Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning ar	nd ending	_	
B c	heck if	C Name of organization		D Employer identific	cation number
	Address change	SOCIETY FOR SCIENCE & THE PUBLIC		_	
	Name change	Doing Business As		53-0	196483
	Initial return Termin- ated	Number and street (or P.O. box if mail is not delivered to street address) 1719 N STREET, NW	Room/suite	E Telephone number (202) 785–2255
	⊒ated]Amende Jretum			G Gross receipts \$	19,696,357.
	Applica Ition			H(a) Is this a group re	eturn
	pending			for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	
ΙT	ax∙exe	mpt status: X 501(c)(3)	1) or 🔲 527	If "No," attach a	list. (see instructions)
		E ► WWW.SOCIETYFORSCIENCE.ORG		H(c) Group exemption	n number 🕨
K F	orm of	organization: X Corporation	L Year	of formation: 1921 N	State of legal domicile: DE
Pa	rt I	Summary			
Activities & Governance	1 E	Briefly describe the organization's mission or most significant activities: $\overline{ ext{TO}}$	PROMOTE	E PUBLIC UND	ERSTANDING
rna	_	Check this box 🕨 🔲 if the organization discontinued its operations or dis	posed of more	e than 25% of its net as	sets.
ove		lumber of voting members of the governing body (Part VI, line 1a)		1 1	14
Ğ		lumber of independent voting members of the governing body (Part VI, line 1)			14
SS		otal number of individuals employed in calendar year 2013 (Part V, line 2a)			80
viti	6	otal number of volunteers (estimate if necessary)		6	1200
(cti	7a 7	otal unrelated business revenue from Part VIII, column (C), line 12		7a	434,918.
•	bi	let unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
<u>o</u>	8 (Contributions and grants (Part VIII, line 1h)		4,941,020.	3,729,689.
enn	9 F	Program service revenue (Part VIII, line 2g)		5,947,561.	5,701,634.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		851,202.	652,151.
ш		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		247,652.	248,457.
		otal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12	3	11,987,435.	10,331,931.
	l	Grants and similar amounts pald (Part IX, column (A), lines 1·3)		3,400,163.	3,216,001.
		Benefits paid to or for members (Part IX, column (A), line 4)	5	0.	6 524 240
ë	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	1	6,027,842.	6,524,240.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		U •	0.
Ϋ́		otal fundraising expenses (Part IX, column (D), line 25) 881,		9,279,138.	9,852,578.
_	ŧ.	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4	18,707,143.	
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-6,719,708.	
<u>_ &</u>	19	Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year	End of Year
Net Assets or Fund Balances		Fatal assate (Davit V line 16)		93,608,526.	84,374,697.
SSE	20	Fotal assets (Part X, line 16)		9,439,891.	8,395,128.
rad/	21 22 1	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		84,168,635.	75,979,569.
D.	14 H	Signature Block			
Und	er nenal	ties of perjury, I declare that I have examined this return, including accompanying sched	ules and staten	nents, and to the best of m	y knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of		r has anv knowledge.	
,	1	January Control of the Control of th	· · · · · · · · · · · · · · · · · · ·	5/7//¥	
Sig	n	Signature of officer		Date /	
Her	3	RICK BATES, INTERIM CEO/CHIEF ADV. C	FFICER		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	, , ,	Date Check	PTIN
Paid	ı i	Print/Type preparer's name SUBRINA L. WOOD Preparer's signature	NOOR	5/2/14 seif-employ	
	arer	Firm's name TATE & TRYON		Firm's EIN	52-1855942
	Only	Firm's address 2021 L STREET, NW SUITE 400			
	-	WASHINGTON, DC 20036		Phone no.20	2-293-2200
May	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No

4e

(Expenses \$

including grants of \$

17,663,934.

Form 990 (2013)

Total program service expenses

	TAN Checklist of Required Schedules			T
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		₹₽	
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
~	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
J	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	L	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
. •	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
.	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
А	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
u	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	ļ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
, =	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
, =	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
. 🕶	complete Schedule G, Part III	19		X
20a	the state of the s	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Earm	noo.	(2013)

Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, 22 Х column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X 25a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, Х 26 complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member 27 Х of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, Х 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? Х 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х 33 sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х Part V, line 1 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Form 990 (2013)

Note. All Form 990 filers are required to complete Schedule O

X

Form **990** (2013)

14a

-orm	990 (2013) SOCIETY FOR SCIENCE & THE PUBLIC		53-0196	483	Pa	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	607			
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 re	eporte	ble gaming			
	(gambling) winnings to prize winners?			10	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	80			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
3a				3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	Ο		3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х
b	If "Yes," enter the name of the foreign country:					
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction1	·	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions c	r gifts]		
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired			
	to file Form 8282?	·······	 I	7c	***********	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file February			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		*******
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne during the year?	8	*******	*******
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	مدا	ı			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>			
11	Section 501(c)(12) organizations. Enter:	. د د ا				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	446				
4.5	amounts due or received from them.)	11b	<u> </u>	10-	******	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		ĺ	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	• • • • • • • • • • • • • • • • • • • •		130		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	13b				
	organization is licensed to issue qualified health plans	130		1		

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

53-0196483 SOCIETY FOR SCIENCE & THE PUBLIC Form 990 (2013) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Νo 14 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. 14 b 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 X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? Х Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affillates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filled ►AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) X Own website Another's website

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: GREGORY MITCHELL -(202)785-2255

1719 N STREET, NW, WASHINGTON, DC 20036

SEE SCHEDULE O FOR FULL LIST OF STATES

Form 990 (2013)

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

Check 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

- 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, and 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	(C) Position (do not check more than one box, unless person is both an						(D) Reportable	(E) Reportable	(F) Estimated amount of
	hours per week (list any	offi				is bot or/trus		compensation from the	compensation from related organizations	other compensation
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W·2/1099·MISC)	from the organization and related organizations
H, ROBERT HORVITZ	3.00		 -		<u>.×</u>	1. 0	IL.	_	0	
CHAIR		Х	<u> </u>	X	ļ	<u> </u>	<u> </u>	0.	0.	0.
JENNIFER E. YRUEGAS	3.00						İ		١	^
VICE CHAIR		X	ļ	X		<u> </u>	<u> </u>	0.	0.	0.
ROBERT W. SHAW, JR.	3.00	١								0
TREASURER	1	X	ļ	X	<u> </u>		<u> </u>	0.	0.	0.
ALAN LESHNER	3.00			١					_	_
SECRETARY	1	X	ļ	X	<u> </u>	_	<u> </u>	0.	0.	0.
CRAIG BARRETT	1.00	١							_	^
TRUSTEE	ļ	Х		<u> </u>	_	ļ		0.	0.	0.
MARY SUE COLEMAN	1.00							_		^
TRUSTEE	1 00	X		_	_	<u> </u>	ļ	0.	0.	0.
MICHELA ENGLISH	1.00								0	^
TRUSTEE	1 00	Х	-		<u> </u>	┝		0.	0.	0.
TOM LEIGHTON	1.00	١.,							0.	0.
TRUSTEE	1 00	X	_		ļ	├		0.	0.	<u> </u>
PAUL J. MADDON	1.00	١,,								^
TRUSTEE	1 00	X	ļ	_	_	-		0.	0.	0.
STEPHANIE PACE MARSHALL	1.00	١							_	^
TRUSTEE	1 00	X	ļ	_		<u> </u>	ļ	0.	0.	0.
JOE PALCA	1.00	١								,
TRUSTEE	<u> </u>	X	-	<u> </u>		-		0.	0.	0.
VIVIAN SCHILLER	1.00	١								,
TRUSTEE		X	<u> </u>	ļ	ļ	<u> </u>	<u> </u>	0.	0.	0.
FRANK WILCZEK	1.00	۱			•			_		_
TRUSTEE	1	X	-		_	<u> </u>	<u> </u>	0.	0.	0.
GEORGE YANCOPOULOS	1.00	┨						_	_	_
TRUSTEE		X	_	_	ļ	_		0.	0.	0.
ELIZABETH MARINCOLA	37.50	-						100 000	_	27 202
PRESIDENT (JAN-MAY)	37 50		-	X	-	<u> </u>	<u> </u>	188,990.	0.	27,203.
RICHARD BATES	37.50	-		,,				160 220		25 061
INTERIM CEO/CHIEF ADVANCEMENT OFC.	1 2 5 2	ļ		X	_		ļ	169,239.	0.	35,861.
GREGORY MITCHELL	37.50	-		١,,				174 046	0.	41,704.
CHIEF FINANCIAL OFFICER	<u> </u>	<u> </u>		X	<u> </u>	<u>L.,</u>	<u> </u>	174,846.	J	Form 990 (2013)

