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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final
☒ Return/terminated
☐ Amended return
☐ Application pending

C Name of organization
AMERICAN MATHEMATICAL SOCIETY

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
201 CHARLES STREET

City or town, state or province, country, and ZIP or foreign postal code
PROVIDENCE, RI 029042294

F Name and address of principal officer
CATHERINE ROBERTS
201 CHARLES STREET
PROVIDENCE, RI 029042294

I Tax-exempt status
☒ 501(c)(3) ☐ 501(c) () (Insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW AMS ORG

D Employer identification number
05-0264797

E Telephone number
(401) 455-4000

G Gross receipts \$ 40,817,683

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number

L Year of formation 1888

M State of legal domicile DC

K Form of organization ☐ Corporation ☐ Trust ☒ Association ☐ Other

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE SOCIETY'S BROAD MISSION IS TO FURTHER THE INTEREST OF MATHEMATICAL RESEARCH, SCHOLARSHIP AND EDUCATION, WHICH IS ACCOMPLISHED THROUGH PUBLICATIONS, MEETINGS, SERVICES, ADVOCACY IN EDUCATION, RESEARCH AND OTHER AREAS

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 8

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 7

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 236

6 Total number of volunteers (estimate if necessary) 6 550

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 22,094

7b Net unrelated business taxable income from Form 990-T, line 34 7b 19,303

Revenue

8 Contributions and grants (Part VIII, line 1h) 8 5,206,790

9 Program service revenue (Part VIII, line 2g) 9 23,721,206

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 3,539,687

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 0

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 32,467,683

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 13 653,719

14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0

Prior Year

Current Year

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

PLEASE SEE SCHEDULE O THE AMERICAN MATHEMATICAL SOCIETY, FOUNDED IN 1888 TO FURTHER THE INTERESTS OF MATHEMATICAL RESEARCH SCHOLARSHIP AND EDUCATION SERVES THE NATIONAL AND INTERNATIONAL MATHEMATICAL COMMUNITY THROUGH ITS

Yes	No
-----	----

[illegible]

Yes

No

20a. Did the organization generate one or more hospital volumes? If "Yes" complete Schedule U.

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	618	1c	Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
1c Enter the number of employees reported on Form W-2. Transmittal of W-2s and					

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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?		No

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

- 11** ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12** ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

12a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s) typically by giving the supported

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) T CHRISTINE STEVENS ASSOC EXEC DIR (19) THOMAS RLYTHE	40 00				X			163,322	0	27,685

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, 8, or 9 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 (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4						

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants
and Other Similar Amounts

1a Federated campaigns . . .	1a	
b Membership dues . . .	1b	2,430,493
c Fundraising events . . .	1c	
d Related organizations	1d	
e Government grants (contributions)	1e	864,302
f All other contributions, gifts, grants, and similar amounts not included above	1f	1,911,995
g Noncash contributions included in lines 1a-1f \$ _____		
h Total. Add lines 1a-1f		5,206,790

(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
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Program Service Revenue

