				EXTE	ENDED TO	MAY 16, 2	2022			
		00	Return	n of Org	anization	Exempt	From I	ncome	Tax	OMB No. 1545-0047
Forr	n 9 3	90	Under section 50							» 2020
			► Do r	not enter soci	al security num	bers on this form	as it may b	e made pub	lic.	Open to Public
		of the Treasury nue Service	► G	o to www.irs.	gov/Form990 fo	r instructions an	d the latest	information		Inspection
AF	or the	e 2020 calend	ar year, or tax yea	ar beginning	JUL 1,	2020 and	lending J	UN 30,	2021	
	heck if	C Name of	f organization					D Employ	er identifica	ation number
a	oplicable	THE	ACADEMY O	F NATURA	AL SCIENC	CES OF				
	Addre: chang	e PHLL	ADELPHIA							
	Name chang	e Doing bi	usiness as TH	E ACADEI	MY OF NAT	TURAL SCI	ENCES	23-	135200	0
	Initial return	Number	and street (or P.O.	box if mail is no	ot delivered to stree	et address)	Room/suite	E Telepho	ne number	
	Final return/	/ 1900	BENJAMIN	FRANKL	IN PARKWA	Y		215	-299-1	.000
	ated City or town, state or province, country, and ZIP or foreign postal code					G Gross rece	ipts \$	32,674,211.		
	Ameno return	PHIL	ADELPHIA,					H(a) Is this	a group ret	um
	Applic tion	F Name a	nd address of prind	cipal officer: ${f L}$	ISA MILL	ER		for su	bordinates?	Yes X No
	pendir	SAME	AS C ABOV	E				H(b) Are all s	ubordinates incl	luded? Yes No
<u>I T</u>	ax-exe	empt status: [X 501(c)(3)	501(c) () 🗲 (insert no	.) 4947(a)(1)	or 527	lf "No	," attach a li	st. See instructions
			ANSP.ORG					H(c) Group	exemption	number 🕨
			X Corporation	Trust	Association	Other 🕨	L Year	of formation:	<u>1812 м</u>	State of legal domicile: PA
Pa	rt I	Summary								
đ							RSTAND	THE N	ATURAL	WORLD AND
Governance		INSPIRE	EVERYONE	TO CARE	E FOR IT.					
erne	2	Check this bo	x 🕨 if the o	organization di	scontinued its o	perations or dispo	sed of more	than 25% of	1 1	
0V6			ting members of th	v		,				30
s S			lependent voting m							25
Activities &			tal number of individuals employed in calendar year 2020 (Part V, line 2a)							213
iviti										
Act			d business revenue							-44,266.
	b	Net unrelated	business taxable ii	ncome from Fo	orm 990-T. Part I	line 11			7b	-46,141.
					,,					•
								Prior Ye	ar	Current Year
ne			and grants (Part V					Prior Ye 7 , 982	ar ,410.	Current Year 9,754,047.
/enue	9	Program servi	ce revenue (Part V	III, line 2g)				Prior Ye 7,982 5,069	ear ,410. ,803.	Current Year 9,754,047. 4,470,582.
Revenue	9 10	Program servi Investment inc	ce revenue (Part V come (Part VIII, col	III, line 2g) umn (A), lines (3, 4, and 7d)			Prior Ye 7 , 982 5 , 069 3 , 205	ear ,410. ,803. ,492.	Current Year 9,754,047. 4,470,582. 5,145,430.
Revenue	9 10 11	Program servion Investment inco Other revenue	ce revenue (Part V come (Part VIII, col e (Part VIII, column	III, line 2g) umn (A), lines ((A), lines 5, 6d	3, 4, and 7d) , 8c, 9c, 10c, and	d 11e)		Prior Ye 7,982 5,069 3,205 -156	ear ,410. ,803. ,492. ,255.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536.
Revenue	9 10 11 12	Program servi Investment ind Other revenue Total revenue	ce revenue (Part V come (Part VIII, col e (Part VIII, column - add lines 8 throug	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec	3, 4, and 7d) , 8c, 9c, 10c, an jual Part VIII, col	d 11e) umn (A), line 12)		Prior Ye 7,982 5,069 3,205 -156 16,101	ear ,410. ,803. ,492. ,255. ,450.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595.
Revenue	9 10 11 <u>12</u> 13	Program servi Investment inc Other revenue Total revenue Grants and sir	ce revenue (Part Vi come (Part VIII, col e (Part VIII, column - add lines 8 throug nilar amounts paid	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colun	3, 4, and 7d) , 8c, 9c, 10c, and qual Part VIII, col nn (A), lines 1-3)	d 11e) umn (A), line 12)		Prior Ye 7,982 5,069 3,205 -156 16,101	ear ,410. ,803. ,492. ,255. ,450. ,730.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715.
	9 10 11 <u>12</u> 13 14	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid	ce revenue (Part V come (Part VIII, col e (Part VIII, column - add lines 8 throug nilar amounts paid to or for members	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum	3, 4, and 7d) , 8c, 9c, 10c, and qual Part VIII, col nn (A), lines 1-3) in (A), line 4)	d 11e) umn (A), line 12)		Prior Ye 7,982 5,069 3,205 -156 16,101 282	xar ,410. ,803. ,492. ,255. ,450. ,730. 0.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0.
	9 10 11 12 13 14 15	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid Salaries, other	ce revenue (Part VI come (Part VIII, col e (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er	III, line 2g) umn (A), lines 3 (A), lines 5, 6d g <u>h 11 (must ec</u> (Part IX, colum nployee benefi	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colun	d 11e) umn (A), line 12) nn (A), lines 5-10)		Prior Ye 7,982 5,069 3,205 -156 16,101	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880.
	9 10 11 12 13 14 15 16a	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu	ce revenue (Part VI come (Part VIII, col e (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Pa	III, line 2g) umn (A), lines 3 (A), lines 5, 6d g <u>h 11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi rt IX, column (3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colun A), line 11e)	d 11e) umn (A), line 12) nn (A), lines 5-10)		Prior Ye 7,982 5,069 3,205 -156 16,101 282	xar ,410. ,803. ,492. ,255. ,450. ,730. 0.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0.
	9 10 11 12 13 14 15 16a b	Program servi Investment inc Other revenue <u>Total revenue</u> Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part	III, line 2g) umn (A), lines 3 (A), lines 5, 6d g <u>h 11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi irt IX, column (D)	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) tis (Part IX, colun A), line 11e) 	d 11e) umn (A), line 12) nn (A), lines 5-10) 527, 3	56.	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0.
Expenses Revenue	9 10 11 12 13 14 15 16a b 17	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column	III, line 2g) umn (A), lines 3 (A), lines 5, 6d <u>gh 11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi rrt IX, column (<i>I</i>) (A), lines 11a- ⁻	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) (A), line 11e) , line 25) ► 11d, 11f-24e)	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3	56.	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 8,787	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,693.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300.
	9 10 11 12 13 14 15 16a b 17 18	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Total expense	ce revenue (Part VI come (Part VIII, column - add lines 8 through nilar amounts paid to or for members r compensation, er undraising fees (Part ang expenses (Part es (Part IX, column s. Add lines 13-17	III, line 2g) umn (A), lines 3 (A), lines 5, 6d g <u>h 11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi rrt IX, column (<i>b</i>) (A), lines 11a- (must equal Pa	3, 4, and 7d), , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colun A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3), line 25)	56.	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 8,787 20,968	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,693. ,377.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300. 17,281,895.
