17	108,090
	18	Grants payable		F	0.,01.	18	100,000
	19	Deferred revenue		ŀ		19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV				21	
S	22	Loans and other payables to current and former officers					
Liabilities		key employees, highest compensated employees, and o					
abi		persons Complete Part II of Schedule L				22	
T.	23	Secured mortgages and notes payable to unrelated thir	d partie	es	1,500,000	23	1,500,000
	24	Unsecured notes and loans payable to unrelated third p	arties			24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Complete Part X of Schedule D	to rela	ited third parties,			
		· · · · · · · · · · · · · · · · · · · ·			5,920,857	25	5,887,600
	26	Total liabilities. Add lines 17 through 25			7,512,501	26	7,495,690
ş		Organizations that follow SFAS 117 (ASC 958), check h	ere 🟲	✓ and complete			
JC-6		lines 27 through 29, and lines 33 and 34.			04 500 040		00.504.004
alar	27	Unrestricted net assets			31,583,012	27	30,534,021
ă	28	Temporarily restricted net assets	•		4,318,388 154,238,355	28	3,991,737
pur	29	Permanently restricted net assets		.	154,238,355	29	147,804,241
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), complete lines 30 through 34.	check i	nere ► and			
	30	Capital stock or trust principal, or current funds $\ \ . \ \ \ \ .$				30	
Assets	31	Paid-in or capital surplus, or land, building or equipmen	t fund			31	
	32	Retained earnings, endowment, accumulated income, o		F		32	
Net	33	Total net assets or fund balances			190,139,755	33	182,329,999
-	34	Total liabilities and net assets/fund balances			197,652,256	34	189,825,689

34 Total liabilities and net assets/fund balances 197,652,256 **34** 189,825,689

	1990 (2013)			<u> </u>	age 1
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. I
1	Total revenue (must equal Part VIII, column (A), line 12)	1		16,3	397,08
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,8	347,45!
3	Revenue less expenses Subtract line 2 from line 1	3		7,5	549,628
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		190,1	. 39,75!
5	Net unrealized gains (losses) on investments	5			889,969
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)	9			30,58
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		182,3	329,999
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: 15000324 **Software Version:** 2015v2.0 **EIN:** 23-1353269

Name: AMERICAN PHILOSOPHICAL SOCIETY

Form 990, Part VII - Compensation Compensated Employees, and Ind	n of Officers, ependent Cor	Direct otracto	ors, ors	Tru	ste	es, k	(ey	Employees, High	hest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more ti perso and a	tion (han o n is b	ne b ooth ctor,	ox, u an of trus	ınless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Dr Richard E Quandt	1 00	×		x				0	0	0
Treas/Councilor	0 00									
Carl F Miller Secretary/Counc		х		х				0	0	0
Dr Stephen J Benkovic	1 00									
Councilor	0 00	X						0	0	0
Dr David D Sabatini	1 00	,						0	0	0
Councilor	0 00	Х						0	0	U
Dr Roger S Bagnall	1 00	×		X				0	0	0
Curator/Council	0 00									
Dr Clyde F Barker	1 00	x		х				0	0	0
Pres/Councilor	0 00									
Dr Charles P Slichter Councilor		×						0	0	0
Conrad K Harper	0 00 1 00									
Councilor	0 00	×						0	0	0
Dr Jerrold Meinwald	1 00							_	_	_
Councilor	0 00	X						0	0	0
Dr Samuel O Thier	1 00	х						0	0	0
Councilor	0 00	^							0	Ŭ
William H Frederick Jr Curator/Counsir	1 00 0 00	х		х				0	0	0
William B Eagleson Jr	1 00	×						0	0	0
Councilor	0 00									
Hon Arlin M Adams Councilor		x						0	0	0
Linda Greenhouse	0 00 1 00									
V P /Councilor	0 00	×		Х				0	0	0
Dr Michael W Doyle	1 00									
Councilor	0 00	X						0	0	0
Dr Barbara Oberg	1 00	х						0	0	0
Councilor	0 00	<u> </u>								
Dr Lawrence H Einhorn	1 00	×						0	0	0
Councilor	0 00									
Dr Frank H T Rhodes		x						0	0	0
Councilor — Dr Richard M Shiffrin	0 00									
Councilor	0 00	×						0	0	0
Dr Barbara J Grosz	1 00									
V P /Council	0 00	X		X				0	0	0
Dr Jonathan R Cole	1 00	,								0
Councilor	0 00	Х						0	0	0
Dr Jeremy A Sabloff	1 00	×						0	0	0
Councilor	0 00									
Dr Mary Patterson McPherson	1 00	x						0	0	0
Councilor Paul F Miller	0 00									
Councilor	0 00	х						0	0	0
Dr Werner Gundersheimer	1 00	х						0	0	0
Councilor	0 00									