	Business Code				
2a PUBLICATIONS	541900	21,183,223	21,183,223		
b MEETINGS	541900	1,438,623	1,416,529	22,094	
c SALE OF SERVICE	541900	590,102	590,102		
d SERVICES AND OUTREACH	541900	487,252	487,252		
e OTHER	900099	22,006	22,006		
f All other program service revenue					
g Total. Add lines 2a-2f		23,721,206			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		3,539,687			3,539,687
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	8,350,000				
b Less cost or other basis and sales expenses	8,350,000				
c Gain or (loss)	0				
d Net gain or (loss)					
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less direct expenses	b				
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	391,941	391,941		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	222,094	222,094		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	39,684	39,684		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,704,667	1,075,233	629,434	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,378,062	12,337,590	812,474	227,998
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,383,769	1,244,637	128,079	11,053
9 Other employee benefits	2,518,679	2,266,090	237,277	15,312
10 Payroll taxes	1,064,986	949,772	98,141	17,073
11 Fees for services (non-employees)				
a Management				
b Legal	38,136	25,920	11,004	1,212
c Accounting	111,111	20,223	88,914	1,974
d Lobbying				
Professional fundraising services. See Part IV, line 17.				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,018,326	1	1,131,379
	2	Savings and temporary cash investments		15,164,171	2	15,260,782
	3	Pledges and grants receivable, net		100,985	3	133,427
	4	Accounts receivable, net		1,049,422	4	419,773
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		1,291,914	8	1,360,939
	9	Prepaid expenses and deferred charges		2,607,233	9	2,226,714
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	15,889,675		
	b	Less: accumulated depreciation	10b	10,803,020		
				4,379,850	10c	5,086,655
	11	Investments—publicly traded securities		127,034,621	11	140,116,402
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
15	Other assets. See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 34)		152,646,522	16	165,736,071	
Liabilities	17	Accounts payable and accrued expenses		4,446,993	17	4,927,135
	18	Grants payable			18	
	19	Deferred revenue		12,613,091	19	12,926,112
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		7,321,355	25	7,646,939
	26	Total liabilities. Add lines 17 through 25		24,381,439	26	25,500,186
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		111,903,368	27	122,198,789
	28	Temporarily restricted net assets		10,665,546	28	11,667,789
	29	Permanently restricted net assets		5,696,169	29	6,369,307
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		128,265,083	33	140,235,885
34	Total liabilities and net assets/fund balances		152,646,522	34	165,736,071	

Additional Data

Software ID:
Software Version:
EIN: 05-0264797
Name: AMERICAN MATHEMATICAL SOCIETY

Form 990 (2016)

Form 990, Part III, Line 4a:

PUBLICATION AND DISSEMINATION OF MATHEMATICAL LITERATURE, INCLUDING RESEARCH JOURNALS, BOOKS OF GENERAL MATHEMATICAL INTEREST, GRADUATE AND UPPER LEVEL UNDERGRADUATE COURSE MATERIAL, PROCEEDINGS OF MEETINGS IN CURRENT TOPICAL AREAS AND HIGH LEVEL RESEARCH MONOGRAPHS AMS PUBLICATIONS ALSO INCLUDE THE MATHEMATICAL REVIEWS DATABASE, MATJOCNET, THE OPENMATH MATHEMATICAL RESEARCH TOOL, CONTAINING CITATIONS AND

Form 990, Part III, Line 4b:

MEMBERSHIP AND OUTREACH ACTIVITIES, AS WELL AS PROFESSIONAL SERVICES AND PROGRAMS FOR THE MATHEMATICAL COMMUNITY, SUCH AS EMPLOYMENT SERVICES, GRANT OR ENDOWMENT SUPPORTED CONFERENCES, SURVEYS OF THE PROFESSION, ENDOWMENT SUPPORTED PRIZES, AWARDS, SCHOLARSHIPS AND FELLOWSHIPS FOR ACHIEVEMENTS IN MATHEMATICS, HIGH SCHOOL OUTREACH, PUBLIC AWARENESS, AND OTHER PROGRAMS THE SOCIETY HAS APPROXIMATELY 30,000 INDIVIDUAL AND INSTITUTIONAL MEMBERS, WITH NO CRITERIA FOR MEMBERSHIP, WHO ARE SERVED THROUGH THE MEMBERSHIP PROGRAM TO SUPPORT ITS MISSION, THE SOCIETY AWARDED FELLOWSHIPS, PRIZES, AND OTHER AWARDS TO APPROXIMATELY 203 INDIVIDUALS AND ORGANIZATIONS, TOTALING MORE THAN \$653,000 THE SOCIETY ALSO RECEIVED FUNDING FROM INDIVIDUALS, FOUNDATIONS, AND FEDERAL GRANTS TO FUND EXPENSES FOR APPROXIMATELY 392 MATHEMATICIANS TO ENGAGE IN MATHEMATICAL RESEARCH AND COLLABORATION

Form 990, Part III, Line 4c:

MEETINGS OF THE SOCIETY INCLUDE THE ANNUAL JOINT MATHEMATICAL MEETING HELD IN JANUARY EACH YEAR AND CO-SPONSORED WITH THE MATHEMATICAL ASSOCIATION OF AMERICA. IN ADDITION, EIGHT TO NINE SECTIONAL MEETINGS ARE HELD IN FOUR REGIONS OF THE U.S. EACH YEAR. THE JOINT MATHEMATICS MEETING, HELD IN SEATTLE, WASHINGTON, IN 2016 HAD ATTENDANCE OF MORE THAN 6,200 PARTICIPANTS.