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Total expense	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column	III, line 2g) umn (A), lines 3 (A), lines 5, 6d g <u>h 11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi rrt IX, column (<i>b</i>) (A), lines 11a- (must equal Pa	3, 4, and 7d), , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colun A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3), line 25)	56.	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,693. ,377. ,927.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700.
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid f Salaries, other Professional fu Total fundraisi Other expense Revenue less	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column s. Add lines 13-17 expenses. Subtrac	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum (Part IX, column (P) irt IX, column (D) (A), lines 11a- (must equal Pa t line 18 from I	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colurn A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A) line 12	d 11e) umn (A), line 12) nn (A), lines 5-10) 527, 3 I, line 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866 ginning of Cu	xar , 410 . , 803 . , 492 . , 255 . , 450 . , 730 . 0 . , 954 . 0 . , 954 . 0 . , 377 . , 927 . rrent Year	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column s. Add lines 13-17 expenses. Subtrace Part X, line 16)	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh <u>11 (must ec</u> (Part IX, colum (Part IX, colum nployee benefi urt IX, column (D) (A), lines 11a- (must equal Pa <u>et line 18 from I</u>	3, 4, and 7d), , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colurn A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A line 12	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3), line 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866 ginning of Cu 90,703	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,954. 0. ,377. ,927. rrent Year ,595.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043.
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F Total liabilities	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column s. Add lines 13-17 <u>expenses. Subtrac</u> Part X, line 16) (Part X, line 26)	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum nployee benefi urt IX, column (D) (X), lines 11a- (must equal Pa t line 18 from I	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) (A), line 11e) , line 25) ► 11d, 11f-24e) art IX, column (A) line 12	d 11e) umn (A), line 12) nn (A), lines 5-10) 527, 3), line 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866 ginning of Cu 90,703 15,623	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,954. 0. ,377. ,927. ,927. ,794.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043. 10,963,882.
Net Assets or Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Program servi Investment inc Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F Total liabilities	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column s. Add lines 13-17 expenses. Subtract Part X, line 16) 	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum nployee benefi urt IX, column (D) (X), lines 11a- (must equal Pa t line 18 from I	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) (A), line 11e) , line 25) ► 11d, 11f-24e) art IX, column (A) line 12	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3), line 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866 ginning of Cu 90,703	xar ,410. ,803. ,492. ,255. ,450. ,730. 0. ,954. 0. ,954. 0. ,377. ,927. ,927. ,794.	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043.
The sets of Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature	ce revenue (Part VI come (Part VIII, column - add lines 8 throug nilar amounts paid to or for members r compensation, er undraising fees (Part es (Part IX, column s. Add lines 13-17 expenses. Subtract Part X, line 16) (Part X, line 26) fund balances. Sub a Block	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum nployee benefi nrt IX, column (A) IX, column (D) (A), lines 11a- (must equal Pa thine 18 from 1 cotract line 21 fr	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colurn A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A) line 12	d 11e) umn (A), line 12) nn (A), lines 5-10) 527,3 I, line 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 11,897 8,787 20,968 -4,866 ginning of Cuu 90,703 15,623 75,079	xar , 410 . , 803 . , 492 . , 255 . , 450 . , 730 . 0 . , 954 . 0 . , 954 . 0 . , 954 . 0 . , 957 . , 927 . , 794 . , 801 .	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043. 10,963,882. 95,888,161.
Definition of the sets of the sets of the sets of the sets of the set of the	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Ities of perjury,	ce revenue (Part VI come (Part VIII, column - add lines 8 through nilar amounts paid to or for members r compensation, er undraising fees (Part as (Part IX, column s. Add lines 13-17 expenses. Subtrace Part X, line 16) (Part X, line 26) fund balances. Sub Block I declare that I have e	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum (Part IX, column (P) IX, column (D) (A), lines 11a- (must equal Pa t line 18 from I cotract line 21 fr	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colum A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A) line 12 rom line 20	d 11e) umn (A), line 12) nn (A), lines 5-10) 5 2 7 , 3), line 25) un nine 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 4,897 20,968 -4,866 ginning of Cur 90,703 15,623 75,079	xar , 410 . , 803 . , 492 . , 255 . , 450 . , 730 . 0 . , 954 . 0 . , 954 . 0 . , 377 . , 927 . rrent Year , 595 . , 794 . , 801 .	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043. 10,963,882.
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and End Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II 22 rt Fpena correc	Program servi Investment ind Other revenue Total revenue Grants and sir Benefits paid i Salaries, other Professional fu Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Ities of perjury, ct, and complete.	ce revenue (Part VI come (Part VIII, column - add lines 8 through nilar amounts paid to or for members r compensation, er undraising fees (Part as (Part IX, column s. Add lines 13-17 expenses. Subtrace Part X, line 16) (Part X, line 26) fund balances. Sub Block I declare that I have e	III, line 2g) umn (A), lines 3 (A), lines 5, 6d gh 11 (must ec (Part IX, colum (Part IX, colum (Part IX, column (P) IX, column (D) (A), lines 11a- (must equal Pa t line 18 from I cotract line 21 fr	3, 4, and 7d) , 8c, 9c, 10c, and <u>qual Part VIII, col</u> nn (A), lines 1-3) in (A), line 4) its (Part IX, colum A), line 11e) , line 25) ▶ 11d, 11f-24e) art IX, column (A) line 12 rom line 20	d 11e) umn (A), line 12) nn (A), lines 5-10) 5 2 7 , 3), line 25) un nine 25)	56. Be	Prior Ye 7,982 5,069 3,205 -156 16,101 282 11,897 4,897 20,968 -4,866 ginning of Cur 90,703 15,623 75,079	xar , 410 . , 803 . , 492 . , 255 . , 450 . , 730 . 0 . , 954 . 0 . , 954 . 0 . , 954 . , 377 . , 927 . , 794 . , 801 . ke best of my ke ledge. 5/16/2	Current Year 9,754,047. 4,470,582. 5,145,430. 2,738,536. 22,108,595. 557,715. 0. 8,396,880. 0. 8,396,880. 0. 8,327,300. 17,281,895. 4,826,700. End of Year 106,852,043. 10,963,882. 95,888,161.
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May the IRS discuss this return with the preparer shown above? See instructions

