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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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2016

OMB No 1545-1150

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

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

ΑI	For the	2016 calend	ar year, or tax year beginning , 2016, and ending			, 20					
B	Check if ap	eck if applicable C Name of organization American Chemical Society Division of Nuclear Chemistry and Technology				ntification number					
	Address cl	American chemical society division of nuclear chemistry and reciniology			52	-6060201					
	Name cha	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Telep	hone nu	mber					
=		itial return nal return/terminated c/o Alice Murray, Savannah River National Laboratory, 773-A, SRS			803	725-0440					
=	Amended		City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exem	nption					
_	Application		Aiken, South Carolina 29808	Nun	nber 🕨	0945					
G	Account	ing Method	✓ Cash	Check	▶ ☐ ıf	the organization is not					
L	Vebsite	:► www.	nucl-acs.org/			ch Schedule B					
JΤ	ax-exem	npt status (che	eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	(Form 9	90, 990	-EZ, or 990-PF)					
		organization									
L A	Add lines	s 5b, 6c, and	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	al assets							
(Pa	rt II, colu	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ .		▶ \$	60938.54					
Р	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instru	ctions						
			the organization used Schedule O to respond to any question in this Part			•					
_	1		ons, gifts, grants, and similar amounts received		11	29884.56					
	2		ervice revenue including government fees and contracts		2	0.00					
	3	_	ip dues and assessments		3	30943 61					
	4	Investment	•		4	23.10					
	5a		ount from sale of assets other than inventory 5a	0.00	1	20110					
	b		or other basis and sales expenses	0.00							
	C		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	0.00	5c	0.00					
	6	Gaming and fundraising events									
	a		ome from gaming (attach Schedule G if greater than		4						
ē	-	\$15,000) .		0.00							
Revenue	Ь		me from fundraising events (not including \$ of contributio								
ě	"		aising events reported on line 1) (attach Schedule G if the	113							
щ			th gross income and contributions exceeds \$15,000) 6b	0.00	188						
	C		et expenses from gaming and fundraising events 6c	0.00							
	ď		e or (loss) from gaming and fundraising events (add lines 6a and 6b and su								
		line 6c)	o or (1000) from garring and fariationing overthe (and inflood and obtained of		6d	0.00					
	7a	•	s of inventory, less returns and allowances	0.00	4-24 79°	0.00					
	b		of goods sold	0.00	1997 Y 1 1						
	C		it or (loss) from sales of inventory (Subtract line 7b from line 7a)	0.00	7c	0 00					
	8			• •	8	87 27					
	9		nue (describe in Schedule O)	7	9	60938.54					
_	10		d similar amounts paid (list in Schedule O)		10	10425.00					
	11		aid to or for members	•	11	0.00					
S	12	<u> </u>		• •	12	0.00					
Se	13	Profession	al fees and other payments to independent contractors of the contracto	• •	13	0.00					
ě	14	Occupance	y, rent, utilities, and maintenance	• •	14	0.00					
Expense	15		ublications, postage, and shipping	• •	15	0.00					
_	16		enses (describe in Schedule O)		16						
	17		enses. Add lines 10 through 16		17	43246.60					
_	18		(deficit) for the year (Subtract line 17 from line 9)		18	53671.60					
ets	19		s or fund balances at beginning of year (from line 27, column (A)) (must agree		10	7266.94					
SS	.~		ar figure reported on prior year's return)		10	440047.00					
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)		19	140947.28					
	20 21				20	0.00					
	141	inel assets	or fund balances at end of year. Combine lines 18 through 20	<u> </u>	21	148214.22					

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form **990-EZ** (2016)

Pa	Balance Sheets (see the instructions for	•		-		_
	Check if the organization used Schedule	O to respond to ar	y question in this			(D) Ford of 1999
			-	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			140947.28		148214.22
23	Land and buildings			0.00	-	0.00
24	Other assets (describe in Schedule O)			0.00		0.00
25 26	Total assets		· · · · · -	140947.28 0.00		148214.22
27	Net assets or fund balances (line 27 of column	(B) must agree with		140947.28	_	0.00 148214.22
Par					21	140214.22
<u> </u>	Check if the organization used Schedule					Expenses
Wha		scientific and profes				quired for section
	ribe the organization's program service accomplis			rogram convices		(c)(3) and 501(c)(4) anizations, optional for
as m	neasured by expenses. In a clear and concise money benefited, and other relevant information for ea	anner, describe the				ers)
28	The ACS Nuclear Chemistry and Technology Division		a at the two ACS 201	6 national		
	meetings These symposia provided information in the					
	Division's funds provided registration, travel and ven				l	
	(Grants \$) If this amount	includes foreign gra	nts, check here .	▶ 🗆	28	38772.25
29	The ACS Nuclear Chemistry and Technology Division	supported the ACS	National Award the	Glenn T.		
	Seaborg Award for Nuclear Chemistry. There is one	ecipient of this awar	d each year.			