SCHEDULE A (Form 990 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2016 Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization AMERICAN MATHEMATICAL SOCIETY		Employer identification number 05-0264797

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university _____
- 10 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s) _____

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, 8, or 9 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 (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						
14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))					14	
15 Public support percentage for 2015 Schedule A, Part II, line 14					15	
16a 33 1/3% support test—2016. 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—2015. 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—2016. 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 organization ▶ ☐						
b 10%-facts-and-circumstances test—2015. 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 ▶ ☐						
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐						

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

(Complete only if you checked the box on line 10 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 year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,633,274	4,902,889	4,581,648	6,272,338	5,206,790	24,596,939
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	22,431,481	22,224,687	22,849,699	22,855,888	23,699,112	114,060,867
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	26,064,755	27,127,576	27,431,347	29,128,226	28,905,902	138,657,806
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	5,390	7,506	11,445	9,630	20,652	54,623
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	5,390	7,506	11,445	9,630	20,652	54,623
8 Public support. (Subtract line 7c from line 6.)						138,603,183

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 Amounts from line 6	26,064,755	27,127,576	27,431,347	29,128,226	28,905,902	138,657,806
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,342,514	2,010,166	3,588,750	2,889,375	3,539,687	15,370,492
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	22,963	17,673	19,401	21,361	20,303	101,701
c Add lines 10a and 10b	3,365,477	2,027,839	3,608,151	2,910,736	3,559,990	15,472,193
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income (Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	29,430,232	29,155,415	31,039,498	32,038,962	32,465,892	154,129,999
14 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

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	89.930 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	90.470 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	10.040 %
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	9.510 %

19a 33 1/3% support tests—2016. 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. ► ☒

b 33 1/3% support tests—2015. 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. ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.
- 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).
- 3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		

Part IV **Supporting Organizations** (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		

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

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

Section A - Adjusted Net Income

- 1** Net short-term capital gain
- 2** Recoveries of prior-year distributions
- 3** Other gross income (see instructions)
- 4** Add lines 1 through 3

	(A) Prior Year	(B) Current Year (optional)
1		
2		
3		
4		

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 VI, Section E, lines 2, 5 and 6. Also complete this

- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4** Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
2				
3				
4				
5				
6				

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

Cat. No. 50084S

Schedule C (Form 990 or 990-EZ) 2016

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 Circumstances Test

Balance sheet and include identifiable the text of the footnote to the organization's financial statements that describes

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		220,640
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			220,640
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year	2b	
b	Carryover from last year	2c	
c	Total	3	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5	Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2016

**Open to Public
Inspection**

Name of the organization
AMERICAN MATHEMATICAL SOCIETY

Employer identification number

05-0264797

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

- | | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |
- 5 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? ☐ Yes ☐ No
- 6 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 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 | |

2 Complete lines 3a through 3d if the organization holds a qualified conservation contribution in the form of a conservation

f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract			

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** ☐ Public exhibition
- b** ☐ Scholarly research
- c** ☐ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII**5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?☐ Yes ☐ No**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?☐ Yes ☐ No**b** If "Yes," explain the arrangement in Part XIII and complete the following table**c** Beginning balance**d** Additions during the year**e** Distributions during the year**f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?☐ Yes ☐ No**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	126,292,142	125,950,063	114,540,023	93,592,283	81,005,555
b Contributions	2,659,518	2,648,873	2,252,727	1,980,666	2,253,825
c Net investment earnings, gains, and losses	12,475,475	213,824	11,513,778	20,945,637	12,560,503
d Grants or scholarships					
e Other expenditures for facilities and programs	3,108,053	2,520,618	2,356,465	1,978,563	2,227,600
f Administrative expenses					
g End of year balance	138,319,082	126,292,142	125,950,063	114,540,023	93,592,283