Phone no.

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

(Rev. January 2020)

Application for Automatic Extension of Time To File an **Exempt Organization Return**

Department of the Treasury Internal Revenue Service

			annlightign	for oook	
►	File a	a separate	application	for each	n return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print Name of exempt organization or other filer, see instructions. Taxpayer identification number (T Print THE ACADEMY OF NATURAL SCIENCES OF Taxpayer identification number (T						n number (TIN)
•	PHILADELPHIA				23-13	52000
File by the due date for filing your return. See Instructions. 1900 BENJAMIN FRANKLIN PARKWAY						
instructions.	City, town or post office, state, and ZIP code. For a for PHILADELPHIA, PA 19103-110	•	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			01
Application Return Application			Return			
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	-BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	-PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
DREXEL UNIVERSITY, COMPTROLLER'S OFFICE • The books are in the care of ▶ 3141 CHESTNUT STREET, STE 225 - PHILADELPHIA, PA 19104 Telephone No. ▶ 215-895-1442 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) • If it is for part of the group, check this box ▶ • If it is for part of the group, check this box ▶ • If request an automatic 6-month extension of time until MAY 16, 2022 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: • Calendar year or • X tax year beginning JUL 1, 2020 , and ending JUN 30, 2021 • If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return						
	nis application is for Forms 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less	3a	\$	0.
b lfth	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			
esti	mated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	yment with	n this form, if required, by			
usir	ng EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.
instructio	If you are going to make an electronic funds withdrawal ns. or Privacy Act and Paperwork Reduction Act Notice,			I53-EO an		e-EO for payment Bees (Rev. 1-2020)