332007 10-29-13

Form **990** (2013)

Form 990 (2013) SOCIETY									<u>53-0196</u>	483 Page 8			
Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F)													
(A)	(B)							(D)	(E)	(F)			
Name and title	Average	fdo	Pos (do not check			l than	one	Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	person is both an director/trustee)			compensation	compensation	amount of			
	week (list any	⊢	CEI ai		i cost	Titus	1007	from	from related organizations	other compensation			
	hours for	亞				Ļ		the organization	(W-2/1099-MISC)	from the			
	related	- S	3 <u>3</u>			Sate		(W-2/1099-MISC)	(11 25 1000 111100)	organization			
	organizations	ndividual trustee or director	nstitutional trustee		88	Highest compensated employee		(and related			
	below	ádual	tution	 ¥2	Кеу етріоуее	loyee	je.			organizations			
	line)	5	lusti	15 15 15 15 15 15 15 15 15 15 15 15 15 1	χe.	喜	Former						
MICHAEL MILLS	37.50												
CHIEF CONTENT OFFICER					Х			252,802.	0.	27,672.			
EVA EMERSON	37.50			ļ					_				
EDITOR IN CHIEF, SCIENCE NEWS						X		147,387.	0.	34,104.			
MICHELE GLIDDEN	37.50							115 500		01 000			
DIRECTOR OF SCIENCE EDUCATION			_	<u> </u>	<u> </u>	X		146,699.	0.	21,820.			
HARRY ROTHMANN	37.50	_				l		141 004		25 150			
DIRECTOR OF INTERNAL AFFAIRS	<u> </u>			<u> </u>		X	<u> </u>	141,984.	0.	35,152.			
MATT CRENSON	37.50							110 644		21 212			
MANAGING EDITOR-SCIENCE NEWS	1 20 50	ļ	ļ	<u> </u>		X	<u> </u>	119,644.	0.	31,213.			
JANET RALOFF	37.50	-				,,		115 450	_	22 226			
SENIOR EDITOR/WRITER-SCIENCE NEWS		ļ		_		X		115,459.	0.	23,326.			
		-						VALANCE IN THE PROPERTY OF THE					
		<u> </u>				<u> </u>	ļ						
		┢	\vdash	<u> </u>		-							
		-											
the Curb total		.1				<u> </u>	<u> </u>	1,457,050.	0.	278,055.			
the Sub-total 1,457,050. 0.278,055. c Total from continuation sheets to Part VII, Section A 0. 0.													
d Total (add lines 1b and 1c)						1,457,050.	0.	278,055.					
	1.00.000 (1.1)												
compensation from the organization	minico to ti					-, ***		William Comp. A. I. A.	,	12			
Compensation from the organization	Yes No												
a management of the state of th					1 -								

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on Х 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization Х and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
QUADGRAPHICS N61 W23044 HARRY'S WAY, SUSSEX, WI 53089	PRINTING	666,116.
NAHAN PRINTING PO BOX 697, ST. CLOUD, MN 56302	PRINTING	637,136.
INTERACTIVE MEDIA, 124 NORTH FIRST STREET, LOUISVILLE, KY 40202	PRODUCTION SERVICES	374,656.
PHASE 2 TECH, 1330 W BRADDOCK PLACE, 7TH FLOOR, ALEXANDRIA, VA 22314	IT CONSULTING	361,507.
3 PILLAR GLOBAL, 3975 FAIR RIDGE DRIVE, STE 200S, FAIRFAX, VA 22033	IT CONSULTING	306,254.
 Total number of independent contractors (including but not limited to those listers \$100,000 of compensation from the organization > 7 	ed above) who received more than	

Form 990 (2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events 1d d Related organizations e Government grants (contributions) 24,000. f All other contributions, gifts, grants, and similar amounts not included above 3,705,689. 122,844 g Noncash contributions included in lines 1a-1f. \$_ 3 729 689 Total. Add lines 1a-1f **Business Code** 4,599,459 2 a SCIENCE NEWS 4,599,459 Program Service Revenue 511120 b SCIENCE EDUCATION PROGRAMS 611710 667,257 667,257 SCIENCE NEWS ADVERTISING 541800 434,918. 434 918 f All other program service revenue 5,701,634. Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 627,419. other similar amounts) 627 419 Income from investment of tax-exempt bond proceeds 55,500. 55,500. Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 9,389,158, assets other than inventory b Less: cost or other basis 9,364,426. and sales expenses 24,732. c Gain or (loss) 24,732 24,732 d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Other Part IV, line 18a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19a b Less: direct expenses _____ b c Net income or (loss) from gaming activities ... 10 a 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 Business Code Miscellaneous Revenue 110,989. 11 a MISCELLANEOUS 110,989 900099 81,968. 900099 81,968 b LIST RENTAL d All other revenue 192,957 e Total. Add lines 11a-11d 434,918. 900,608. 10,331,931 5,266,716 Total revenue. See instructions.

Form 990 (2013) SOCIETY FOR SOCIETY Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon		this Part IX	***************************************	<u>X</u>
	not include amounts reported on lines 6b, 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 governments and	E0E 000	E0E 000		
	organizations in the United States. See Part IV, line 21	595,000.	595,000.		
2	Grants and other assistance to individuals in	1,593,252.	1,593,252.		
	the United States. See Part IV, line 22	1,393,232.	1,333,232		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States. See Part IV, lines 15 and 16	1,027,749.	1,027,749.		
4	Benefits paid to or for members	2/02///230			
5	Compensation of current officers, directors,				
•	trustees, and key employees	918,317.	547,607.	291,330.	79,380.
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	4,278,823.	3,595,160.	501,782.	181,881.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	480,601.	383,099.	73,342.	24,160.
9	Other employee benefits	478,354.	381,308.	72,999.	24,047.
10	Payroll taxes	368,145.	293,457.	56,181.	18,507.
11	Fees for services (non-employees):				
	Management	45.060		22 127	10 100
	Legal	45,269.		33,137.	12,132.
	Accounting	52,061.		52,061.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	92,964.		92,964.	·
f	Investment management fees	32,304.		J2/JU1.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	2,199,402.	1,870,673.	315,052.	13,677.
12	Advertising and promotion	193,350.	193,350.		•
13	Office expenses	3,397,713.	2,930,020.	68,910.	398,783.
14	Information technology	238,154.	105,340.	75,441.	57,373.
15	Royalties	•	,		
16	Occupancy	293,565.	73,255.	220,310.	
17	Travel	1,069,676.	1,035,395.	30,446.	3,835.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,546,605.	1,536,739.	9,313.	553.
20	interest				
21	Payments to affiliates	150 000	C F 2.1	170 771	
22	Depreciation, depletion, and amortization	179,302.	6,531.	172,771.	
23	Insurance	116,202.	52,630.	03,372.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)	144,050.	9,291.	134,759.	Ω.
a	COMMUNICACITONIC	144,030.	56,482.	84,448.	44.
b	DANK BEEC C OBUED EVDEN	63,399.	29,469.	31,763.	2,167.
d	DEGEGERATION	57,448.	47,609.	9,004.	835.
	All other expenses	22,444.	1,300,518.	-1,341,915.	63,841.
25	Total functional expenses. Add lines 1 through 24e	19,592,819.	17,663,934.	1,047,670.	881,215
<u>25</u> 26	Joint casts. Complete this line only if the organization		T.,,,,,,,,,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