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde				· · u	3101	cs, i	c y	Linployees, riigi	icst	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne bo oth a ctor/	ox, u an of trus	inless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	-,,	-,,	related organizations
Dr Christoph Wolff Councilor	0 00	x						0	0	0
Rev John W O'Malley V P /Councilor	1 00	х		х				0	0	0
Dr Patricia A Graham Councilor	1 00	х						0	0	0
Dr Keith S Thomson Exc Off/Councl	40 00	х		х				200,935	0	11,653
Dr Jack E Dixon Councilor	1 00	х						0	0	0
Dr Michael I Sovern	1 00	x						0	0	0
Dr Howard Gardner Councilor	1 00	х						0	0	0
John Wolfe	40 00			x				152,749	0	29,153
Patrick Spero Librarian	40 00			х				81,791	0	25,684
Molly Roth	40 00					х		125,402	0	16,047
Charles Greifenstein Assoc Librarian	40 00					х		109,311	0	25,668
Nora Monroe Membership Directo	0 00					х		107,196	0	14,092
·	1 000	L			<u> </u>	1				<u> </u>

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As Filed Data -

DLN: 93493225025136

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		he organization					Employer identifica	ation number
AMEK	ICAN PI	HILOSOPHICAL SOCIETY					23-1353269	
Pa	rt I	Reason for Publi	ic Charity S	Status (All organiza	tions must co	mplete this r		ons.
		zation is not a private fo		, ,			•	
1		A church, convention						
2	<u></u>	A school described in				=		
3	, T	A hospital or a cooper						
4	, T	A medical research or) Enter the
_	,	hospital's name, city,		crated in conjunction v	vicii a nospicai a	escribed iii se	.c.o 170(D)(1)(A)(III	J. Linter the
5	\sqcap			nefit of a college or un	iversity owned	or operated by	a governmental unit o	lescribed in section
_	_	170(b)(1)(A)(iv) (C						
6		A federal, state, or loc	=	_				
7	<u>~</u>	An organization that n				om a governme	ental unit or from the g	jeneral public
8	Г	described in section 1 A community trust de				+		
9	Ē			ves (1) more than 33			butions, membership	fees, and gross
	•			ts exempt functions—s				
				unrelated business ta			1 tax) from businesse	es acquired by the
10	_	organization after Jun An organization organ		see section 509(a)(2).			500(a)(4)	
11	<u>'</u>	An organization organ						ut the nurneses of
	'	one or more publicly s						
		the box in lines 11a th						
а	Γ	Type I. A supporting of						
		supported organizatio organization You mus				ty of the direct	ors or trustees of the	supporting
ь	\vdash	Type II. A supporting	•	•		with its suppo	rted organization(s), l	ov having control or
_	'	management of the su						
	_	must complete Part I						
С	ı	Type III functionally						grated with, its
d	Г	supported organizatio Type III non-function						anization(s) that is
-	'	not functionally integr						
	_	(see instructions) Yo						
е		Check this box if the o					s a Type I, Type II, T	ype III functionally
f	Ento	integrated, or Type II r the number of support						
g g	Lince	Provide the following i					· · · · · · · —	
9		Trovide the following f	mormación 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	nt?	(see instructions)	instructions)
				1- 9 above (see instructions))				
					Yes	No		
Tota	ı							

