Form <b>990-T</b>	E	xempt Organization Bus	ines	s income T	ax Return	1	OMB No. 1545-0687
		(and proxy tax unde					2042
	Forcal			, and ending		·	2013
Department of the Treasury Internal Revenue Service	<b>&gt;</b>	► Information about Form 990-T and its instruc Do not enter SSN numbers on this form as it may	be mad	e public if your organiza			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization ( Check box if name cf	nanged a	and see instructions.)		(Empk	yer Identification number byees' trust, see ctions.)
B Exempt under section	Print	SOCIETY FOR SCIENCE &	THE	PUBLIC			3-0196483
X 501(C)(3)	Or	Number, street, and room or suite no. If a P.O. box	, see ins	tructions.		E Unrela (See in	ited business activity codes estructions.)
408(e) 220(e)	Туре	1719 N STREET, NW					
408A 530(a) 529(a)		City or town, state or province, country, and ZIP or WASHINGTON, DC 20036	r foreign	postal code		511	120
C Book value of all assets	F Group	exemption number (See instructions.)					
84,374,697.	G Chec	corganization type X 501(c) corporation		501(c) trust	401(a) trust		Other trust
H Describe the organization	n's prim	ary unrelated business activity. <b>PERIODI</b>	CALS	<u> </u>		<del></del>	TTT
I During the tax year, was	the corp	poration a subsidiary in an affiliated group or a paren	ıt-subsid	liary controlled group?	▶ L	Ye	s X No
If "Yes," enter the name	and iden	tifying number of the parent corporation.				202	785-2255
J The books are in care of	• P (	REGORY MITCHELL		(A) Income	(B) Expenses		(C) Net
		de or Business Income		(A) Illeume	(b) Expenses	3	(0) 1101
1 a Gross receipts or sale			4.				
b Less returns and allo		c Balance	16				<del></del>
-		A, line 7)	3				
		rom line 1c	4a				
		ch Form 8949 and Schedule D)	4b				
		sts	4c				
		ips and S corporations (attach statement)	5				
		mps and a corporations (utacin statement)	6				
		ne (Schedule E)	7				
		and rents from controlled organizations (Sch. F)	8.				
		on 501(c)(7), (9), or (17) organization (Schedule G)	9				
		ome (Schedule I)	10				
		e 1)	11	434,918.	389,0	67.	45,851.
		ns; attach schedule.)	12				
13 Total. Combine line	s 3 throu	gh 12	13	434,918.	389,0	67.	45,851.
Part II Deduction	ons N	ot Taken Elsewhere (See Instructions foutions, deductions must be directly connected	or limita d with t	tions on deductions.)	e income )		
		irectors, and trustees (Schedule K)				14	
						15	
						16	
						17	
						18	
						19	250.
		e instructions for limitation rules.)				20	
21 Depreciation (attack	n Form 4	562)		21			
		n Schedule A and elsewhere on return				22b	
						23	
		mpensation plans				24	
		the state W				26	
•		chedule I)				27	
27 Excess readership	COSIS (50	chedule J)		SEE STAT	EMENT 1	28	2,646.
28 Other deductions (a	e Vyy II:	negule)nes 14 through 28			<del></del>	29	2,896.
		income before net operating loss deduction. Subtrac				30	42,955.
30 Unrelated business 31 Net operating loss	anavio Meduction	n (limited to the amount on line 30)		SEE STAT	EMENT 2	31	42,955.
32 Unrelated business	taxahla i	income before specific deduction. Subtract line 31 fi	rom line	30		32	0.
		ly \$1,000, but see instructions for exceptions.)				33	1,000.
34 Unrelated busines	s taxable	income. Subtract line 33 from line 32. If line 33 is	greater	han line 32, enter the sn	naller of zero or		_
						34	0.

323701 12-12-13 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2013)