	(Grants \$) If this amount	includes foreign gra	nts, check here .	<u>.</u> ▶ □	29	a 10000.00
30	The ACS Nuclear Chemistry and Technology Division	provides travel expe	enses for two NUCL I	Division		
	Councillors to attend the ACS 2016 National Meetings)				
		includes foreign gra	nts, check here .	<u> ▶ ⊔</u>	30	a 3559.35
31	Other program services (describe in Schedule O)					
22			nts, check here .		31:	
Par	Total program service expenses (add lines 28a t		one even if not com			
Fall	Check if the organization used Schedule				nsur	ictions for Part IV)
	Check if the organization used Schedule		(c) Reportable	(d) Health benefits,	÷	<u> </u>
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	contributions to employ) Estimated amount of other compensation
Paul	Benny	II.)		
<u>Chai</u>	r	4	0.00	0.0	00	0.00
Laeti	tia DelMau					
	r Elect	2	0.00	0.0	00	0.00
	Francesconi					
	Chair	1	0.00	0.0	00	0.00
	er McDonald	_				
	etary	1	0 00	00	00	0.00
	Murray		0.00			0.00
	Surer	1	0.00	0.0		0.00
	am Peaslee ncilor	0.3	0.00	0.0		0.00
	a Jurisson	0.3	0.00	0.0	-	
	ncilor	0.3	0.00	0.0		0.00
	n Shaughnesy	0.3	0.00	0.0	~	
	nate Councilor	0.1	0.00	0.0	200	0.00
	nne Lapi	<u> </u>		<u> </u>	_	
	ber at Large	0.1	0.00	0.0	00	0.00
	Clark			<u> </u>		
-	ber at Large	0.1	0.00	0.0	00	0.00
	Terry			T	+	
	Program Chair	0.5	0.00	0.0	00	0.00
	Hixon					
	ng Program Chair	0.5	0.00	0.0	00	0.00

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this		√. Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		√
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		√
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.00 Did the organization file Form 1120-POL for this year?	37b 38a		
b 39 a b 40a	If "Yes," complete Schedule L, Part II and enter the total amount involved	-		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ► Alice M. Murray Located at ► Savannah River National Laboratory, Bldq 773-A, Aiken, South Carolina ZIP + 4 ►	803 72 298		0
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	250		No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	If "Yes," enter the name of the foreign country. ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).]		
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	·		▶ ∐
44a	Did the ergopization maintain any denor advised funds during the year? If "Yee" Form 000 must be		Yes	No
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	ļ	1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		-

-		,						Yes	No
		e organization engage, directly or in didates for public office? If "Yes," c						Tes	NO ✓
Part V]	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	only s must answer que	estions 47–49b and	d 52, and	complete th	<u> </u>	or lin	es
		check if the organization used Sci	ledule O to respond	To any question in	uiis Fait	<u>VI</u>	· · · ·	Yes	No
		e organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) elect		-		163	√
48 !	s the	organization a school as described in	section 170(b)(1)(A)(i)? If "Yes," complete	Schedule	εE	. 48		7
							1		
		s," was the related organization a se	•	-					
		lete this table for the organization's							
e	emplo	yees) who each received more than	\$100,000 of comper	nsation from the org	anızation.	If there is non	e, enter "N	lone.	,
	(a) !	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	contribut benefit pla	ealth benefits, lons to employee ans, and deferred npensation	(e) Estimate other cor		
None									
			-				<u> </u>	 -	
					<u> </u>				
51 (Comp (100,	number of other employees paid over lete this table for the organization of compensation from the organization and business address of each independent	s five highest compo nization. If there is no	ensated independer			received		e than
None		· · · · · · · · · · · · · · · · · · ·							 -
				<u> </u>					
				-					
				-					
							- -		
				-	_ 			-	
	Total	number of other independent contra	octors each receiving	over \$100 000	. •	<u> </u>	0		
52 [Old t	he organization complete Scheduleted Schedule A	-			s must attac	ha ▶ ⊘Ye :	. П	No
Under per	nalties	of perjury, I declare that I have examined this in decomplete. Declaration of preparer (other than		nying schedules and state	ments, and to				
		Signature of officer	4			March	13,20	17	
Sign Here		Alice M. Murray, Treasurer, Americ	can Chemical Society,	Division of Nuclear C	Chemistry a	Date and Technolog	<u>y</u>		
	Ш,	Type or print name and title							
Paid Prepa	rar	Print/Type preparer's name	Preparer's signature		Date	Check Self-emplo			
Prepa Use O		Firm's name				Fırm's EIN ▶			
Jac U	וייי	Firm's address ▶				Phone no			
May the	<u>, 100</u>	discuss this return with the propared	chown shove? See	inetructione			► □ Va	<u> </u>	No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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