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	THE ACADEMY OF NATURAL SCIENCES OF	
	990 (2020) PHILADELPHIA 23-1352000 Page	e 2
Par		
		X
1	Briefly describe the organization's mission:	
	THE MISSION IS "TO UNDERSTAND THE NATURAL WORLD AND INSPIRE EVERYONE	
	TO CARE FOR IT." THE ACADEMY IMPLEMENTS ITS MISSION THROUGH IMPROVING	
	UNDERSTANDING OF THE DIVERSITY OF LIFE, DEVELOPING, AND APPLYING SCIENCE TO PROTECT THE ENVIRONMENT, ADVANCING PUBLIC INTEREST AND	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		No
	prior Form 990 or 990-EZ?	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
Ū	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 6,076,862. including grants of \$ 508,012.) (Revenue \$ 3,452,818	•)
	RESEARCH, CENTER FOR ACADEMY SCIENCE - ACADEMY SCIENTISTS CONDUCT	
	RESEARCH AROUND THE WORLD, COLLECTING SAMPLES THAT HELP THEM DOCUMENT	
	BIODIVERSITY, TRACE EVOLUTION, AND TRACK ENVIRONMENTAL CHANGES OVER	
	TIME. FOR OVER 200 YEARS, ACADEMY SCIENTISTS HAVE PRESERVED, CURATED,	
	AND STUDIED WHAT IS NOW A WORLD-CLASS COLLECTION OF AN ESTIMATED 19	
	MILLION BIOLOGICAL SPECIMENS DOCUMENTING THE HISTORY OF EUKARYOTIC LIFE	
	ON EARTH. ACADEMY RESEARCHERS ALSO WORK TO UNDERSTAND, PROTECT, AND	
	RESTORE ENVIRONMENTAL CONDITIONS THROUGH BASIC AND APPLIED RESEARCH ON	
	HUMAN IMPACTS, WORKING COLLABORATIVELY WITH REGULATORS, PLANNERS,	
	PRACTITIONERS, AND STAKEHOLDERS. FUNDING FOR THE RESEARCH COMES FROM FEDERAL, STATE, AND LOCAL GOVERNMENTAL AGENCIES AND FOUNDATIONS.	
	THROUGH FESTIVALS, MEMBERS' NIGHT, BEHIND THE SCENES TOUR, POPULAR	
4b	E 107 600 46 700 000 227	
40	(Code:) (Expenses \$, 5,127,022. including grants of \$46,703.) (Revenue \$999,337 EDUCATION - THE ACADEMY BRINGS NATURAL SCIENCE TO LIFE THROUGH THREE	•)
	FLOORS OF ENGAGING EXHIBITS, INCLUDING DINOSAURS AND OTHER ANCIENT	
	CREATURES. WE REOPENED TO THE GENERAL PUBLIC IN AUGUST 2020 AFTER	
	HAVING BEEN SHUT DOWN DUE TO COVID-19 IN MARCH 2020. WE WERE CLOSED BY	
	THE CITY OF PHILAELPHIA AGAIN FROM NOVEMBER 2020 UNTIL JANUARY 2021 DUE	
	TO COVID-19 CONCERNS. WE REOPENED IN JANUARY 2021 AND REMAINED OPEN	
	THROUGH THE END OF THE FISCAL YAER. AT OUR MUSEUM, WE WELCOMED MORE	
	THAN 41,000 VISITORS TO EXPLORE OUR DIORAMAS, DINOSAURS, LIVE ANIMALS,	
	AND THE CHILDREN'S NATURE DISCOVERY CENTER, OUTSIDE IN. DUE TO THE	
	GLOBAL PANDEMIC, OUR DELIVERY OF PROGRAMS WAS CHANGED, BUT OUR	
	RELEVANCE AND IMPACT REMAINED STRONG.	
	IN FISCAL YEAR 2021, ACADEMY EDUCATORS REACHED MORE THAN 5,400 PEOPLE	
4c	(Code:) (Expenses \$ 1,044,244. including grants of \$ 3,000.) (Revenue \$ 18,427. LIBRARY AND ARCHIVES - THE ACADEMY'S LIBRARY AND ARCHIVES IS	•)
	INTERNATIONALLY RECOGNIZED FOR ITS RARE AND HISTORIC BOOKS, JOURNALS,	
	ART, ARTIFACTS, MANUSCRIPTS, PHOTOGRAPHS, AND THE UNIQUE PAPERS AND	
	RESEARCH OF ACADEMY MEMBERS AND STAFF. THE LIBRARY HOLDS MORE THAN	
	250,000 TITLES THAT SPAN FIVE CENTURIES. OUR ARCHIVES COLLECTIONS	
	CONTAIN OVER A MILLION ITEMS, INCLUDING MANUSCRIPTS, CORRESPONDENCE,	
	FIELD NOTEBOOKS, FILMS, JOURNALS, AND PHOTOGRAPHS. THE LIBRARY AND	
	ARCHIVES CONTINUES TO PROVIDE SERVICES TO ACADEMICS AND THE GENERAL	
	PUBLIC. THE DEPARTMENT EXPERIENCED A MAJOR GROWTH IN APPOINTMENTS FROM	
	THE DREXEL COMMUNITY THROUGH BOTH ON-SITE VISITS TO VIEW THE COLLECTION	
	AND PRESENTATIONS ON ACCESS TO VARIOUS RESEARCH COURSES ON CAMPUS.	
	DURING 2021, THE LIBRARY AND ARCHIVES HELD A SERIES OF VIRTUAL EVENTS	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 12,248,728.	
	Form 990 (20)	020)
032002	12-23-20 SEE SCHEDULE O FOR CONTINUATION(S)	
	3	

2020.05094 THE ACADEMY OF NATURAL SC 06____1

PHILADELPHIA

Part IV Checklist of Required Schedules

Form 990 (2020)

			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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
5	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		<u></u>
5	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	<u> </u>		
U	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	<u> </u>		
Ŭ	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			
Ū	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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, VII, 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	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	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
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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			77
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<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			37
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
00	complete Schedule G, Part III	19		<u>x</u> x
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic approximation of Rate IX, column (A), line 12, if IV/column (A) approximation of the second domestic organization or the second do	21	х	
2000	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			2020)
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Part IV Checklist of Required Schedules (continued)