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (d)2014 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) 🟲 1 Gifts, grants, contributions, and 4,847,525 2,917,400 2,011,635 2,490,457 3,582,044 15,849,061 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit 475,000 475,000 475,000 475,000 475,000 2,375,000 to the organization without charge 5,322,525 3,392,400 2,486,635 2,965,457 4,057,044 18,224,061 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included 1,077,407 on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 17,146,654 from line 4 Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 🟲 5,322,525 3,392,400 2,486,635 2,965,457 4,057,044 18,224,061 Amounts from line 4 Gross income from interest. dividends, payments received on 3,501,345 4,778,628 4,736,098 5,040,712 6,724,905 24,781,688 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 34,104 31,444 38,943 36,995 58,674 200,160 capital assets (Explain in Part VI) Total support. Add lines 7 43,205,909 through 10 12 Gross receipts from related activities, etc (see instructions) 12 711,216 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization. Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 14 39 690 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 42 950 % 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported \vdash organization b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2015 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar vear (a)2011 (d)2014 **(b)**2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) 🕨 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt nurnose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 6 10a 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 C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2014 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

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

Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2014 Schedule A, Part III, line 17

18

►ſ

17

18

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

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V)		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		ı
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 Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4 a	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		ı
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	4b		
c	by or in connection with its supported organizations. 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.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. 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		ı
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 Part VI .	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 Part VI .	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 Part VI .	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 Part VI .	9c		
0a	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		l
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

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 Part VI 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 Part VI 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 Part VI 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 Part VI 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 Part VI 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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
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 Part VI 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		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount 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		
i	Distributable Amount. 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	pt purposes of supported org	anızatıons	
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			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
 Carryover from 2010 not applied (see instructions) 			
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 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			
c Excess from 2013			
d From 2014			
e 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: 93493225025136

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** AMERICAN PHILOSOPHICAL SOCIETY 23-1353269 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education)
Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🛌 Number of states where property subject to conservation easement is located -__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the vear Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	****	Organizations Maintaining (continued)	g Collections of	Art, Histor	ical Tre	easures, o	r Ot	her Similar A	ssets	
3		the organization's acquisition, acc tion items (check all that apply)	cession, and other re	ecords, check					e of its	
а	▽ P	ublic exhibition		d	Loan o	r exchange p	rogra	ms		
b	√ s	cholarly research		еГ	Other					
c										
4	Provid Part X	de a description of the organization (III	n's collections and e	xplain how the	y further	the organiza	ition's	exempt purpose	ın	
5		g the year, did the organization sol s to be sold to raise funds rather t							▽ No	
Par	t IV	Escrow and Custodial Arra Complete if the organization Part X, line 21.		on Form 990	, Part I\	/, line 9, or	repo	orted an amoun	t on Form 990,	
1a		e organization an agent, trustee, cu led on Form 990, Part X?	istodian or other into	ermediary for	ontribut	ions or other	asse	ts not	┌ No	
b	If"	Yes," explain the arrangement in F	Part XIII and comple	ete the followi	ng table			Am	ount	
c		jinning balance	·				1 c			
d	A do	ditions during the year					1d			
e	Dıs	tributions during the year					1e			
f	End	ding balance				Ī	1f			
2a	Did th	e organization include an amount	on Form 990, Part X	, line 21, for e	scrow or	ے custodial ac	count	liability? Yes	✓ No	
b	If"∨≏	s," explain the arrangement in Par	+ YIII Chack haraı	f the evolanat	ion has h	een provided	lın D≃	urt VIII	Г	
Pai	t V	Endowment Funds. Comple								
		·	(a)Current year	(b)Prior yea		c)Two years ba	<u>_</u>)Three years back	(e)Four years back	
1a	Begin	ning of year balance	176,067,203	166,19	5,649	143,572,6	70	125,745,572	132,195,175	
b	Contr	ibutions	2,344,825	99),444	204,2	60	730,884	2,876,386	
С	Net ir losse	nvestment earnings, gains, and s	-2,594,631	15,50	1,687	28,780,3	16	23,124,564	-3,720,766	
d		s or scholarships								
е	and p	r expenditures for facilities rograms	6,670,072	6,37	,369	6,106,5	26	5,848,184	5,434,003	
f		nistrative expenses	274,725	26	2,208	254,0	71	180,166	171,220	
g		f year balance	168,872,600	176,06	7,203	166,196,6	49	143,572,670	125,745,572	
2	Provid	' de the estimated percentage of the	current year end ba	alance (line 1	ı, column	(a)) held as	•	•		
а	Board	designated or quasi-endowment I	12 500 %							
b		anent endowment ► 87 500 %								
c		orarily restricted endowment 🕨								
Ū	•	ercentages on lines 2a, 2b, and 2c	should equal 100%	' 0						
3a		nere endowment funds not in the po ization by	ossession of the org	anızatıon that	are held	and administ	ered	for the	Yes No	
	-	related organizations						3a		
	(ii) re	lated organizations						За	(ii) No	
b		s" on 3a(II), are the related organi					•	3	b No	
4		ribe in Part XIII the intended uses		s endowment	unds					
Par	t VI	Land, Buildings, and Equipole Complete if the organization		Form 990.	Part IV.	line 11a.S	ee Fo	orm 990. Part X	. line 10.	
		Description of property		Cost or	(a) other basis stment)	(b)	basis	Accumulated (c) depreciation	(d)Book value	
	and					(other)				
	Buildin					27,7	18,076	13,740,800	13,977,276	
c l	- _easeh	old improvements						,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		nent								
	Other									
Total	I. A dd I	ines 1a through 1e (Column (d) mu	ıst equal Form 990, P	art X, column (B), line 10	O(c).)		🕨	13,977,276	