Part II	T	ax Computation	
		zations Taxable as Corporations. See instructions for tax computation.	
		led group members (sections 1561 and 1563) check here 🕨 🛄 See instructions and:	
а	Enter y	our share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):	
	(1)	(2) \$ (3) \$	
		rganization's share of: (1) Additional 5% tax (not more than \$11,750)	
	(2) Ad	fitional 3% tax (not more than \$100,000)	
		tax on the amount on line 34	35c 0.
36	Trusts	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	
		ax rate schedule or Schedule D (Form 1041)	36
37	Proxy!	ax. See instructions	37
		tive minimum tax	38
************		Add lines 37 and 38 to line 35c or 36, whichever applies	39 0.
		ax and Payments	
	-	tax credit (corporations attach Form 1118; trusts attach Form 1116)40a	
		redits (see instructions) 40h	
Ç	Genera	l business credit. Attach Form 3800	
d	Credit	or prior year minimum tax (attach Form 8801 or 8827)	40-
		redits. Add lines 40a through 40d	408
41	Subtra	ct line 40e from line 39	41 0.
		axes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	43 0.
		ax. Add lines 41 and 42	40
		nts: A 2012 overpayment credited to 2013 44a 44b	
		Stilliation tax payments	
		posited with Form 8868 44c 44d 44d	
		Tolganizations, tax paid of wanted accounts (our more annex)	
		A Mitting for the transfer of	
		for small employer nearth modulates profitation (victor)	
g		orm 4136 Other Total ►	
AE		orm 4136 Other Total ►	45
45 46	Fetima	ted tax penalty (see instructions). Check if Form 2220 is attached	46
47	Tax di	e. If line 45 is less than the total of lines 43 and 46, enter amount owed	47 0.
		ayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48 0.
	Enter t	he amount of line 48 you want: Credited to 2014 estimated tax	49
Parit	S	tatements Regarding Certain Activities and Other Information (see instructions)	
1 At a	ny time	during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account	count (bank, Yes No
secu	urities,	or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Find	ancial
Acc	ounts.	f YES, enter the name of the foreign country here	A
2 Duris If YE	ng the ta S, see ir	f YES, enter the name of the foreign country here x year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? structions for other forms the organization may have to file.	X
3 Ente	er the a	mount of tax-exempt interest received or accrued during the tax year ▶ \$	
		N - Cost of Goods Sold. Enter method of inventory valuation ► N/A	
1 Inve	entory a	t beginning of year 1 6 Inventory at end of year	6
2 Pur	chases	7 Cost of goods sold. Subtract line 6	
3 Cos	t of lab	or 3 from line 5. Enter here and in Part I, line 2	7   Yes   No
		ction 263A costs (att. schedule) 4a 8 Do the rules of section 263A (with respect to	Yes No
		(attach schedule) 4b property produced or acquired for resale) apply to	
5 Tota	al. Add	lines 1 through 4b	wiedge and belief, it is true,
Sign	cor	der penalties of perjury, I declare the Inflave examined this return, including accompanying schedules and statements, and to the best of my knowledge, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  INTERIM CEO/CHIEF	
Here		5/7/14 ADV OFFICER the	ay the IRS discuss this return with e preparer shown below (see
11010			structions)? X Yes No
		Object   Object   It	
		Print/Type preparer's name Preparer's signature Date Gleck Self- employed	
Paid		SUBRINA L. WOOD Subruna J. Wood 5/2/14	P00365899
Prepa	arer	Firm's name ► TATE & TRYON Firm's EIN ►	52-1855942
Use C	)nly	2021 L STREET, NW SUITE 400	
		Firm's address ► WASHINGTON, DC 20036 Phone no. 2	02-293-2200
			Form <b>990-T</b> (2013)

Schedule C - Rent Inco	me (Fron	n Real Prop	erty and	d Personal I	Property	Lease	d With Real Pr	oper	ty)(see instructions)
1. Description of property									
(1)									
(2)									
(3)									
(4)		M-1		· • ·					
		Rent received or acc					3(a) Deductions dire	tly con	nected with the income in
(a) From personal property (if for personal property in 10% but not more that	is more than	of (I	of rent for p	and personal propert personal property ex at is based on profit	ceeds 50% or i	tage if	columns 2(a	and 2(b	o) (attach schedule)
(1)									
(2)									
(3)									
(4)						0.			
Total		O Total				0.	(b) Total deductions	_	
(c) Total income. Add totals of columere and on page 1, Part I, line 6, co	olumn (A)	<u></u>				0.	Enter here and on page 1 Part I, line 6, column (B)		0.
Schedule E - Unrelated	Debt-Fir	nanced Inco	ome (see	instructions)			9 5 1 4 4 4		-dudte attacable
				2. Gross inc	come from		<ol> <li>Deductions directly of to debt-fin</li> </ol>	connecte anced p	roperty
1. Description of o	debt-financed p	roperty		or allocable financed p	e to debt-	(a)	Straight line depreciation (attach schedule)		(1) Other deductions (attach schedule)
(1)									
(2)		·							
(3)									
(4)		, , , , , ,				1			
4. Amount of average acquisition debt on or allocable to debt-finance property (attach schedule)		5. Average adjuste of or allocable debt-financed pro (attach schedu	to operty	6. Column by colu			7. Gross Income reportable (column 2 x column 6)		8, Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)					%				
(2)	ŀ				%				
(3)				·	%				
(4)					%				
						F	nter here and on page 1, Part I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Totals								0.	
Total dividends-received deducti	ons included	in column 8	·····					<u>.▶                                    </u>	
Schedule F - Interest, A	nnuities	, Royalties,					nizations (see ii	nstruc	tions)
			Exem	pt Controlled C	T		1_		
1. Name of controlled organization		<b>2.</b> Employer identificati number	ion Net u (loss)	3. unrelated income (see instructions)	Total of	specified ats made	5. Part of column included in the con organization's gross	trolling	connected with income
(1)								-	
(2)									
(3)									
(4)					<u> </u>				
Nonexempt Controlled Organiz	ations							·	
7. Taxable Income		elated Income (loss) Instructions)	9. ⊤	otal of specified pay made	yments 11	in the cor	column 9 that is included strolling organization's gross income		Deductions directly connected with income in column 10
(1)									
(2)									
(3)									
(4)									
N'/						Enter here	columns 5 and 10. and on page 1, Part I, e 8, column (A).	Ent	Add columns 6 and 11. ter here and on page 1, Part I, line 8, column (8).
							0.		0.
Totals				·····	<u>,,,,,</u>		<b>U.</b>	<u> </u>	Corm 000-T /2012