r a	484	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A)		(B)
					Beginning of year	-,	End of year
	1	Cash · non-interest-bearing	,		149.	1	4,740,098.
	2	Savings and temporary cash investments			6,488,332.	2	144,846.
	3	Pledges and grants receivable, net		,	63,732,446.	3	53,512,488.
	4	Accounts receivable, net			385,375.	4	512,694.
	5	Loans and other receivables from current and for	ormer o	fficers, directors,			
		trustees, key employees, and highest compensation	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali		'			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec					
ş		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7_			
⋖	8	Inventories for sale or use			20,280.	8	0.
	9	Prepaid expenses and deferred charges			114,783.	9	344,670.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,291,663.			
	b	Less: accumulated depreciation	10b	2,509,136.	349,999.		782,527.
	11	Investments - publicly traded securities		.,	22,517,162.	11	24,337,374.
	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 equ	al line 3	34)	93,608,526.	16	84,374,697.
	17	Accounts payable and accrued expenses			785,437.	17	559,555.
	18	Grants payable		F 115 041	18	8,367.	
	19	Deferred revenue			5,115,841.	19	4,657,856.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
8	22	Loans and other payables to current and former					
漫		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela		1		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	3 17 •24)	. Complete Part X of	2 520 612		2 160 250
		Schedule D			3,538,613.		3,169,350.
	26	Total liabilities, Add lines 17 through 25			9,439,891.	26	8,395,128.
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🔼 and			
és		complete lines 27 through 29, and lines 33 ar			12 460 021		13,853,564.
anc	27	Unrestricted net assets			12,469,821.	27	61,137,201.
Ba	28	Temporarily restricted net assets		70,732,875. 965,939.	28	988,804.	
ы	29	•			300,333.	29	700,004.
3		Organizations that do not follow SFAS 117 (A	SC 958	3), check here P			
ğ		and complete lines 30 through 34.				•	
šetk	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			04 160 625	32	75,979,569.
2	33	Total net assets or fund balances			84,168,635.	33	
	34	Total liabilities and net assets/fund balances .			93,608,526.	34	84,374,697.

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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Form 990 (2013)

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X

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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

Open to Public Inspection

Name of the organization

SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number 53-0196483

				T LOW DOTHWOD	<u> </u>	<u></u>	<u> </u>						
Pε	nt I	Reason	for Public Cha	ı rity Status (All organiz	ations mus	st complet	e this par	t.) See inst	ructions.				
The	organ	ization is not a	a private foundation	n because it is: (For lines 1	through	11, check	only one b	oox.)					
1		A church, co	nvention of church	es, or association of chure	ches desci	ribed in se	ction 170	(b)(1)(A)(i)					
2		A school des	cribed in section 1	1 70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3		A hospital or	a cooperative hosp	pital service organization o	described i	in section	170(b)(1)	(A)(iii).					
4		A medical res	search organizatior	operated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospit	al's na	me,
		city, and stat											
5		An organizati	ion operated for the	e benefit of a college or ur	niversity ov	wned or op	erated by	a governr	mental unit	t describ	ed in		
		section 170	(b)(1)(A)(iv). (Comp	olete Part II.)									
6		A federal, sta	ite, or local governi	ment or governmental unit	t described	d in sectio	n 170(b)(1)(A)(v).					
7		An organizati	ion that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general	public des	cribec	l in
		section 170(b)(1)(A)(vi). (Comp	lete Part II.)									
8		A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	X			eceives: (1) more than 33 1									
				unctions - subject to certa									
		income and u	ınrelated business	taxable income (less sect	ion 511 ta	x) from bu	sinesses	acquired b	y the orga	nization :	after June	30, 19	975.
	·····		509(a)(2). (Comple										
10				operated exclusively to te								_	
11	Ш			operated exclusively for th									
				zations described in secti				2). See se c	ction 509(a	a)(3). Ch	eck the bo	x that	
				g organization and compl						. DI - KI		. 10 14	
		a L Type				nctionally i			і 🔛 Тур			-	_
е				nat the organization is not									
				than one or more publicly						(a)(1) or	section of)9(a)(Z)•
f		-		ritten determination from t									
			rganization, check								•••••		
8	I	Since Augus	t 17, 2006, has the	organization accepted ar	ny girt or ce	ontribution	norn any	described i	in (ii) and (i	iii) balow		Yes	No
				ndirectly controls, either all supported organization?									110
				supported organization r on described in (i) above?									
				a person described in (i) a									
L				on about the supported or					**************	***********	[1.31.	-7:	_L
h	ı	Provide the i	ollowing intornatio	about the supported on	garnzanom	(3).							
			(II) 5(II)	COOK Town of Association	Yiu) is the c	organization	(v) Did vo	u notify the	(vi) is	the	(vii) Amou	nt of m	anatanı
(1)		of supported	(II) EIN	(iii) Type of organization (described on lines 1-9		sted in your		tion in col.	organizatio (i) organiz	n in col.		ipport	UllGlasy
	Vių.	anization		above or IRC section		document?		r support?	U.S	.?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
									<u></u>				
		··- ··-											
]										
								1					
.	- 1		L		100000000000000000000000000000000000000		l	4	1	100000000000000000000000000000000000000			

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2013.03040 SOCIETY FOR SCIENCE & THE P 53-01941

Schedule A (Form 990 or 990-EZ) 2013

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

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, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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.						
	ction B. Total Support					·	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities					12	
13	_						
~	organization, check this box and sto						
	ction C. Computation of Publ			- duna (6)		14	%
	Public support percentage for 2013 (
15	Public support percentage from 2012 33 1/3% support test - 2013. If the	Z Schedule A, Part	ii, iine 14	- line 10 and line	14 is 22 1/294 or		
168							
	stop here. The organization qualifies						
t	33 1/3% support test - 2012. If the						
	and stop here. The organization qua						
178	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
_	meets the "facts-and-circumstances"	test. The organiza	auon quaimes as a	publicly supported	u organization o 12 16o 18b or	17a and line 15 is 1	
k	10% -facts-and-circumstances tes	it - 2012. If the org	janization did not (meck a DOX On IIII	e 13, 100, 100, 01 etan hara Evalai	nia, and illio 10 15 i nia Dart IV how the	0 /0 OI
	more, and if the organization meets t						▶□
- م	organization meets the "facts-and-cir						
18	Private foundation. If the organization	лі аіа пот спеск а	BOX OF IME 13, 16	a, 100, 178, 01 17		edule A (Form 990	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	qualify under the tests listed by	elow, please comp	11616 Part II.)				
	ction A. Public Support	410000	41.0040	4.1.0044	4.0.040	(-) 0040	(0 Tatal
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	410 000	C42550C	2414200	2212004	1510040	13073730.
	include any "unusual grants.")	410,089.	6425506.	2414289.	2313004.	1310042.	130/3/30.
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	5802626.	6198917.	5819028.	5619453.	5266716.	28706740.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-			İ			
	iness under section 513						
4	Tax revenues levied for the organ- ization'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	6212715.	12624423.	8233317.	7932457.	<u>6777558.</u>	41780470.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	225,832.	6029896.	1909425.	1432277.	531,474.	10128904.
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	225,832.	6029896.	1909425.	1432277.	531,474.	10128904.
	Public support (Subtract line 7c from line 6.)						31651566.
	tion B. Total Support	A34					
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	6212715.	12624423.	8233317.	7932457.	6777558.	41780470.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		951,855.	791,698.	909,935.		
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975		12.00	U 1887 -			E CONTRACTOR OF THE CONTRACTOR
c	Add lines 10a and 10b	450,021.	951,855.	791,698.	909,935.	682,919.	3786428.
	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				100 010	100 057	600 410
	assets (Explain in Part IV.)	19,254.				192,95/	629,410.
	Total support. (Add lines 9, 10c, 11, and 12.)		13664050.	9165523.	9031311.		46196308.
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth te	ex year as a sectio	n 501(c)(3) organi:	zation,
	check this box and stop here				*************************	<u></u>	<u>≯ </u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2013 (l	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	68.52 %
16	Public support percentage from 2012	Schedule A, Part	III, line 15			16	65.25 <u>%</u>
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	113 (line 10c, colun	nn (f) divided by lir	e 13, column (f))		17	8.20 %
18	Investment income percentage from	2012 Schedule A,	Part III, line 17			18	7.40 %
19a	33 1/3% support tests - 2013. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line	17 is not
	more than 33 1/3%, check this box as 33 1/3% support tests - 2012. If the	nd stop here. The organization did n	organization qual ot check a box on	fies as a publicly s line 14 or line 19a	supported organiza , and line 16 is mo	ationore than 33 1/3%,	and X
	line 18 is not more than 33 1/3%, che	eck this box and s t	t op here. The orga	nization qualifies :	as a publicly suppo	orted organization	·▶ <u></u>
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	tructions	>