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as**a** Board designated or quasi-endowment ▶ 88 350 %**b** Permanent endowment ▶ 4 600 %**c** Temporarily restricted endowment ▶ 7 050 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by**(i)** unrelated organizations**(ii)** related organizations**b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		No
3a(ii)		No
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		422,507		422,507
b Buildings		8,066,143	6,313,639	1,752,504
c Leasehold improvements				
d Equipment		6,640,562	4,175,332	2,465,230

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
POSTRETIREMENT BENEFIT OBLIGATION	7,646,939
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	7,646,939

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	42,201,041
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	9,453,317
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	280,041
e	Add lines 2a through 2d	2e	9,733,358
3	Subtract line 2e from line 1	3	32,467,683
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	32,467,683

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	30,230,239
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	30,230,239
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 : [REDACTED]		

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

- Section 527 organizations. Complete Part I-A only.

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of the organization AMERICAN MATHEMATICAL SOCIETY	Employer identification number
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Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:**Software Version:**

EIN: 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE INCOME FROM ENDOWMENT FUNDS FROM DONORS IS USED FOR SPECIFIC PURPOSES, SUCH AS PRIZES, LECTURES, SCHOLARSHIPS, GRANTS AND OUTREACH PROJECTS. THE MAJORITY OF THE ENDOWMENT FUNDS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE SOCIETY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. THE SOCIETY HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AND ITS DETERMINATIONS TO CLASSIFY INCOME AS RELATED AND UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITIONS, HOWEVER, THE SOCIETY HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. THE C

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	POSTRETIREMENT BENEFIT CHANGES -172,266 DEPRECIATION OF LABOR FOR IN HOUSE SOFTWARE DEVELOPMENT -57,438 LABOR DEPRECIATION 509,745

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EAST ASIA AND THE PACIFIC	FAN FUND CHINA EXCHANGE PROGRAM	8,350	WIRE			

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**
- 3 Enter total number of other organizations or entities **1**

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

Part III can be duplicated if additional space is needed.

[illegible]

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)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☒ Yes ☐ No

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).

Return Reference	Explanation
PART I, LINE 2	THE AMERICAN MATHEMATICAL SOCIETY AWARDS VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND COLLABORATE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONITORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLANS FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER, A REPORT ON THE USE OF THE FUNDS IS ALSO REQUIRED THE APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WORK OR RESEARCH RESULTS THAT HAVE ALREADY BEEN COMPLETED

Additional Data

Software ID:
Software Version:
EIN: 05-0264797
Name: AMERICAN MATHEMATICAL SOCIETY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTMAKING		6,700
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		14,634
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		6,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		12,350
EUROPE (INCLUDING ICELAND & GREENLAND)	0	3	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	411,474
NORTH AMERICA	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	
SOUTH AMERICA	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	SALES - MATH PUBLICATIONS	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493312014657

Schedule I
(Form 990)

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," 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.