(see instructions)			T.	A	3. Dedt		4. Set-asides	<del>,</del> T	5. Total deductions
1. Descri	ption of income		2	. Amount of income	directly of (attach s		(attach schedu		and set-asides (col. 3 plus col. 4)
(1)									J
(2)								_	
(3)		- <del>,,</del>						_	
(4)				nter here and on page 1,					Enter here and on page 1,
				art I, line 9, column (A).					Part I, line 9, column (B).
Totals				0.					0.
Schedule I - Exploited I (see instru		Income,	Other	Than Advertisi	ng Inco	me ———			
1. Description of	2. Gross unrelated business	3. Expens	ected	Net income (loss) from unrelated trade or business (column 2	5. Gross from acti		6. Expenses		7. Excess exempt expenses (column
exploited activity	income from trade or business	with produc of unrelate business inc	ed	minus column 3). If a gain, compute cols. 5 through 7.	ls not ur business	related	attributable to column 5	0	6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)							···		
(4)			. 8						Enter here and
	Enter here and on page 1, Part I,	Enter here an page 1, Par	ntl, 🔯						on page 1, Part II, line 26.
	line 10, col. (A).	line 10, col.	0.						0.
Totals►   Schedule J - Advertisir		otructional	U • 🛭						
Part I Income From F	eriodicals Reno	rted on a	Cons	olidated Basis					
Rakes income from	Citodiodio Nope					r		-	
1. Name of periodical	2. Gross advertising income		Direct Ing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		culation come	6. Readership costs	,	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						_			
(2)					<u> </u>			_	
(3)								₩	
(4)					<b></b>			_	
		.	0.						0.
Totals (carry to Part II, line (5)) Part II Income From F	P	rted on s	Sena	rate Basis (For	each nerio	dical lister	lin Part II. fill i	 n	
columns 2 through	7 on a line-by-line bas	sis.)	a oepa	iate pasis (ron	eacti peno	aloai iistee	2 111 1 Care 113 1111 1		
	2. Gross			4. Advertising gain	5.0	rculation	6. Readership		7. Excess readership costs (column 6 minus
1. Name of periodical	advertising income	advertis	Direct ing costs	or (loss) (col. 2 mlnus col. 3). If a gain, compu cols. 5 through 7.	te ind	come	costs	1	column 5, but not more than column 4).
(1) SCIENCE NEWS	434,918	3. 389	,067.	45,851	. 460	6581.	146390	1.	
(2)				<u> </u>	<del>                                     </del>				
(3)									
(4)		).	0.						0.
Totals from Part I	Enter here and or		re and on	4					Enter here and
	page 1, Part I, line 11, col. (A).	page 1 line 11,	, Part I, col. (B).						on page 1, Part II, Ilne 27.
Totals, Part II (lines 1-5)	<u></u> ▶ 434,918	3. 389	,067		inetructio	ne)		****** <b>I</b>	<u> </u>
Schedule K - Compens	sation of Unicer	s, pirecto	บรร, ผก	u Trustees (See		<ol><li>3. Percer</li></ol>	· · · · · · · · · · · · · · · ·		action attributable
1. N	ame			2. Title		time devot busines	is	to unrela	ited business
(1)							%		
(2)							%		
(3)							%		
Total Enter ham and an age 1 P	eart II line 14	1				l			0.
Total, Enter here and on page 1, P	an n, mid 14						····		Form <b>990-T</b> (2013

FORM 990-7	Ţ	OTHER DEDUCTI	ons	STATEMENT
DESCRIPTION	ON			AMOUNT
TAX PREPAR	 RATION FEE			2,646
TOTAL TO H	FORM 990-T, PAGE 1,	LINE 28		2,646
FORM 990-1	r net	OPERATING LOSS D	EDUCTION	STATEMENT
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/09 12/31/10 12/31/11 12/31/12	381,054. 273,425. 187,718. 211,972.	0. 0. 0.	381,054. 273,425. 187,718. 211,972.	381,054. 273,425. 187,718. 211,972.
	•			