Schedule A Part IV	(Form 99	0 or 990-EZ) 2013 S	OCIETY	Y FO	R SCI	ENCE &	THE	PUBLIC	t II, line 17a or 1		183 Page 4
							e instructions		, iine iu; Pan	in, line i/a or i	70, and Fart in	, 11110 12.
SCHEDU	LE A	, PART	III,	LINE	12,	EXPL	ANATION	FOR	OTHER	INCOME:		
INCOME	FROI	ACTI	VITIE	S NOT	NOR	MALLY	RECURE	ING				
		· · · · · · · · · · · · · · · · · · ·										
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internat Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2013

Name of the organization

Employer identification number

SC	CIETY FOR SCIENCE & THE PUBLIC	53-0196483						
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501(c) General Rule	X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one							
Special Rules								
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the o j) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
total contributions	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
contributions for u If this box is check purpose. Do not co	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year							
aution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990·EZ, or 990·PF), ut it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990·EZ or on its Form 990·PF, Part I, line 2, to ertify that it does not meet the filing requirements of Schedule B (Form 990, 990·EZ, or 990·PF).								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$119,214.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$16,865.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$34,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$ 490,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$ 174,855.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additions	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$_2,405,347.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$122,844.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ 24,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$ 27,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

art II	Noncash Property (see instructions). Use duplicate copies of F	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	DONATED SOFTWARE		
14			
		\$ 122,844.	07/02/13
(a)		(c)	
No.	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Doddiption of honough property given	(see instructions)	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I		(See man denote)	
		\$	
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		\$	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
		i	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2013) **Employer identification number** Name of organization 53-0196483 SOCIETY FOR SCIENCE & THE PUBLIC Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held (c) Use of gift from (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (d) Description of how gift is held (c) Use of gift from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to 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

Open to Public Inspection

Name of the organization

SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number 53-0196483

Par	Organizations Maintaining Donor Advise organization answered "Yes" to Form 990, Part IV, line		is or Accountes, contibute it the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpos	
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the org		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (e.g., recreation or e	r	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		F I
b	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired		1 1
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by ti	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear		:
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements if		—
6	Staff and volunteer hours devoted to monitoring, inspecting, Amount of expenses incurred in monitoring, inspecting, and	and emorching conservation assements during	and the year > \$
7	Does each conservation easement reported on line 2(d) above		
8	and section 170(h)(4)(B)(ii)?		
^	In Part XIII, describe how the organization reports conservati		
9	Include, if applicable, the text of the footnote to the organization	ion's financial statements that describe	s the organization's accounting for
		non a mianolal statements that describe	o tito organization o accounting for
8029	conservation easements. Conservation easements. Conservation easements. Conservation easements.	f Art. Historical Treasures, or	Other Similar Assets.
8.88	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	-
12	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		•
h	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		.,
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financ	ial gain, provide
-	the following amounts required to be reported under SFAS 1		- · · ·
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$
.,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

The percentages in 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" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Schedule D (Form 990) 2013

(check all that apply):

Public exhibition

Scholarly research

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value (b) Cost or other (c) Accumulated (a) Cost or other Description of property basis (other) depreciation basis (investment) 26,946. 26,946. 1a Land 1,521,182. 1,360,341. 160,841. **b** Buildings c Leasehold improvements 552,923. 495,463. 57,460. d Equipment 653,332. 537,280. 1,190,612. e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 SOCIETY FOR	SCIENCE &	THE PUBLIC	53-	-0196483	Page
Part VII Investments - Other Securities.				•	
Complete if the organization answered "Yes"	to 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		/aluation: 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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.					************
Complete if the organization answered "Yes"	to Form 990 Part IV	line 11c See Form 990	Part X line 13		
(a) Description of investment	(b) Book value		/aluation: Cost or end-	of-year market v	value
	(4)	(-,			
(1) (2)					
(3)				•	
(4)					
(5)					
(6)					
(7)				· · · · · · · · · · · · · · · · · · ·	
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.					
Complete if the organization answered "Yes"	to Form 000 Bort IV	line 11d Con Form 000	Dort V line 15		
	Description	, lille TTG. Obe FORM 950,	rant A, line 15.	(b) Book va	alue
	Dosonption			(0) 20011 10	
(1)					
(2)					
(3)					
(4)					
(6)					
(6)					
(7)					
(8)					
(9)	<i>de</i>)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	<u>ie 15.)</u>		P		
Part X Other Liabilities.	4. F 000 B 155	Barrier and Comme	- 000 Dad V # 05		
Complete if the organization answered "Yes"	to Form 990, Part IV	, line 11e or 11t. See Forn (b) Book value	n ээо, Рап X, шпе 25. Т		
1. (a) Description of liability		(D) DOOK VAIUE	-		

(1) Federal income taxes 1,908,516. 1,216,000. AWARDS PAYABLE ACCRUED POSTRETIREMENT LIABILITY 44,834. DEFERRED LEASE LIABILITY (4) (5) (6) (7) (8) (9) 3,169,350. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 X Schedule D (Form 990) 2013

11					
	ACCITING FOR COLUMN A MUST BY		•	F 2	0106402 -
	dule D (Form 990) 2013 SOCIETY FOR SCIENCE & THE PU				0196483 Page
на	Reconciliation of Revenue per Audited Financial Statement	ts with	i Kevenue per H	eturr	ł.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			1 1	11,124,284
1	Total revenue, gains, and other support per audited financial statements			1	11,124,204
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	814,797.		
a	Net unrealized gains on investments	2a 2b	014,171.		
b	Donated services and use of facilities	20 2c			
0	Recoveries of prior year grants Other (Describe in Part XIII.)				
d	Add lines 2a through 2d		***	2e	814,797
е 3	Subtract line 2e from line 1			3	10,309,487
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		•••••••		
a a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a b	Other (Describe in Part XIII.)	4b	22,444.		
	Add lines 4a and 4b			4c	22,444
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	22,444 10,331,931
	t XII Reconciliation of Expenses per Audited Financial Statemer				
********			•		
1	Total expenses and losses per audited financial statements			1	19,313,350
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				· · · · · · · · · · · · · · · · · · ·
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	-257,025.		:
е	Add lines 2a through 2d			2e	-257,025
3	Subtract line 2e from line 1			3	19,570,375
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	22,444.		
C	Add lines 4a and 4b		••••	4c	22,444
5				5	19,592,819
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additio			4; Part	X, line 2; Part XI,
PAI	RT V, LINE 4:				***************************************
EX.	PLANATION: THE ORGANIZATION'S ENDOWMENT IS	ro be	USED TO S	UPP	ORT OR
EX.	PAND PROGRAMS THAT IMPACT K-12 STUDENTS, AND) IF	NECESSARY,	FO	R GENERAL
OP	ERATING EXPENSES.				
PA	RT X, LINE 2:			·	

EXPLANATION: THE SOCIETY BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND THEREFORE DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. AT A MINIMUM, THE SOCIETY'S FEDERAL AND STATE INCOME TAX RETURNS FOR 2010 THROUGH 2013 ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES.

Schedule D (Form 990) 2013 Part XIII Supplemental Inform	SOCIETY E	FOR SC	CIENCE	& THE	PUBLIC	!	53-019	6483 Page 5
Part XIII Supplemental Inform	nation (continue	ed)						
PART XI, LINE 4B - C	THER ADJ	ISTMEN	JTS:					
THE HEY LINE ID	ZIIIII IIZO	<u> </u>	110.					
MAILING LIST RENTAL	INCOME							22,444.
					٠			
PART XII, LINE 2D -	OTHER ADJ	JUSTMI	ENTS:					
ACCRITED DOCUMENTALEME	מסווד מיגי וחזאי	חודיונות	DENTER	rm				-257,025.
ACCRUED POSTRETIREME	MI ADOUG	LHENT	DENEL	r T				-237,023.
PART XII, LINE 4B -	טעמבים אט.	птетмт	TNITIC .					
PART AII, DING 4D	OTHER ADO	JUSTIII	MIO:					
MAILING LIST RENTAL	EXPENSE							22,444.
								