(including name of security)	ory	(b)Book value	(c)Method of valuation Cost or end-of-year market val
)Financial derivatives			
Closely-held equity interests Other			
al. (Column (b) must equal Form 990, Part X, col (B) line 12)		36,131,102	2
T-VIII Investments—Program Related.		•	
Complete if the organization answer (a) Description of investment	red 'Yes' on Form 9	90, Part IV, line 11c. _{Se}	ee Form 990, Part X, line 13. (c) Method of valuation
(a) Description of investment		(b) Book value	Cost or end-of-year market val
art X Other Liabilities. Complete if the o			
		ed 'Yes' on Form 990,	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability	rganization answei	ed 'Yes' on Form 990,	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes	rganization answei	ed 'Yes' on Form 990,	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes	(b) Book va	ed 'Yes' on Form 990,	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity O bligations	(b) Book va	red 'Yes' on Form 990,	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity Obligations nsion Benefit Liability	(b) Book va	0,148 5,211	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity Obligations nsion Benefit Liability	(b) Book va	o,148	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity Obligations nsion Benefit Liability	(b) Book va	0,148 5,211	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes inuity Obligations nsion Benefit Liability	(b) Book va	0,148 5,211	
See Form 990, Part X, line 25.	(b) Book va	0,148 5,211	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity O bligations	(b) Book va	0,148 5,211	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes inuity Obligations	(b) Book va	0,148 5,211	
Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability deral income taxes nuity O bligations	(b) Book va	0,148 5,211	

8,847,455

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	9,203,078
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	7,152,503
3	Subtract line 2e from line 1	3	2,050,575
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	14,346,508
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	16,397,083
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses 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	9,275,053
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 475,000		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	680,738
3	Subtract line 2e from line 1	3	8,594,315
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 274,725		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	253,140

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) .