Internal Revenue Service Inspection Employer identification number Name of the organization American Chemical Society Division of Nuclear Chemistry and Technology 52-6060201 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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. 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 331/3% 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 33½% 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.) 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. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (iii) Type of organization (i) Name of supported organization (II) EIN (iv) is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Part	Support Schedule for Organiza (Complete only if you checked th						
	Part III. If the organization fails to						any andor
Section	on A. Public Support	quality und	31 410 10010 110	ted below, p	ioaco compia	ito i dit iii.j	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and	(4) 2012	(2,2010	(6) 25	(4) 2010	(0) 20.10	
•	membership fees received. (Do not						
_	include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
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						
Secti	on B. Total Support						·
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4		1				
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		¥2.	14 142			
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re					
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2016 (line		-			14	<u>%</u>
15 16a	Public support percentage from 2015 Sci 331/2% support test—2016. If the organ box and stop here. The organization qua	ization did no	t check the bo		nd line 14 is 3		
b	331/3% support test—2015. If the organi						
	this box and stop here. The organization	qualifies as a	publicly suppo	orted organizat	tion		🟲 🗀
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—2 15 is 10% or more, and if the organization is supported organization.	ation meets to meets the "fac	ne "facts-and-	circumstances	" test, check	this box and	stop here.
18	Private foundation. If the organization d	id not check a	box on line 13	3, 16a, 16b, 17	a, or 17b, che	ck this box and	l see

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.)

04	The organization rand to quality	<u> </u>		т, р. сс. с с			
_	on A. Public Support		#1.0040	4 2 2044	(4) 0045	(-) 0040	(0 T-4-1
	dar 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			i			
•	received. (Do not include any "unusual grants.")	48898	58827	83008	54968	60828	306529
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	0.00	0.00	0.00	0.00	0.00	0.00
3	Gross receipts from activities that are not an			ļ			
_	unrelated trade or business under section 513	0 00	0.00	0.00	0.00	0 00	0.00
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0.00	0.00	0.00	0.00	0.00	0.00
5	The value of services or facilities						
	furnished by a governmental unit to the	i			İ	1	
	organization without charge	0.00	0.00	0.00	0.00	0.00	0.00
6	Total. Add lines 1 through 5	48898	58827	83008	54968	60828	
7a	Amounts included on lines 1, 2, and 3			İ			
	received from disqualified persons .	0.00	0.00	0.00	0.00	0.00	0.00
b	Amounts included on lines 2 and 3				i		
	received from other than disqualified			i		ľ	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	0.00	0.00	0.00	0.00	0.00	0 00
С	Add lines 7a and 7b	0.00	0.00	0.00	0.00	0.00	0.00
8	Public support. (Subtract line 7c from						
	line 6.)						306529
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	48898	58827	83008	54968	60828	306529
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	i	:	,			
	royalties and income from similar sources .	677	198	26	23	110	1034
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0.00	0.00	0.00	0.00	0.00	0.00
С	Add lines 10a and 10b	677	198	26	23	110	1034
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on	0.00	0.00	0.00	0.00	0.00	0.00
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	0.00	0.00	0.00	0.00	0 00	0.00
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	49575	59025		54991	60938	307563
14	First five years. If the Form 990 is for the	-					
	organization, check this box and stop he			· · · · ·	· · · · ·	<u> </u>	· · • <u> </u>
	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8						99.66 %
16 Casti	Public support percentage from 2015 Sch					16	99.08 %
	on D. Computation of Investment In			lana 40l	(0)	147	0.01.0/
17	Investment income percentage for 2016 (•		•		17	0.34 %
18	Investment income percentage from 2015					18	0.92 %
19a	331/3% support tests—2016. If the organ 17 is not more than 331/3%, check this box						
	331/3% support tests—2015. If the organiz		_				
b	line 18 is not more than 331/3%, check this						
00			-				
20	Private foundation. If the organization di	u not check a	SON OF TIME 14	, 13a, UL 19D, C	いにいん はいち ひひX	and see monu	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Part	Supporting Organizations (continued)			
	Capporally Cigarinations (Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		101	30
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		等	
	below, the governing body of a supported organization?	11a		- PS-1982
b	A family member of a person described in (a) above?	11b		
C_	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1	Yes	No I
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations		 1	
	Data and the first state of the first state of the fifth county of the	The role	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		1000
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	7.14 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.	*
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		***
Secti	on E. Type III Functionally Integrated Supporting Organizations	1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see			
	_	nsuu	CLIOIIS	<i></i>
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	/000 ID	otm cot	1000
С	— The organization supported a governmental entity. Describe in Fart VI now you supported a government entity (SEC IIIS		
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			\vdash
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