Form 990 (2020)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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 repeated on any of the organization's prior Forms 200 at 200 F72. If I/(a line or the organization's prior Forms 200 at 200 F72.			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
_,	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	37
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.5		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	200		x
27	If "Yes," complete Schedule R, Part V, line 2	36		<u></u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- 57		
50		38	х	
Par		00		L
	Check if Schedule O contains a response or note to any line in this Part V			X
	. , ,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 16			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
032004	12-23-20	Form	990	(2020)

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Part U Statements Regarding Other IRS Flings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on From W3, Transmittal of Wage and Tax Statements, and the control of the organization file all required federal employment tax returns? 21.3	Form	990 (2020) PHILADELPHIA 23-1352	000	Р	_{age} 5	
2a East the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, Za Z1.3 b If at least one is reported on line 2a, did the organization file all required foderal employment fax returns? Zb X b If at least one is reported on line 2a, did the organization file all required foderal employment fax returns? Zb X a X Sa X Sa X a At any time state busines groups income of 31,000 or more during the war? Sb X b If Yes, 'has if filed a form 900 if for this year, did the organization have an interest in, or a signature or other authority over, a financial account is a foreign country. An any time terms in anore of the foreign country. A B If Yes, 'has if filed a torganization have an analy time during that ave year? Se X B Se instructions for filing requirements for FinCEN Form 11A, Report of Foreign Bark and Financial Accounts (FBAR). Se X B Was the organization an express mem8617? Se X B Desce the organization nearbing mem 886172. Se X B If Yes, 'indicate the number of Form 886272. To Yes X	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		-		
tied for the calendar year ending with or within the year covered by this return tail as a constraint of the integration file all required federal emplyment tax returns? Data X b If at least one is reported on inte 2 a, dith or organization file all required federal emplyment tax returns? Data X b Det the organization have unrelated business grows income of 31, 000 or more during the year? Ba X d A at my time during the calendar year, di the organization have an intensit in, or a signature or their authority over, a financial account in a foring incoming the hancount, seconding active financial accounts (FBAR). ds X b If "Yes," has it filed a Form 900-T for this year? If "No" to line 30, provide an explanation on Schedule 0 ds X b If "Yes," to the name of the foreign country busine as ball the account, seconding or the financial accounts (FBAR). ds X d B was the organization that are manual grows receipts that are normally greater than \$100,000, and did the organization solid an organization has an express statement that such contributions or gifts were not tax deductible a contributions or services provided? ds X d If "Yes," fold the organization has the anomaly greater than \$100,000, and did the organization has the grows of this greater and the account such contributions or gifts were not tax deductible? ds X d If "Yes," fold the organization has the organization has explored a services provided? Tz Za X				Yes	No	
b If at least one is reported on line 2a, did the organization lie all required to a, dig (see instructions) 2b X 3a Dot the organization have unrelated business gross income of \$1,000 or moe during the extender year, of the organization nave unrelated business gross income of \$1,000 or moe during the extender year, of the organization nave interest in, or a signature or other authority over, a transcal accountly exult has a bank account, securities account, or other financial accounts (FBAR), 5a 3a X b If 'Yes,'' near the name of the organization have another state transcation? 5a X 5a Wast the organization apert to a problet data whether transaction at any time during the tax yea? 5a X 5b Wast the organization apert to a problet data whether transaction at any time during the tax yea? 5a X 5a Sa X 5a X 5a Sa X 5a X 5a Sa X 5a X 5b The organization apert to a problet data whether transaction? 5a X 5a X 5a X 5a X 5a X 5a X 5a X 5a X 5a X 5a X	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note: If the sum of thesa far and 2 is ignetizer, than 250, your may be required tofig (see instructions) Image: Sec instruction is instructions in the sec in the sec in the sec in the sec instructions in the sec in the sec instructions in the sec in the sec instructions in the sec in the sec instruction is a signature or other authority over, a financial account is a terring output (set in as a bank account, sec units a source) or other financial accounts (FBAR). 36 X X X X 37 Yes, inter the name of the foreign country (set in as a bank account, securities account, or other financial accounts (FBAR). See instructions for fining requirements for Finic PAR PR		filed for the calendar year ending with or within the year covered by this return 2a 213				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X bill "Yes", hist lifted 6 Cm 0900 for this year? If Wort is dire 30, provide an exploration on Schedue 0 3b X chart any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 4a X bill "Yes", inter the name of the foreign country. 5a X count in a foreign country. 5a X bill on any taxable party notify the organization the form 1886 17. 5a X count in a foreign country. 5a X do any taxable party notify the organization in the form 1886 17. 5a X do any taxable party notify the organization in the form 1886 17. 5a X de in "Yes", idd the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as chantable contributions? 5a X de in "Yes", idd the organization notify the down of the value of the goads or services provided 10. 7a X de in "Yes", indicate the number of forms 8282 field during the year. [7d] 7a X de bit the org	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х		