			· · ·					
						.,		
								········

					·			

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

SOCIETY FOR SCIENCE & THE PUBLIC

53-0196483

Kä	General Info Form 990, Part IV		ctivities Ou	tside the United States. Compl	ete if the organization answered "Y	es" on
1			maintain recor	ds to substantiate the amount of its gr	ants and other assistance.	
•				the selection criteria used to award the		Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance outs	ide the
3		ne following Part	I line 3 table of	an be duplicated if additional space is	needed)	
<u> </u>	(a) Region	(b) Number of		(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	(a) Negion	offices	employees, agents, and	(by type) (e.g., fundraising, program	is a program service,	expenditures
		In the region	independent	services, investments, grants to	describe specific type	for and
			contractors in region	recipients located in the region)	of service(s) in region	investments in region
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
CENT	TRAL AMERICA AND			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
PHE	CARRIBEAN	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	28,612.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
EASI	ASIA AND THE			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
PACI	FIC	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	278,549.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
EURC	OPE (INCLUDING			HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
ICEI	AND AND			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
3REI	ENLAND)	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	250,314.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
MIDI	DLE EAST AND			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
IORI	TH AFRICA	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	137,990.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
				COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
NOR'	TH AMERICA	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	85,610.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
RUSS	SIA AND THE NEWLY			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
INDI	PENDENT STATES	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	75,633.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
				HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
				COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
SOUT	H AMERICA	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	112,915.
				AWARDS/PAYMENTS &	AWARDS PAYMENTS AND	
CUO	CH ASIA -			HOUSING/TRAVEL GRANTS TO	HOUSING/TRAVEL GRANTS	
AFGI	IANISTAN,			COMPETITION PARTICIPANTS &	FOR PARTICIPATION IN SSP	
BANG	BLADESH,	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	36,849.
3 a	Sub-total	0	0			1,006,472.
b	Total from continuation					
	sheets to Part I	0	0			21,277.
C	Totals (add lines 3a					
	and 3b)	0	0			1,027,749.
				., , , , , , , , , , , , , , , , , , ,	Calaadat F /F	Corm 000\ 2013

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990)	SOCIETY	FOR SCIE	NCE & THE PUBLIC	53-019	6483 Page 1
too cocco cocco cocco		1	1. (Schedule F (Form 990), Part I, line 3		
(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
			HOUSING/TRAVEL GRANTS TO COMPETITION PARTICIPANTS &	AWARDS PAYMENTS AND HOUSING/TRAVEL GRANTS FOR PARTICIPATION IN SSP	01 077
SUB SAHARAN AFRICA	0	0	SPONSORING SCIENCE FAIRS.	SCIENCE COMPETITIONS.	21,277.
Totals					21,277.

Schedule F (Form 990) 2013

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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.

SOCIETY FOR SCIENCE & THE PUBLIC

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)
			HOUSING AND TRAVEL		NAME AND ADDRESS OF THE PARTY O		CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
	24	SOUTH AMERICA	PARTICIPANTS	0.		12,496.	12,496.FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
		EAST ASIA AND THE	COMPETITION				TRAVEL PROVIDED	
		PACIFIC	PARTICIPANTS	0.		5,275.	275.FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
		EAST ASIA AND THE	COMPETITION				TRAVEL PROVIDED	
		PACIFIC	PARTICIPANTS	3,740.WIRE	TRE	4,233.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
		RUSSIA AND NEWLY	GRANTS FOR SCIENCE				HOUSING AND	
		INDEPENDENT	COMPETITION				TRAVEL PROVIDED	
		STATES	PARTICIPANTS	0		9,142.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
		RUSSIA AND NEWLY	GRANTS FOR SCIENCE				HOUSING AND	
		INDEPENDENT	COMPETITION				TRAVEL PROVIDED	
		STATES	PARTICIPANTS	0		7,479.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE		•		HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		SOUTH AMERICA	PARTICIPANTS	0		41,228.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		SOUTH AMERICA	PARTICIPANTS	.0		12,030.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		EUROPE	PARTICIPANTS	0.		6,892.	892, FOR SSP SCIENCE	FMV
2 Enter total number of	f recipient organizatio	Enter total number of recipient organizations listed above that are recogr	recognized as charities by the foreign country, recognized as tax-exempt by	foreign country,	recognized as tax-ex	empt by		•

Enter total number of other organizations or entities the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

SEE PART V FOR COLUMN (H) DESCRIPTIONS

65 Schedule F (Form 990) 2013

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53-0196483	Other Assistance to Organizations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)
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Part II Continuation o	f Grants and Other A	ssistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.	United States.	(Schedule F (Form 990), Part II, line 1)	90), Part II, line	(1)	**************************************
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)
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
	Д.	EAST ASIA AND THE	COMPETITION				TRAVEL PROVIDED	
	<u> </u>	PACIFIC	Participants	6,921.	WIRE	37,967.	967.FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
	- 0	SOUTH AMERICA	PARTICIPANTS	.0		15,356.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		SOUTH AMERICA	PARTICIPANTS	0.		8,107.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
	- 0	CENTRAL AMERICA	COMPETITION				TRAVEL PROVIDED	
	ž	AND CARRIBEAN	PARTICIPANTS	.0		11,618.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
		CENTRAL AMERICA	COMPETITION				TRAVEL PROVIDED	
	Č.	AND CARRIBEAN	PARTICIPANTS	0.		7,606.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		EUROPE	PARTICIPANTS	0.		6,563.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	
		EUROPE	PARTICIPANTS	0		12,882.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
		-	GRANTS FOR SCIENCE				HOUSING AND	
		MIDDLE EAST AND	COMPETITION				TRAVEL PROVIDED	
		NORTH AFRICA	PARTICIPANTS	0.		11,990.	FOR SSP SCIENCE	FMV
			HOUSING AND TRAVEL				CONFERENCE	
			GRANTS FOR SCIENCE				HOUSING AND	
			COMPETITION				TRAVEL PROVIDED	

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(Form 990) Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line of organization and ElN (if applicable) (b) IRS code section and ElN (if applicable) (c) Region Grant and ElN (if applicable)
HOUSING AND TRAVEL
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Page 2		(i) Method of valuation (book, FMV, appraisal, other)				FMV				FMV				PMV				FMV				FMV				FMV				FMV				FMV				FMV
ALATA MARIANTA AND AND AND AND AND AND AND AND AND AN	1)	(h) Description of non-cash assistance	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND		FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	116, FOR SSP SCIENCE
96483	90), Part II, line	(g) Amount of non-cash assistance		•		26,072.				6,129				6,424.				12,106.				8,363,				21,260				15,209				166'5		· · · · · ·		7,116
53-0196483	(Schedule F (Form 990), Part II, line	(f) Manner of cash disbursement								WIRE																WIRE												
		(e) Amount of cash grant				0.				3,840.WIRE				0.				0				0.				2,940.				0.				0.				0.
CE & THE PUBLIC	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.	(d) Purpose of grant	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	SRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS
TY FOR SCIENCE	ssistance to Organiza	(c) Region			EAST ASIA AND THE	PACIFIC			EAST ASIA AND THE	PACIFIC			MIDDLE EAST AND	NORTH AFRICA			MIDDLE EAST AND	NORTH AFRICA	A.V. is a left to the design of the second o		EAST ASIA AND THE	PACIFIC				NORTH AMERICA			EAST ASIA AND THE	PACIFIC				EUROPE				SOUTH ASIA
SOCIETY	f Grants and Other A	(b) IRS code section and EIN (if applicable)			н	Д			H	h h				-																								
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization																																				