Return Reference	Explanation
Part III, Line 1a If organization elected under SFAS 116 to not report are, historical treasures, o	As permitted by the provisions of FASB ASC 958, Not-for-Profit Entities, the Society does not capitalize donated works of art, books, or manuscripts or recognize them as revenue or gains Collection items acquired either through purchase or donation are not capitalized. Purchases of collection items are recorded as decreases in unrestricted net assets if purchased with unrestricted assets and as decreases in temporarily restricted or permanently restricted net assets if purchased with donor- restricted assets. Contributions of collection items are not recognized in the Statement of Activities. Proceeds from deaccessions or insurance recoveries are reflected on the Statement of Activities based on the absence or existence and nature of donor-imposed restrictions. The Society's accounts do not include values of Philosophical Hall, built between 1785 and 1789, a national historic landmark, and its collection of books, manuscripts and works of art.
Part III, Line 4 Description of organization's collections and how it furthers its purpose	The Society's offices and exhibition galleries are located in Philosophical Hall, a national historic landmark. Its collection of books, manuscripts and works of art support research, discovery and public education through public exhibitions and the Society's research library.
Part IV, Line 1b Why is organization an agent, trustee, custodian or other intermediary for contrib	The Society is the beneficiary under a number of trusts administered by two banks. The assets of the trusts are not included in the Statement of Financial Position of the Society since the Society does not exercise any control over those funds and certain conditions must be met annually to receive the income. The income from the trusts for 2015 and 2014 was \$150,064 and \$178,457, respectively
Part V , Line 4 Intended uses of the endowment fund	Under the Society's endowment spending policy, 4 3% of the average market value at the mid-point of the previous three years is appropriated for current operations. The investment policy utilized by the Society attempts to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets (donor-restricted funds that the Society must hold in perpetuity or for a donor-specified period as well as council designated funds.) Endowments have been established for the following activities administration, research, publications, meetings, library, Franklin Hall, and any other activity of the Society.
Part X FIN48 Footnote	The Society is a publicly supported tax exempt organization in accordance with the provisions of Internal Revenue Code Section 501(c)(3) Accordingly, no provision for federal income taxes has been made. With few exceptions, the Organization is no longer subject to U.S. federal examinations by tax authorities for years before 2012. The Society recognizes interest expense and penalties in interest expense. There was no interest or penalties related to income taxes recognized for the years ended December 31, 2015, and 2014.
Part XI, Line 2d Other revenue amounts included in F/S but not included on form 990	Investment return designated for opera \$6672698 Other investment income \$4805
Part XI, Line 4b Other revenue amounts included on 990 but not included in F/S	Realized gains (losses) \$6121629 Interest on temp cash investments \$4805 Dividends & Interest on securities \$6654978 Contributions to Endowment Fund \$1770834 431 Chestnut St rental expenses \$-57004 Loss on disposition of property \$-148734

Part XIII Supplemental Information (continued)								
Return Reference	Explanation							
Part XII, Line 2d Other expenses and losses per audited F/S	431 Chestnut St rental expenses \$57004 Loss on disposition of property \$148734							

Schedule D (Form 990) 2015

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As Filed Data -

DLN: 93493225025136

Employer identification number

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

AMERICAN PHILOSOPHICAL SOCIETY

► Attach to Form 990.

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

Open to Public Inspection

					23-1353269						
Pa	General Informatio Complete if the organ				14b.						
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?										
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.										
3	Activites per Region (The follow	ving Part I, line	3 table can be d	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)		gia	. eg.e,							
(2)										
(3)										
(4)										
(5)										
3	a Sub-total										
	b Total from continuation sheets to Part I										
	c Totals (add lines 3a and 3b)	the Instructions	for Form COC	Cat	 No 50082W Sched o						
LOL I	Paperwork Reduction Act Notice, see	the instructions	IOF FORM 990.	Cal	NU DUUGZW Schedi	ule F (Form 990) 2015					

Schedule F (Form 990) 2015

Comple		tion answered "Ye	nizations or Entitic es" to Form 990, Par			eived more than \$5	5,000. Part II can be	duplicated if
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
(1)								
(2)								
(3)								
(4)								
			ted above that are re e or counsel has pro					l
3 Enter total nu	umber of other or	ganızatıons or en	itities				•	

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 addit	tional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Franklin research Grant	East Asıa	1	3,000	Check			FMV
(2) Franklin research Grant	Europe	3	17,000	Check	1		FMV
(3) Franklin Research Grant	Mıddle East	2	10,000	Check	1		FMV
(4) Library Resident Research Grant	Europe	1	3,000	Check	!		FMV
(5) Library Resident Research Grant	Europe	1	3,000	EFT			FMV
(6) Phillips Native American Grant	North America	4	13,900	Check			FMV
(7)					1		
(8)					1		
(9)							
(10)					1		
(11)					1		
(12)							
(13)							
(14)		1					
(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)	Γ	Yes	V	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)	Γ	Yes	্	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	모	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	V	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	굣	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)	Г	Yes	ন	No