b If "Yes", "fail if field a Form 90-1 for this yea", <i>If Yes</i> ' to like 30, provide an explanation on Schedule 0. 9b X 4A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a fail fail account in a foreign country (such as a bark account, securities account, or other financial accounts) 4a X b If Yes," enter the name of the foreign country (such as a bark account, securities account, or other financial accounts (FBAR), See instructions for filing requirements for FiniceN Form 114, Report of Foreign Bark and Financial Accounts (FBAR), Sea Was the organization a party to a prohibited tax sheter transaction? 5a X 5D Data yt taxable party notify the organization file form 886617. 5a X 5a X 6D Does the organization neural gross receipts that are normally greater than \$100,000, and did the organization solicit are very contributions that are normally greater than \$100,000, and did the organization solicit as organization neural gross receipts that are normally greater than \$100,000, and did the organization solicit are accountable contributions are spits as contribution or any partice as a contribution organization solicit are accountable on the very approximation sele, exclusion than a transaction or the sale party organization neuron approximation sele, exclusion the foreign accountable of the party of the organization file approximation neuron approximation n		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a X If 'Yes,'' retref the name of the foring: ocumity' (such as a bark account, securities account, or other financial account)? 4a X If 'Yes,'' retref the name of the foring: ocumity' (such as a bark account, securities account, or other financial account)? 5a X If 'Yes,'' retref the name of the foring: ocumity (such as a bark account, or other financial account)? 5a X If 'Yes,'' the organization approximation at part into during the tax year? 5a X If 'Yes,'' to be solve.'' to a prohibited its whether transaction? 5b X If 'Yes,'' to be caparization induce with every solicitation an approximation at a yrite during the tax wear? 5a X If 'Yes,'' to the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and parily for goods and services provided to the parity atom to they ause of the organization notify the door of the value of the organization notify the door of the value of the organization and parily for goods and services provided to the parity atom notify the door of the value of the organization notify the door of the value of the organization notify the door of the value of the organization notify the door of the value of the organization notify the door of the value of the organization notify the door of the value of the organization notify the doore achy base of the organization notify the door of t	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х		
4a At any time during the calendary year, did the organization have an interest in, or a signature or other funancial accountil? 4a X b If "Yes," enter the name of the forsign country ▶ See instructions for finiting requirements for FinCEN Form 114, Report of Forsign Bank and Financial Accounts (FBAR). 5a X b Od any taxable party notity the organization that it was or is a party to a prohibited tax shelter transaction? 5a X b Od any taxable party notity the organization finite form 8867? 5a X c If "Yes" to line Sa or 5b, di the organization file form 8867? 5a X c If "Yes" to line Sa or 5b, di the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6a X b If "Yes," did the organization notity the dore of the value of the gods or anvices provided to the part? 7a X c Did the organization notity the dore of the value of the gods or anvices provided to the part? 7a X d If "Yes," did the organization notity the dore of the value of the gods or anvices provided to the part? 7a X d Uf the organization notity the dore or the value of the gods or anvices provided to the part? 7a X d Uf the organization notity the dore or the value of the gods or anvices provided to the part? 7a X d Uf the organization celve a part	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х		
b If "Yes," enter the name of the foreign country. See instructions for fing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAP). Sa Se Was the organization a party to a prohibited six shelter transaction? Sa X D Id any taxable party notify the organization that it was or is a party to a prohibited is schedule transaction? Sa X If "Yes" to ine Sa or 5b, ald the organization file Form 88867? Sa X Ga Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that terms is a charitable contributions or gifts were not tax deductable? Ga X O Organization shart may receive deductable contributions under section 170(c). Bit the organization notify the donor of the value of the goods or services provided to the part? Ta X D If "yes," did the organization notify the donor of the value of the goods or services provided? To X X D If "yes," did the organization contify the goods or services provided? To X X D If the organization contify the goods or services provided? To X X D If the organization contify the good or services provided? To X X D If the organization contify the donor advised funds, dinextly or indincetly, to pay presumes on a pers		4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
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b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c if "Yes" to line 6 a or 5b, did the organization file Form 8880-77 5c 5c 5c B Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solidit any contributions include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c 5c 5c 7 Organization setue apprent in excess of \$75 made party as a contribution and party for goods and services provided to the payn? 7c X 7c X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c X 7c X c Did the organization neeview any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7c X f Did the organization neeview a contribution of qualified intellectual property. Id the organization feelomes benefit contract? 7c X 7d 7d X f Did the organization neeview a contribution of qualified intellectual property. Id the organization feelome 900 or advised funds. 7d 7d 7d 7d 7d 7d 7d 7d 7d <t< th=""><th colspan="5"></th></t<>						
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Ga Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Ga X b If "Ves," did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? Ga X b If "Ves," did the organization include with very solicitation and party for goots and services provided to the payor? 7a X b If "Ves," did the organization such expenses of \$75 made party as a contribution and party for which it was required to file Form 8282? 7d X c Did the organization netwer selve deductible contributions under section 170(c). 7d X Z d If "Yes," indicate the number of Form 8282 filed during the year Td Z Z Z d If the organization netwerk a contribution of qualified intelectual property, for which it was required 7d X f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d X f If the organization neceive a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8898 are quired? 7d X f If the organization neceive a distribution to a doner drived fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9a 9a 9a </th <th>с</th> <th>If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</th> <th>5c</th> <th></th> <th></th>	с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
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If "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			15		x	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?						
	16		16		x	

Form **990** (2020)

032005 12-23-20

PHILADELPHIA Form 990 (2020)

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	 X
Section A. Governing Body and Management	