Schedule F (Form 990) SOCIETY	FOR SCIENCE	CE & THE PUBLIC		53-0196483	96483		Page 2
Partit Continuation of Grants and Other Assistance to Organizations	istance to Organiza	tions or Entities Outside the United States.	United States. ((Schedule F (Form 990), Part II, line	90), Part II, line	1)	
(a) Name of organization 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)
		HOUSING AND TRAVEL				CONFERENCE	
	U	SRANTS FOR SCIENCE				HOUSING AND	
CENI	CENTRAL AMERICA	COMPETITION				FRAVEL PROVIDED	
AND	AND CARRIBEAN	PARTICIPANTS	0.		7,888.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
		COMPETITION				TRAVEL PROVIDED	
SOU	SOUTH AMERICA	PARTICIPANTS	0.		7,713.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
EAS	EAST ASIA AND THE	COMPETITION				TRAVEL PROVIDED	
PAC	PACIFIC	PARTICIPANTS	0		8,035.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
		COMPETITION				TRAVEL PROVIDED	
EUROPE		PARTICIPANTS	0		5,549.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
RUS	RUSSIA AND NEWLY	GRANTS FOR SCIENCE				HOUSING AND	
IND	INDEPENDENT	COMPETITION		•		TRAVEL PROVIDED	
STA	STATES	PARTICIPANTS	0		9,027.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
RUS	RUSSIA AND NEWLY	GRANTS FOR SCIENCE				HOUSING AND	
IND	INDEPENDENT	COMPETITION				TRAVEL PROVIDED	
STA	STATES	PARTICIPANTS	0.		10,969.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
KID	MIDDLE EAST AND	COMPETITION				TRAVEL PROVIDED	
NOR	NORTH AFRICA	PARTICIPANTS	0.		44,008.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
		COMPETITION				TRAVEL PROVIDED	
EUR	EUROPE	PARTICIPANTS	0.		5,100.	FOR SSP SCIENCE	FMV
		HOUSING AND TRAVEL				CONFERENCE	
		GRANTS FOR SCIENCE				HOUSING AND	
EAS	EAST ASIA AND THE	COMPETITION				TRAVEL PROVIDED	
PAC	PACIFIC	PARTICIPANTS	0		6,591.	FOR SSP SCIENCE	FMV

Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.
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Page 2		(i) Method of valuation (book, FMV, appraisal, other)				FMV				FMV		·		FMV				PMV				FMV		
	1)	(h) Description of non-cash assistance	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	7,753. FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	095.FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	8,392, FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE	CONFERENCE	HOUSING AND	TRAVEL PROVIDED	FOR SSP SCIENCE		
96483	90), Part II, line	(g) Amount of non-cash assistance				7,753.				5,095.				8,392.				7,321.				5,100.		
53-0196483	(Schedule F (Form 9	(f) Manner of cash disbursement																						
	United States.	(e) Amount of cash grant				0.		-		0				0.				0				0		
CE & THE PUBLIC	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	PARTICIPANTS	HOUSING AND TRAVEL	GRANTS FOR SCIENCE	COMPETITION	Participants		
Y FOR SCIENCE	ssistance to Organiza	(c) Region	THE RESIDENCE AND A SECURITIES OF THE SECURITIES	RUSSIA AND NEWLY	INDEPENDENT	STATES			MIDDLE EAST AND	NORTH AFRICA			SUB-SAHARAN	AFRICA			MIDDLE EAST AND	NORTH AFRICA			MIDDLE EAST AND	NORTH AFRICA		
SOCIETY	of Grants and Other A	(b) IRS code section and EIN (if applicable)		Œ	H	S			E	2			ν.	Æ			E	Z			W	2		
Schedule F (Form 990)	Part II Continuation c	1 (a) Name of organization																						

Schedule F (Form 990) 2013 SOCIETY FOR SCIENCE & THE PUBLIC 53-0196483

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AWARD PAYMENTS FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE CLOMPETITIONS.	CENTRAL AMERICAN AND THE CARRIBEAN	1	1,500,EFT	E+	.0		
'S FOR INDIVIDUAL P'S SCIENCE	EAST ASIA AND THE PACIFIC	89	43,501,EFT	£4	,0		
AWARD PAYMENTS FOR INDIVIDUAL ENVINNERS IN SSP'S SCIENCE ICCOMPETITIONS.	EUROPE (INCLUDING ICELAND AND GREENLAND)	∞ ∵i	98,000 <u>EFT</u>	£4	0		
AWARD PAYMENTS FOR INDIVIDUAL WINNERS IN SSP'S SCIENCE KICOMPETITIONS.	MIDDLE EAST AND NORTH AFRICA	21	11,000,EFT	Et .	0.		
S FOR INDIVIDUAL SP'S SCIENCE	NORTH AMERICA	23	51,900 <u>,BF</u> T	T-	0.		
rs for individual	RUSSIA AND THE NEWLY INDEPENDENT STATES	11	7,800	Ŧ	0.		
S FOR INDIVIDUAL	SOUTH AMERICA	15	6,200 <u>,EFT</u>	T.	0.		
rs for individual sp's science	SOUTH ASIA	00	13,000.EFT	냔	.0		
						Schedu	Schedule F (Form 990) 2013

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Part	Y 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		, <u>.</u>
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With		
	a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X 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	X 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	X 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		(** <u>****</u> 1
	Foreign Partnerships. (see Instructions for Form 8865)	Yes	X 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 file Form 5713, International Boycott Report. (see Instructions		F1
	for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

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.

PART I, LINE 2:

EXPLANATION: ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVE THEIR NEED FOR

A HOUSING/TRAVEL GRANT TO ATTEND ISEF. INDIVIDUAL RECIPIENTS ARE PAID

THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL AND

VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE REWARD.

PART II, COLUMN (H):

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

REGION: EAST ASIA AND THE PACIFIC

PROVIDED FOR SSP SCIENCE COMPETITORS.

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL PROVIDED FOR SSP SCIENCE COMPETITORS.

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.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: CENTRAL AMERICA AND CARRIBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

Schedule F (Form 990) 2013

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.

REGION: CENTRAL AMERICA AND CARRIBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH ASIA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

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.

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: NORTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

332075 10-03-13

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.

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: NORTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

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.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH ASIA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: CENTRAL AMERICA AND CARRIBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

Schedule F (Form 990) 2013

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.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: MIDDLE EAST AND NORTH AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

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.

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EAST ASIA AND THE PACIFIC

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: SUB-SAHARAN AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: EUROPE

(H) DESCRIPTION OF NON-CASH ASSISTANCE: CONFERENCE HOUSING AND TRAVEL

PROVIDED FOR SSP SCIENCE COMPETITORS.

REGION: RUSSIA AND NEWLY INDEPENDENT STATES

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No. 1545-0047

Open to Public

Inspection

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

Employer identification number 53-0196483

Schedule I (Form 990) (2013)	TO THE PERSON NAMED OF THE				tions for Form 990.	see the Instruc	۱ م
34.				listed in the line 1 table	rganizations listed in the	nd government o	 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations listed in the line 1 table
OUTREACH GRANT			0	8,500.		11-6002032	BRENTWOOD, NY 11717
							52 THIRD AVE
							brentwood ufsd
OUTREACH GRANT			0.	8,500.		81-6000498	BOX RLDER, MT 59521
							PO BOX 205
							BOX ELDER SCH DIST
SCHOOL AWARDS	***************************************	***************************************	0	7,000.		22-6002432	HACKENSACK, NJ 07601
							200 HACKENSACK AVE.
							BERGEN CO
OUTREACH GRANT			0.	8,500.		22-6002962	BAYONNE, NJ 07
							OF EDUCATION 667 AVENUE A
							ART BUTTON FUND #15 BAYONNE BOARD
							BAYONNE
OUTREACH GRANT			0.	8,500.		58-6000184	MILLEDGEVILLE, GA 31061
							BALDWIN HIGH SCHOOL 110 N ABC STREE
	-						and of withtre
OUTREACH GRANT			0.	8,500.	50103	75-2613482	FORT WORTH, TX 76116
							7060 CAMP BOWIE BLVD
							APPLIED LEARNING ACA
or assistance	TOIL CAST ASSISTANCE	FMV, appraisal, other)	assistance	cash grant	ii applicable		or government
Ξ	(g) Description of	(f) Method of valuation (book	(e) Amount of	(d) Amount of	(c) IRC section	(P) EIN	1 (a) Name and address of organization
			ed.	ional space is need	be duplicated if addit	5,000. Part II car	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed
ions in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Yes" to Form 990	anization answered "	omplete if the orga	United States. C	d Organizations in the	overnments an	Partil Grants and Other Assistance to Governments and Organizati
			i States.	funds in the United	toring the use of grant	cedures for moni	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
X Yes No						tance?	criteria used to award the grants or assistance?
	sistance, and the	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	grantees' eligibility	or assistance, the		substantiate the	1 Does the organization maintain records to substantiate the amount of
						nd Assistance	Part 1 General Information on Grants and Assistance
53-0196483				PUBLIC	& THE	OR SCIENC	SOCIETY FOR SCIENCE
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s and Organizations in the United States (Schedule I (Form 990), Part II.)
d Organizations in t
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f Grants and Other Assistance to Government
rt # Continuation of