Name of the organization
AMERICAN MATHEMATICAL SOCIETY

Employer identification number
05-0264797

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 19

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
See Additional Data Table					
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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
PART I, LINE 2	THE AMERICAN MATHEMATICAL SOCIETY AWARDS VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND COLLABORATE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONTIORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLANS FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER, A REPORT ON THE USE OF THE FUNDS IS ALSO REQUIRED THE APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WORK OR RESEARCH RESULTS THAT HAVE ALREADY BEEN COMPLETED
SCHEDULE I, PART I, LINE 2	GRANTS AND AWARDS TO ORGANIZATIONS AND INDIVIDUALS OCCUR UNDER THE VARIOUS OUTREACH ACTIVITIES OF THE SOCIETY, EACH WITH ITS OWN SET OF CRITERIA FOR THE AWARDEE AND HOW THAT AWARDEE IS EXPECTED TO USE THE FUNDS MANY GRANTS/AWARDS HAVE NO CRITERIA AS TO USE, SUCH AS THE MANY PRIZES SUPPORTED BY TRUE ENDOWMENT FUNDS FOR THOSE THAT DO HAVE CRITERIA AS TO USE, SUCH AS THE EPSILON AWARDS TO ORGANIZATIONS AND THE MATH IN MOSCOW GRANTS TO INDIVIDUAL STUDENTS, ADHERENCE TO THE TERMS OF THE GRANT/AWARD IS MONITORED BY STAFF IN THE MEMBERSHIP AND PROFESSIONAL PROGRAMS DEPARTMENT APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES ADDITIONALLY, ONCE THE PURPOSE FOR WHICH THE AWARD OR GRANT WAS MADE IS COMPLETE, THE AWARDEE IS REQUIRED TO FILE A REPORT WITH THE SOCIETY

Additional Data

Software ID:
Software Version:
EIN: 05-0264797
Name: AMERICAN MATHEMATICAL SOCIETY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 PRESIDENT & TRUSTEES OF WILLIAMS COLLEGE PO BOX 624 WILLIAMSTOWN, MA 01267	04-2104847	501(C)(3)	8,500				EPSILON AWARD
MAA 1529 EIGHTEENTH STREET NW WASHINGTON, DC 20036	16-0743079	501(C)(3)	25,000				ANNUAL SUPPORT & PROJECT NEXT FELLOWS SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 ART OF PROBLEM SOLVING FOUNDATION PO BOX 4499 NEW YORK, NY 10163	20-1239616	501(C)(3)	10,000				EPSILON AWARD
MATHPATH FOUNDATION 63 FAIRVIEW ROAD SKILLMAN, NJ 08558	20-1290489	501(C)(3)	5,000				EPSILON AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK MATH CIRCLE PO BOX 1992 NEW YORK, NY 10113	26-1162539	501(C)(3)	5,000				EPSILON AWARD
FRIENDS OF THE IMU 201 CHARLES STREET PROVIDENCE, RI 02904	26-3185549	501(C)(3)	5,000				ANNUAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EUCLID LAB 160 MILLEDGE TERRACE ATHENS, GA 30606	27-2340588	501(C)(3)	5,000				EPSILON AWARD
MATHEMATICAL STAIRCASE INC 231 W FRANKLIN STREET HOLYOKE, MA 01040	46-1813949	501(C)(3)	13,500				EPSILON AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SACNAS PO BOX 8526 SANTA CRUZ, CA 950618526	52-1443811	501(C)(3)	5,000				ANNUAL SUPPORT
ASSOCIATION OF AMERICAN UNIVERSITIES 1200 NEW YORK AVENUE NW SUITE 550 WASHINGTON, DC 20005	52-2947112	501(C)(3)	5,000				GOLDEN GOOSE AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AAAS - DC 1200 NEW YORK AVENUE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	10,000				MASS MEDIA FELLOWSHIP SUPPORT
MATHEMATICS FOUNDATION OF AMERICA CANADAUSA MATHCAMP 129 HANCOCK STREET CAMBRIDGE, MA 02139	57-1035414	501(C)(3)	5,000				EPSILON AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON DEPT OF MATH BOX 354350 SEATTLE, WA 98195	91-6001537	115	5,000				EPSILON AWARD
TEXAS STATE UNIVERSITY MATHWORKS 601 UNIVERSITY DRIVE SAN MARCOS, TX 78666	94-2960235	115	5,000				EPSILON AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROWN UNIVERSITY OFFICE OF SPONSORED PROJECTS BOX 1929 164 ANGELL STREET PROVIDENCE, RI 02912	05-0258809	501(C)(3)	5,000				EPSILON AWARD
NATIONAL ASSOCIATION OF MANUFACTURERS 733 10TH STREET NW 700 WASHINGTON, DC 20001	13-1084330	501(C)(6)	5,000				ANNUAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VICE PROVOST FOR FACULTY ADVANCEMENT & INTITUTIONAL DIVERSITY WASHINGTON U 1 BROOKINGS DRIVE CAMPUS BOX 1233 SAINT LOUIS, MO 63130	43-0653611	501(C)(3)	15,000				ANNUAL SUPPORT
SIGMACAMP INC 68 UPPER SHEEP PASTURE ROAD E SETAUKEY, NY 11733	46-2782877	501(C)(3)	7,000				EPSILON AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN INSTITUTE OF MATHEMATICS 600 E BROKAW ROAD SAN JOSE, CA 95112	94-3205114	501(C)(3)	10,000				EPSILON AWARD
CALIFORNIA STATE UNIVERSITY DEPT OF MATHEMATICS 18111 NORDHOFF STREET NORTHRIDGE, CA 91330	95-6196006	501(C)(3)	5,000				EXEMPLARY PROGRAM OR ACHEIVEMENT AWARD