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a	30			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form §	990 wa	s filed?	4		X
5	5 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?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	ppoint	one or			
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	olders, or			
	persons other than the governing body?			7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-			
	The governing body?			<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
600	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
10-	Did the superiorities have lead shorters by a shift best			40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			<u>10a</u>		
a				10b		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing bod		re filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ly belo		110		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
	in Schedule O how this was done	,		12c	х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	al by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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 arrange	ment w	vith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
800	exempt status with respect to such arrangements?			16b		
	List the states with which a copy of this Form 990 is required to be filed AL , AK , AR , CA , CA			υт	TT.	VC
17 19						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a for public inspection. Indicate how you made these available. Check all that apply.	10 990		s or iiy)	avalia	nie
	X Own website Another's website X Upon request Other (explain	n or 0	abadula ()			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	finan	ial	
19	statements available to the public during the tax year.	Simula	or interest policy, and	11110110	nai	
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records			
20	DREXEL UNIVERSITY, COMPTROLLER'S OFFICE - 215-895-					
	· · · · ·	9104				
032006	12-23-20 SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2020)

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THE ACADEMY OF NATURAL SCIENCES OF	F				
Form 990 (2020) PHILADELPHIA	23-1352000 Page 7				
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.

See instructions for the order in which to list the persons above.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer an	aaa	recio	r/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	rustee	l trus		ee	npen		(00-2/1099-00130)		organization and related
	below	dual t	n stit utio nal tru stee	-	nploy	st cor	1			organizations
	line)	Individual trustee or director	Institu	Officer	Key employee	Highest compensated employee	Former			o.gamzanono
(1) JOHN A. FRY	2.00									
BOARD TRUSTEE	45.00	Х						0.	2,037,295.	346,976.
(2) PAUL JENSEN, PHD	2.00									
BOARD TRUSTEE (THROUGH 2/21)	40.00	Х						0.	595,872.	48,592.
(3) SHARON L. WALKER, PHD, F. AEESP	2.00									
BOARD TRUSTEE	40.00	Х						0.	372,954.	36,013.
(4) SCOTT COOPER, PHD	40.00									
PRESIDENT AND CEO	0.00	Х		Х				375,629.	0.	32,488.
(5) DAVID RUSENKO	2.00									
BOARD TRUSTEE	42.00	Х						0.	277,216.	29,383.
(6) LISA M MILLER	40.00							000 551		10 101
<u>VP, CFO/COO</u>	0.00			Χ				222,571.	0.	13,184.
(7) DAVID VELINSKY	2.00								100 004	
VP, CENTER FOR ACADEMY SCI	40.00				X			0.	187,884.	26,714.
(8) NICOLE STEWART	40.00				77			170 520	0	24 204
CHIEF LEARNING & ENGAGEM	0.00				Х			170,539.	0.	24,304.
(9) JANE TAYLOR	40.00				x			157 202	0.	0 010
VP, MARKETING, SALES & COM (10) JACQUELINE GENOVESI	40.00				<u> </u>	-		157,303.	0.	9,218.
VP, EDUCATION	0.00	1				x		137,556.	0.	8,603.
(11) JOSEPH RESNICK	40.00							137,330.	0.	0,005.
SR DIRECTOR, TECHNOLOGY & INFRASTRUC	0.00	1				x		100,681.	0.	22,910.
(12) MEGHAN BUCCI	40.00					11		100,001.		22,910.
EXECUTIVE DIRECTOR OF FINA	0.00	1				x		110,623.	0.	9,849.
(13) CAROL COLLIER	40.00									
SR ADVISOR, WATERSHED MGT, CTR ENVIR	0.00	1				x		107,247.	1,000.	1,956.
(14) PETER AUSTEN	2.00							•		
BOARD TRUSTEE	0.00	х						0.	0.	0.
(15) JOHN F. BALES, III	2.00									
BOARD TRUSTEE	0.00	Х						0.	0.	0.
(16) JEFFREY A. BEACHELL	2.00									
BOARD TRUSTEE	2.00	Х						0.	0.	0.
(17) AMY BRANCH-BENOLIEL	2.00									
BOARD TRUSTEE	0.00	Х						0.	0.	0.
032007 12-23-20										Form 990 (2020)

032007 12-23-20

Form 990 (2020)