(a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section organization or government (f) Method of (f	(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
BRONX HS SCI 75 WEST 205TH STREET BRONX, NY 10468	13~6400434		-000/9	0.			SCHOOL AWARDS
CALUMET REG SCI 7400 W 84TH PL CROWN POINT, IN 46307	35-6200140	50103	8,500.	°			OUTREACH GRANT
CAPITAN WOMEN'S CLUB PO BOX 1042 CAPITAN, NM 88316	06-1821559	501C3	8,500.	0			OUTREACH GRANT
CITY OF BOSTON BOSTON CITY HALL BOSTON, MA 02201	04-6001380		.005,8	0.			OUTREACH GRANT
CLARK MAGNET HS 4747 NEW YORK AVE LA CRESCENTA, CA 91214	87~0755181		.002,8	0			OUTREACH GRANT
COUNCIL FOR ED CHANG 3265 MERIDIAN PARKWAY SUITE 130 WESTON, FL 33331	01-0638224	50103	.002,8	•0			OUTREACH GRANT
DISTRICT OF COLUMBIA DC TREASURER WASHINGTON, DC 20037	53-6001131		17,000.	0.			OUTREACH GRANT
HALF HOLLOW EAST 50 VANDERBILT PARKWAY DIX HILLS, NY 11746	11-6002971		.000,3	0			SCHOOL AWARDS
HAMPTON HS 21 BOSCH LN NEWPORT NEWS, VA 23606	54-6001338		8,500.	0.			OUTREACH GRANT
							Schedule I (Form 990)

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	Organizations in the United States (Sched	
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SOCIETY FOR SCIENCE	Assist	
YF	Other	
TEI	s and	
SOC	Grant	
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Sched	Part	

(a) Name and address of (b) EIN (c) IRC section organization or government if applicable cash grant assistance (book, FMV, appraisal, other)	(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
HARKER SCH 500 SARATOGA AVENUE SAN JOSE, CA 95129	94-1613808	50103	.000,8	0			SCHOOL AWARDS
INGENUITY PROJECT 1400 WEST COLD SPRING LANE BALTIMORE, MD 21209	52-1942495	50103	8,500.	.0			OUTREACH GRANT
LEE CO SCH DIST 14020 PLANTATION RD FORT MYERS, FL 33912	59-6000701		8,500,	0			OUTREACH GRANT
MAPLEWOOD RICHMOND HEIGHTS SD 7539 MANCHESTER MAPLEWOOD, NO 63143	43-6002166		.005,8	0			OUTREACH GRANT
MATANUSKA-SUSITNA MAT-SU CAREER & TECHNICAL HIGH SCHOOL 501 N GULKANA - PALMER, AK 99645	92-6000034		.002,8	•0			OUTREACH GRANT
MITCHELL SCH 821 N CAPITAL ST MITCHELL, SD 57301	46-6001338		.002,8	0			OUTREACH GRANT
NC SCH OF SCI & MATH 1219 BROAD STREET DURHAM, NC 27705	56-1250756	50103	7,000.	0			SCHOOL AWARDS
NEW CENTURY TECH HUNTSVILLE CITY SCHOOL 200 WHITE ST HUNTSVILLE, AL 35801	63-6000813		8,500.	0			OUTREACH GRANT
REED RESOURCE CTR NOXUBEE CO SCHOOL DISTRICT PO BOX 5 MACON, MS 39341	64-6000920		8,500.	0.			OUTREACH GRANT
							Schedule I (Form 990)

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THE PUBLIC	ins in the United States (Schedule I (Form 990), Part II.)
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1 (Form 990)	Continuation
Schedule	PartII

(a) Name and address of (b) EIN (c) coganization or government	(q)	(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
ROYAL SCH DIST PO BOX 486 ROYAL CITY, WA 99357	91-6012307		*005'8	0			OUTREACH GRANT
SCHOOL CITY OF HAMMOND 41 E WILLIAM ST HAMMOND, IN 46320	35-6002450		8,500.	0			OUTREACH GRANT
SIMSBORO HS 1 TIGER DRIVE SIMSBORO, LA 71275	72-6000674		.002,8	0	The state of the s		OUTREACH GRANT
STUYVESANT HS 345 CHAMBERS STREET NEW YORK, NY 10282-1099	13-6608981		10,000.	0			SCHOOL AWARDS
T JEFFERSON SCIÆTEC 6560 BRADDOCK ROAD ALEXANDRIA, VA 22312	54-0805373		.000 .0	ò			SCHOOL AWARDS
THE PREUSS SCH UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE #0940 - LAJOLLA, CA 92093-0940	95-2872494		.002,8	.0			OUTREACH GRANT
THORNTON TOWNSHIP 465 EAST 170TH STREET SOUTH HOLLAND, IL 60473	36-6004396		8,500.	.0			OUTREACH GRANT
UT SCH FOR DEAF 742 HARRISON BLVD OGDEN, UT 84404	87-6000545		8,500.	0			OUTREACH GRANT
WEST SALEM HS 1775 TITAN DR. NW SALEM, OR 97304	93-6000763		9,500.	0.			OUTREACH GRANT AND SCHOOL AWARD
							Schedule I (Form 990)

53-0196483 Page 1	(h) Purpose of grant or assistance	OUTREACH GRANT				·	Schedule I (Form 990)
	(g) Description of non-cash assistance						
Adula I (Form 990) Pa	(f) Method of valuation (book, FMV, appraisa, other)						
ited States (Sch	(e) Amount of non-cash assistance	•0					
LIC izations in the Ur	(d) Amount of cash grant	8,500.					
E & THE PUBLIC	(c) IRC section if applicable						
OR SCIENC	(b) EIN	33-0277305					
Schedule I (Form 990) SOCIETY FOR SCIENCE & THE PUBLIC Society Continuation of Greats and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990)) Part II.)	(a) Name and address of organization or government	CORONA NORCO UNIFIED SCHOOL DISTRICT - 2820 CLARK AVE - NORCO, CA 92860					

53-0196483

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

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) PAID THEIR AWARDS UPON RECEIPT OF APPLICABLE PAPERWORK FROM THE INDIVIDUAL Part W Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. REQUEST DETAILING HOW THE FUNDS WILL BE USED. INDIVIDUAL RECIPIENTS ARE EXPLANATION: ORGANIZATION RECIPIENTS ARE REQUIRED TO PROVIDE A WRITTEN (d) Amount of non-cash assistance 0 AND VERIFYING THAT THE INDIVIDUAL WON THE APPLICABLE AWARD. 1,593,252. (c) Amount of cash grant (b) Number of recipients 832 AWARDS FOR PARTICIPATION IN SSP SCIENCE EDUCATION (a) Type of grant or assistance N LINE COMPETITIONS PART I,

Schedule I (Form 990) (2013)

332102 10-29-13

SCHEDULE J (Form 990)

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. ➤ See separate instructions.