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
COE IMPACT AWARD	2	1,000			
CONANT PRIZE	1	1,000			
DISTINGUISHED PUBLIC SERVICE AWARD	1	4,000			
ISEF-MENGER AWARD	2	2,500			
MATH ART EXHIBITION AWARD	3	1,000			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
MATH IN MOSCOW SCHOLARSHIP	9	91,800			
MOORE RESEARCH ARTICLE PRIZE	2	2,500			
MORGAN PRIZE	1	1,200			
ROBBINS PRIZE	1	1,667			
STEELE PRIZE - LIFETIME ACHIEVEMENT	1	10,000			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
STEELE PRIZE - MATHEMATICAL EXPOSITION	3	5,001			
STEELE PRIZE - SEMINAL CONTRIBUTION	1	5,000			
TRJITZINSKY SCHOLARSHIPS	7	21,000			
VEBLEN PRIZE	2	5,000			
WIENER PRIZE	1	5,000			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
2015-2016 CONGRESSIONAL FELLOWSHIP	1	38,567			
2016-2017 CONGRESSIONAL FELLOWSHIP	1	25,859			

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
AMERICAN MATHEMATICAL SOCIETY

Employer identification number
05-0264797

Part I

Questions Regarding Compensation

	Yes	No
1a 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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b 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	
2 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	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☐ Approval by the board or compensation committee		
4 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: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a 4b 4c	No No No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 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: a The organization? b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5a 5b	No No
6 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: a The organization? b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6a 6b	No No
7 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	Yes
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

For each individual whose compensation must be reported 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 other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

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
PART I, LINE 7	FOR THE INDIVIDUALS WHO HAVE BONUSES LISTED, THESE ARE MERITORIOUS BONUSES REQUESTED BY MANAGERS. THESE ARE REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR, CFO AND DIRECTOR OF HUMAN RESOURCES.
FORM 990, PART VII, LINE 5	CARLA SAVAGE RECEIVED COMPENSATION FROM NORTH CAROLINA STATE UNIVERSITY, AN UNRELATED ORGANIZATION, FOR SERVICES RENDERED TO THE ORGANIZATION IN THE AMOUNT OF \$120,698. ROBERT BRYANT RECEIVED COMPENSATION FROM DUKE UNIVERSITY, AN UNRELATED ORGANIZATION, FOR SERVICES RENDERED TO THE ORGANIZATION IN THE AMOUNT OF \$30,000. KENNETH RIBET RECEIVED COMPENSATION FROM THE UNIVERSITY OF CALIFORNIA BERKELEY, AN UNRELATED ORGANIZATION, FOR SERVICES RENDERED TO THE ORGANIZATION IN THE AMOUNT OF \$5,000.