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	trus	st on Nov. 20, 1970 (explai	n ın Part VI). See			
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 Aggregate fair market value of all non-exempt-use assets (see						
instructions for short tax year or assets held for part of year):	<u> </u>		*,			
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c	***				
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d.	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	-	-			
6 Multiply line 5 by .035.	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3.	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions).	6		<u></u>			
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see						

Part		Supporting Organi	zations (continued)	
	on D - Distributions Amounts paid to supported organizations to accomplish a			Current Year
1_				
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
<u> 6 </u>	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2016 from Section C, line 6			
10_	Line 8 amount divided by Line 9 amount		<u> </u>	
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.	,		•
3	Excess distributions carryover, if any, to 2016:			
а				
b				
c	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7. \$			
<u>a</u>	Applied to underdistributions of prior years		<u></u>	
b_	Applied to 2016 distributable amount	ļ		ļ. <u></u>
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.		<u> </u>	
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			L
e	Excess from 2016			

	orm 990 or 990-EZ) 2016 Page 8 Page 10: Part II, line 10: Part II, line 17: part III, line 17: part II, line 17: part III, line 17: part I
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.)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Name of the organization	Employer identification number
American Chemical Society Divsion of Nuclear Chemstry and Technology	52-6060201
1. 2016 Form EZ Line 8: other revenue - \$87.27 received in Royalties	
2 2016 Form 000 E7 Line 10, grante noid to cupper	
2. 2016 Form 990-EZ Line 10: grants paid to support	
a. Contribution to ACS National Award - Glenn T. Seaborg Award for Nuclear Chemistry - \$10000.00	
b. Award to one NUCL Division Officer to attend the ACS - \$425.00	
3. 2016 Form 990-EZ Line 16: Other Expenses	
a. Registration for NUCL Division Program Chairs to attend the 2016 ACS Spring and Fall National Mee	tinas.\$915 00
the registration for the Division i region entails to attend the 2010 According and i an industrial medical	
b. Registration and/or travel expenses for symposium speakers to attend 2016 ACS Spring and Fall Na	tional Meetings - \$23233.30
c. Payment to ACS for 2016 national meeting costs such as audio-visual equipment and social function	ns for students: \$15538.95
d. Travel reimbursement to two NUCL Division Councilors for attending 2016 ACS Spring and Fall Nati	omal Manetings - \$2550.25
u. Traver reminur sement to two NOCL Division Councilors for attending 2016 ACS Spring and Fail Nati	Ullai Miceuriys - \$3535.55
4. 2016Form 990-EZ Line 31: Other Program Services	
a. Award to one NUCL Division Officer to attend the ACS 2015 Leadership Institute - \$425.00	
b. Awards to two NUCL Program Chairs for each to attend one of the ACS 2016 National Meetings - 91	5.00