Schedule F (Form 990) 2015

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 - Grantmakers Explanation For Monitoring Use of	The American Philosophical Society has certain committees that				
unds Outside US	areresponsible for the sele				
	ction of individuals receiving disbursements in furtherance of the exempt				
	programs An appl ication for a grant mustbe submitted either electronically or on typewritten				
	forms provide				
	d for that purpose Awards are made by the Society's Committees in				
	accordancewith the follo				
	wing principles 1 Grants are intended to assist investigators by providing				
	forcosts of r				
	esearch work, such as the collection of scientific and literary materials,				
	preparation of p				
	hotographs, microfilms, and otherrecords, purchases of supplies,				
	necessary travel, and oth				
	er incidentalexpenses of research 2 Grants are not made toward the payment of salaries o				
	f members of the staff of an educational or scientific institution. Grants ma				
	notinclude i				
	nstitutional overhead When a grant is made to a member of aninstitution to				
	assist him or				
	her in research of scholarly writings, it is expected that the institution will				
	cooperate I				
	n facilitating thework 3 Grants are not made for (a) salaries, fellow ships				
	scholarship				
	s,or other projects involving personal expenses over long periods, (b)				
	subsidies for public ation, (c) usual or permanent equipment for theinstitution involved (but ma				
	be made for s				
	pecial apparatus needed in the proposed research), (d) travel to meetings.				
	(e) expense of g				
	rantee's family 4 Support of a long-continuing project is not undertaken,				
	except inits i				
	nitial stage 5 No recipient of a grant shall thereby become an employee of				
	theSociety Th				
	e written agreement with the grantee's sets forth the specificobjectives o				
	the grant and requires each recipient to file a writtenreport with the Society in the formation				
	notificatio				
	n sent to all recipients of grants there is arequest that credit be given to the				
	Society i				
	n the publication of worksupported by such grants and that a copy of each				
	publication be s				
	ent to the Society To this has been added another statement that the				
	Committee on Publica				
	tions would appreciate an opportunity to consider publication of a				
	manuscript, but there i				
	s no obligation that such a paper be published by the Society				

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

OMB No 1545-0047

DLN: 93493225025136

Open to Public Inspection

Department of the

(Form 990)

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

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

nternal Revenue Service			- (1 01111 050) unu 110 1110				
ame of the organization MERICAN PHILOSOPHICAL	COCIETY					Employer identific	ation number
MERICAN PHILOSOPHICAL	SOCIETY					23-1353269	
Part I General Inform	nation on Grants	and Assistance				·	
Does the organization ma the selection criteria usedDescribe in Part IV the or	d to award the grants	orassistance?				ssistance, and	√Yes √N
			<mark>omestic Governments.</mark> (dditional space is neede		ızatıon answered "Yes" o	on Form 990, Part IV, line	21, for any recipient
(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
The Papers of Benjamin (1) Franklin Yale Univ Library 1603 A Yale St New Haven, CT 06520	06-0646973	501(C)(3)	15,000	0	FM∨		Franklin Papers Project
						 	
						 	
						 	
							+
							-
2 Enter total number of sect	tion 501(c)(3) and go	vernment organization	s listed in the line 1 tab	ole			1

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

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) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Franklın Research Grant	91	461,700		FMV	
(2) Lewis and Clark Fund Grants	44	176,355		FMV	
(3) Phillips Native American	13	44,700		FMV	
(4) Daland Fellowships	4	100,000		FMV	
(5) Library Resident Research Grant	20	59,500		FMV	
(6) John Hope Franklın Fellowshıp	1	20,000		FMV	
(7) APS/ Kauffman Fellowships	2	120,000		FMV	

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

Schedule I (Form 990) 2015

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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.

Open to Public Inspection

Internal Revenue Service Name of the organization AMERICAN PHILOSOPHICAL SOCIETY

Employer identification number

23-1353269 **Questions Regarding Compensation** No Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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 W-2 and/or 1099-MISC compensation			(C) Retirement and	` '	(E) Total of columns	(F) Compensation in
		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
1 Dr Keith S Thomson Exc Off/Councl	(i)	200,935			4,075	7,578	212,588	
	(ii)							
2 John WolfeFinancial Offic	(i)	152,749			3,812	25,341	181,902	
	(ii)							

Schedule J (Form 990) 2015

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2015

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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶ 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