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

2013

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number 53-0196483

Pa	rt I Questions Regarding Compensation			
		D0000000000000000000000000000000000000	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on 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	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
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.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Total 930 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling			
*	organization or a related organization:			
_	Receive a severance payment or change-of-control payment?	4a	*********	X
_	The state of the s	4b		Х
b	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
Ç	If "Yes" to any of lines 4a⋅c, list the persons and provide the applicable amounts for each item in Part III.			
	If Tes to any of lines 42.6, list the persons and provide the applicable amounts for each term in that the			
	Outron struction 504/a)(0) and 504/a)(4) appenientians must seemplate lines 5.0			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
5				
	contingent on the revenues of:	5a	*******	X
a	The organization?	5b		X
b	Any related organization?	30		
_	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	6-		X
	The organization?	6a		X
þ	Any related organization?	ao		
	if "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		X	
	not described in lines 5 and 6? If "Yes," describe in Part III	7	A	<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			X
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		^
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	<u> </u>		
	Regulations section 53.4958-6(c)?	9		1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Partiff 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 in 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.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(0-(D)	reported as deferred in prior Form 990
ELIZABETH MARINCOLA	8	149,518.	35,000.	4,472.	15,424.	11,779.	216,193.	
PRESIDENT (JAN-MAY)	€	0.	•0	• 0	• 0	• 0	• 0	
RICHARD BATES	ε	141,302.	25,000.	2,937.	14,609.	21,252.	205,100.	0.
INTERIM CEO/CHIEF ADVANCEMENT OFC.	€	0	0	0	.0	0	0	
GREGORY MITCHELL	Θ	172,241.	0.	2,605.	17,942.	23,762.	216,550.	
CHIEF FINANCIAL OFFICER	Œ	0	• 0	0	0	• 0		• 0
MICHAEL MILLS	Ξ	249,812.	0.	2,990.	25,000.	2,672.	280,474.	• 0
CHIEF CONTENT OFFICER	(II)	0.	0.		- 1	0.	ş	• 0
EVA EMERSON	Θ	137,929.	• 0	9,458.	14,15	19,950.	181,491.	• 0
EDITOR IN CHIEF, SCIENCE NEWS	€	• 0	0.	0	• 0	0.	0.	.0
MICHELE GLIDDEN	8	144,029.	0.	2,670.	14,403.	7,417.	168,519.	• 0
DIRECTOR OF SCIENCE EDUCATION	€	0	• 0	• 0	0	• 0	• 0	• 0
HARRY ROTHMANN	ε	139,860.	0.	2,124.	14,41	20,737.	177,136.	• 0
DIRECTOR OF INTERNAL AFFAIRS	Œ	• 0	• 0	• 0		0.	0.	0.
MAIT CRENSON	ω	116,991.	* 0	2,653.	12,000.	19,213.	150,857.	• 0
MANAGING EDITOR-SCIENCE NEWS	(II)	0	• 0	• 0	0.	• 0	0	• 0
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/torm990.

SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number

	SOCIETY FOR	SCIENC	E & THE P	UBLIC	53-0	0196483
Par						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of c noncash contrib	letermining
1	Art · Works of art					
2	Art - Historical treasures					
3	Art · Fractional Interests					
4	Books and publications					
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities · Publicly traded					
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution ·					
	Historic structures					
14	Qualified conservation contribution · Other					
15	Real estate · Residential					
16	Real estate · Commercial					
17	Real estate • Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts			100 014		*** * ***
25	Other (SOFTWARE)	X	1	122,844.	DISCOUNTED	VALUE
26	Other ()					
27	Other ()					
28	Other (<u> </u>			
29	Number of Forms 8283 received by the organ					
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29		
						Yes No
30a	During the year, did the organization receive t					
	at least three years from the date of the initial					30a X
	the entire holding period?			***************************************		30a X
b	If "Yes," describe the arrangement in Part II.					31 X
31	Does the organization have a gift acceptance					31 X
32a	Does the organization hire or use third parties					32a X
	contributions?	***************************************				32a X
	If "Yes," describe in Part II.				5 1 d	
33	If the organization did not report an amount in	n column (c)	tor a type of prope	erty for which column (a) is cl	necked,	
	describe in Part II.	<u> </u>				

For Paperwork Reduction Act Notice, see the Instructions for Form 990. LHA

Schedule M (Form 990) (2013)

SCHEDULE 0 (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.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Inspection

Department of the Treasury

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

SOCIETY FOR SCIENCE & THE PUBLIC

Employer identification number 53-0196483

FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE FORM 990 WAS PROVIDED TO SSP'S AUDIT COMMITTEE FOR REVIEW AND COMMENTS. PRIOR TO FILING, THE FORM 990 WAS ALSO PROVIDED TO THE REST OF SSP'S BOARD FOR REVIEW. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: ONCE A YEAR, OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND ALL OTHER EMPLOYEES ARE REQUIRED TO AFFIRMATIVELY DISCLOSE ANY POTENTIAL CONFLICTS BY FILING OUT A FORM RESPONDING TO THIS INQUIRY. THESE REPONSES ARE REVIEWED BY SSP MANAGEMENT AND THE SSP AUDIT COMMITTEE. FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: COMPENSATION FOR THE CEO, AS WELL AS THE OFFICERS AND KEY EMPLOYEES, WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE WHO ARE INDEPENDENT AND THEIR DELIBERATIONS AND DECISIONS ARE DOCUMENTED. SSP HIRED AN INDEPENDENT OUTSIDE COMPENSATION CONSULTANT TO BENCHMARK SALARIES FOR EACH ORGANIZATIONAL POSITION. THIS DATA WAS PROVIDED TO THE EXECUTIVE COMMITTEE WHO CONSIDERED IT WHEN MAKING THEIR COMPENSATION DECISIONS FOR THE CEO, OFFICERS, AND KEY EMPLOYEES. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: DOCUMENTS ARE MADE AVAILABLE UPON REQUEST AND ON SSP'S Schedule O (Form 990 or 990-EZ) (2013) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Employer identification number
SOCIETY FOR SCIENCE & THE PUBLIC	53-0196483
VEBSITE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
WEB HOSTING AND IT SERVICES:	
PROGRAM SERVICE EXPENSES	394,617.
MANAGEMENT AND GENERAL EXPENSES	102.260.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	496 877
AN DRODUGUTON AND EVUTRIM CERVICEC.	
PROGRAM GERMAGE	604,309.
PROGRAM SERVICE EXPENSES	0.47,309.
	768.
FUNDRAISING EXPENSES	
TOTAL EXPENSES	605,077.
TEMPORARY HELP:	
PROGRAM SERVICE EXPENSES	81,294.
MANAGEMENT AND GENERAL EXPENSES	99,490.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	180,784.
MAGAZINE CONSULTANTS:	
PROGRAM SERVICE EXPENSES	25,400.
MANAGEMENT AND GENERAL EXPENSES	672.
FUNDRAISING EXPENSES	0 .
TOTAL EXPENSES	26,072.
TRANSLATION SERVICES:	
332212 09-04-13	Schedule O (Form 990 or 990-EZ) (2013

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization SOCIETY FOR SCIENCE & THE PUBLIC	Employer identification number 53-0196483
PROGRAM SERVICE EXPENSES	9,360.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
	9,360.
TOTAL EXPENSES	<i>5,</i> 300.
COPY EDITOR:	
PROGRAM SERVICE EXPENSES	78,246.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	78,246.
FREELANCE WRITERS:	
PROGRAM SERVICE EXPENSES	206,075.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	206,075.
SECURITY SERVICES:	
PROGRAM SERVICE EXPENSES	92,325.
MANAGEMENT AND GENERAL EXPENSES	953.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	93,278.
PUBLIC RELATIONS AND RECRUITMENT:	
PROGRAM SERVICE EXPENSES	21,227.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	1,573.
TOTAL EXPENSES	22,800.
332212 09-04-13	Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Employer identification number
SOCIETY FOR SCIENCE & THE PUBLIC	53-0196483
HONORARIUMS:	
PROGRAM SERVICE EXPENSES	97,540.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	97,540.
ENTERTAINMENT/TALENT SERVICES:	
PROGRAM SERVICE EXPENSES	42,954.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	42,954.
ADVERTISING:	
PROGRAM SERVICE EXPENSES	3,671.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,671.
OTHER SERVICES:	·
PROGRAM SERVICE EXPENSES	213,655.
MANAGEMENT AND GENERAL EXPENSES	111,677.
FUNDRAISING EXPENSES	11,336.
TOTAL EXPENSES	336,668.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,199,402.
·	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ACCRUED POSTRETIREMENT ADJUSTMENT BENEFIT 332212 90-04-13 Sci	257,025. hedule O (Form 990 or 990-EZ) (2013)