Additional Data

Software ID:

Software Version:

EIN: 05-0264797

Name: AMERICAN MATHEMATICAL SOCIETY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1KENNETH RIBETPRESIDENT	(i)	5,000	0	0	0	0	5,000	0
	(ii)	0	0	0	0	-0	-0	0
1ROBERT BRYANTPRESIDENT	(i)	30,000	0	0	0	0	30,000	0
	(ii)	0	0	0	0	-0	-0	0
2CARLA SAVAGESECRETARY	(i)	120,698	0	0	0	0	120,698	0
	(ii)	0	0	0	0	-0	-0	0
3DONALD MCCLUREEXECUTIVE DIRECTOR	(i)	201,317	0	59,122	33,119	9,808	303,366	0
	(ii)	0	0	0	0	-0	-0	0
4EMILY RILEYCHIEF FINANCIAL OFFICER	(i)	170,595	850	1,547	20,436	8,846	202,274	0
	(ii)	0	0	0	0	-0	-0	0
5EDWARD DUNNEEXECUTIVE EDITOR - MI	(i)	174,614	850	1,629	21,964	20,687	219,744	0
	(ii)	0	0	0	0	-0	-0	0
6SAMUEL RANKINASSOC EXEC DIR	(i)	233,965	0	3,214	30,259	15,575	283,013	0
	(ii)	0	0	0	0	-0	-0	0
7ROBERT HARINGTONASSOC EXEC DIR	(i)	212,221	850	872	27,338	19,490	260,771	0
	(ii)	0	0	0	0	-0	-0	0
8T CHRISTINE STEVENSASSOC EXEC DIR	(i)	158,312	850	4,160	18,688	8,997	191,007	0
	(ii)	0	0	0	0	-0	-0	0
9THOMAS BLYTHECHIEF INFORMATION OFFICER	(i)	162,063	650	1,509	19,904	19,389	203,515	0
	(ii)	0	0	0	0	-0	-0	0
10SERGET GELFANDPUBLISHER	(i)	145,324	650	2,343	17,288	15,652	181,257	0
	(ii)	0	0	0	0	-0	-0	0
11EROL OZILSYSTEM SUPPORT MANAGER	(i)	156,945	0	736	18,414	8,501	184,596	0
	(ii)	0	0	0	0	-0	-0	0
12GERARD LOONDIRECTOR INFO SYSTEMS	(i)	141,558	650	1,240	16,157	7,292	166,897	0
	(ii)	0	0	0	0	-0	-0	0
13ASSEN DONTCHEVASSOCIATE EDITOR	(i)	142,271	0	3,730	16,821	16,023	178,845	0
	(ii)	0	0	0	0	-0	-0	0

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue ServiceName of the organization
AMERICAN MATHEMATICAL SOCIETY**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

2016**Open to Public
Inspection****Employer identification number**

05-0264797

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE 990 IS PREPARED BY THE FISCAL DEPARTMENT AND THE SOCIETY'S TAX ADVISORS, CBIZ TOFIAS. WHEN THE FINAL DRAFT IS PREPARED, IT IS REVIEWED BY THE CHIEF FINANCIAL OFFICER AND THE EXECUTIVE DIRECTOR. AFTER THIS REVIEW, THE BOARD OF TRUSTEES IS ASKED TO REVIEW THE 990 ELECTRONICALLY BY ACCESSING A SECURE INTERNET SITE. THEY ARE GIVEN APPROXIMATELY THREE TO FIVE BUSINESS DAYS TO REVIEW THE DRAFT. AFTER RESPONDING TO ANY FEEDBACK FROM THE TRUSTEES, THE FILING IS MADE.

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	POSTRETIREMENT BENEFIT - RELATED CHANGES -172,266 DEPRECIATION OF LABOR FOR IN HOUSE SOFTWARE -57,438 LABOR DEPRECIATION 509,745

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
AMERICAN MATHEMATICAL SOCIETY

Employer identification number
05-0264797

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)MATHEMATICAL REVIEWS INC 416 FOURTH STREET ANN ARBOR, MI 48103 38-2489014	INACTIVE	MI	501(C)(3)		AMERICAN MATHEMATICAL SOCIETY	Yes	
(2)INTERNATIONAL CONGRESS OF MATHEMATICIANS CO AMS 201 CHARLES STREET PROVIDENCE, RI 02094 05-0405879	INACTIVE	RI	501(C)(3)		AMERICAN MATHEMATICAL SOCIETY	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2016

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

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation
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