Noncash Contributions

Open to Public Inspection

	ne of the organization RICAN PHILOSOPHICAL SOCIETY				Employer identificat	ion num	ber	
AME	RICAN PHILOSOPHICAL SOCIETY	23-1353269						
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	(d Method of d noncash contrib	etermını		:s
1	Art—Works of art							
2	Art—Historical treasures .	Х	16					
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	Other ► ()							
	Other ► ()							
28 29	Other ► () Number of Forms 8283 received	by the oran	L	r for contributions				
29	for which the organization comple				29			
	·		,	•	1	1	res	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	ıt must hold for at least three ye	ars from th	e date of the initial contribu	ition, and which is not requ	red to be used			
	for exempt purposes for the enti	re holdina r	period?			30a		Νo
t	If "Yes," describe the arrangement					Jua		140
31	Does the organization have a gif	t acceptan	ce policy that requires the	review of any non-standard	contributions?	31 Y	/es	
32a	Does the organization hire or us contributions?	•	=	to solicit, process, or sell	noncash	32a		No
Ŀ	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	: in column (c) for a type of	property for which column	(a) is checked,			

Part II Suppl

Supplemental 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
	CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENT OF
Reported	ACTIVITIES BECAUSE THE SOCIETY DOES NOT CAPITALIZE ITS COLLECTIONS ASALLOWED
	BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES UNDER SFAS 116 (ASC 958-360-250)

Schedule M (Form 990) (2015)

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

Open to Public Inspection

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

Return Reference	Explanation			
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	THE SOCIETY HAS MEMBERS THE MEMBERS DO NOT RECEIVE A SHARE OF THE SOCIETY'S PROFITS AND THERE ARE NO MEMBER DUES			
Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	THE MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY (COUNCIL) AND APPROVE SPECIFIC DECISIONS OF COUNCIL AS THE LAWS DIRECT			
Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	ALL COUNCIL DECISIONS RELATING TO THE CHARTER, THE LAWS, AND THE COMPOSITION AND SIZE OF THE MEMBERSHIPS APPROVAL			
Form 990, Part VI, Line 11b Form 990 Review Process	1 A COPY OF FORM 990 IS PROVIDED TO THE COMMITTEE ON AUDIT AND TO EVERY VOTING MEMBER OF THE COUNCIL 2 THE TREASURER AND THE CHAIR OF THE COMMITTEE ON AUDIT ARE RESPONSIBLE FOR S OLICITING COMMENTS FROM THE COMMITTEE ON AUDIT AND RECEIVING COMMENTS FROM THE COUNCIL WIT HIN A FIXED REASONABLE PERIOD OF TIME BEFORE THE EXPECTED (INITIAL OR EXTENDED) FILING DUE DATE THE TREASURER AND CHAIR OF THE COMMITTEE ON AUDIT REPORT ANY CONCERNS TO THE EXECUT IVE AND ADMINISTRATIVE OFFICERS FOR REVIEW THE EXECUTIVE OFFICER RESPONDS TO THE TREASURE R AND THE CHAIR OF THE COMMITTEE ON AUDIT IN A REASONABLE MANNER THE EXECUTIVE OFFICER AF			
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	COVERED PERSONS ARE SOLICITED ANNUALLY, ASKING THESE INDIVIDUALS TO REPORT ANY POSSIBLE POTENTIAL CONFLICT			
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	PRESIDENT AND TREASURER APPROVE THE COMPENSATION ARRANGEMENT AFTER REVIEW OF COMPARABILITY DATA ALONG WITH THE PIERSON STUDY DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION OF THE EXECUTIVE OFFICER ARE AN INTEGRAL PART OF THE OVERALL COMPENSATION REPORT TO COUNC IL			
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	COMPARABILITY DATA ARE UTILIZED AND ALL SALARIES ARE DETERMINED AT THE DISCRETION OF THE EXECUTIVE OFFICER			
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE SOCIETY'S YEARBOOK FOR 2015 GIVES A COMPLETE ACCOUNT OF THE SOCIETY'S ACTIVITIES IT A LSO INCLUDES A COPY OF ITS LAWS AND POLICIES A COPY WILL BE FURNISHED UPON REQUEST FINAN CIAL STATEMENTS ARE AVAILABLE UPON REQUEST			
Other Changes In Net Assets Or Fund Balances - Other Decreases	Change in pension benefit liability = -\$118826			
Other Changes In Net Assets Or Fund Balances - Other Increases	Change in Postretirement benefit liability = \$118989			
Other Changes In Net Assets Or Fund Balances - Other Decreases	Realized gain attributale to annuity obligation = -\$60714			
Other Changes In Net Assets Or Fund Balances - Other Increases	Unrealized loss attributable to annuity obligation = \$91136			