THE	ACADEMY	OF	NATURAL	SCIENCES	OF

Form 990 (2020) PHILADELE	PHIA								23-13	3520	000	Page 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees, a	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0				(D)	(E)		(F	=)
Name and title	Average	<i>.</i> .			ition			Reportable	Reportable		Estin	
	hours per		not ch , unles:					compensation	compensation	I		unt of
	week		cer and					from	from related			her
	(list any	ctor						the	organizations	I	compe	nsation
	hours for	direc				p		organization	(W-2/1099-MIS			n the
	related	ee or	stee			nsate		(W-2/1099-MISC)			organi	zation
	organizations	trust	al tru		yee	om pe					and re	elated
	below	ndividual trustee or director	Institutional trustee	er	mplc	est co oyee	er				organia	zations
	line)	Indiv	Instit	Officer	Key employee	Highest compensated employee	Former					
(18) ERICA CARPENTER, PHD	2.00											
BOARD TRUSTEE	0.00	Х						0.		0.		0.
(19) AMY COES	2.00											
BOARD TRUSTEE	0.00	Х						0.		0.		Ο.
(20) MAUREEN CRAIG	2.00											
BOARD TRUSTEE	0.00	x						0.		0.		Ο.
(21) ABBIE DEAN	2.00											
VICE CHAIR	2.00	x		х				0.		0.		0.
(22) ROBERT J. DELANY	2.00											
TREASURER	0.00	x		х				0.		0.		0.
(23) SUZANNE EVELAND	2.00									~ +		
BOARD TRUSTEE	0.00	x						0.		0.		0.
(24) JASON FRIEDLAND	2.00											
BOARD TRUSTEE	0.00	x						0.		0.		0.
(25) MARC E. GOLD	2.00											
BOARD TRUSTEE	0.00	x						0.		0.		0.
(26) DAVID E. GRIFFITH	2.00											
CHAIR	2.00	x		х				0.		0.		0.
dh. Cubtotol	2.00	- 23		23				1,382,149.	3,472,22		610	190.
	Castian A							0.	5,472,22	0.	010,	0.
c Total from continuation sheets to Part VII								1,382,149.	3,472,22	-	610	190.
d Total (add lines 1b and 1c)								, , ,			010,	190.
2 Total number of individuals (including but no	ot limited to th	ose	listec	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	1		0
compensation from the organization												8
										г	Y	es No
3 Did the organization list any former officer,	director, trust	ee, k	key er	mpl	oyee	e, or	hig	hest compensated emp	oyee on			
line 1a? If "Yes," complete Schedule J for su	uch individual									L	3	<u> </u>
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mper	nsa	tion	and	oth	ner compensation from t	ne organization			
and related organizations greater than \$150	,000? If "Yes,	" со	mple	te S	Sche	edule	Jf	for such individual		[4 Σ	ζ 📃
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com											5	X
Section B. Independent Contractors				·								
1 Complete this table for your five highest cor	npensated inc	lepe	nden	t cc	ontra	actor	s th	nat received more than \$	100,000 of comp	ensati	ion from	
the organization. Report compensation for t	-											
(A)	,			<u> </u>				(B)			(C)	
Name and business	address							Description of s	ervices	Co	ompensa	ation
GILBANE BUILDING COMPANY,	100 E	PE	NN	S	0			CONSTRUCTION				
UNIT 1040, PHILADELPHIA,				D	×			SERVICES		2	156	292.
LIMBACH COMPANY, LLC, 175			UNT	707			-				,130,	272.
		Αv	EIVC	16	'				~		202	EC /
STE 100, WARRINGTON, PA 1 CLEAN TECH SERVICES, INC,		ΠO		T m		<u></u>	-	HVAC SERVICE	5		203,	564.
		БЭ	TINC	J.T.	5	т,					257	270
5TH FL, PHILADELPHIA, PA 19106CLEANING SERVICESCAPACITY INTERACTIVE CONSULTING, LLC								457,	370.			
				-	1 A	~ ~ .					000	000
1239 BROADWAY, STE 1103,		к,	NY	(т U	00	L	MEDIA CONSUL'	I'AN'I'		238,	883.
LFP COACHING & CONSULTING, LLC								1	004			
31 NORTH SUGAN RD, NEW HO								CONSULTING S			132,	934.
2 Total number of independent contractors (ir	-	ot lin	nited	to			ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz	ation 🕨				- 7	/						

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2020)

032008 12-23-20

9

THE	ACADEMY	OF	NATURAL	SCIENCES	OF
PHII	ADELPHIA	A			

Form 990 PHILADE	LPHIA		01			01	,	CES OF	23-135	2000
Part VII Section A. Officers, Directors,		nplo	yee			lighe	est (, ,	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(-			ition		ь. Л	Reportable	Reportable	Estimated
	hours per	(CI	neck I	(all 1	that	app	iy)	compensation from	compensation from related	amount of other
	week					ee		the	organizations	compensation
	(list any	ctor				n plo y		organization	(W-2/1099-MISC)	from the
	hours for	or dire				ted er		(W-2/1099-MISC)		organization
	related	stee o	truste		æ	pensa				and related
	organizations	ual tru	ional 1		ploye	t com				organizations
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(27) LATASHA HARLING	2.00	-	-	0	×	Ŧ	ш			
BOARD TRUSTEE	0.00	х						0.	0.	0.
(28) ELLEN D. HARVEY	2.00									
BOARD TRUSTEE	0.00	x						0.	0.	0.
(29) JUN HUANGPU, PH.D., MBA	2.00									
BOARD TRUSTEE	0.00	х						0.	0.	0.
(30) RASHAAD LAMBERT	2.00									
BOARD TRUSTEE	0.00	х						0.	0.	0.
(31) WILLIAM LANDMAN	2.00									
BOARD TRUSTEE	0.00	Х						0.	0.	0.
(32) ALLEN J. MODEL	2.00									
BOARD TRUSTEE	0.00	Х						0.	0.	0.
(33) RACHANA PATEL	2.00									_
BOARD TRUSTEE	0.00	Х						0.	0.	0.
(34) RON PHILIP	2.00									•
BOARD TRUSTEEE	0.00	X						0.	0.	0.
(35) MICHAEL H. REED, ESQ.	2.00			37					0	0
VICE CHAIR (36) IVY SILVER	0.00	Х		X				0.	0.	0.
BOARD TRUSTEE (THROUGH 9/20)	0.00	x						0.	0.	0.
(37) JOHN F. SMITH, III	2.00								0.	0.
BOARD TRUSTEE	0.00	х						0.	0.	0.
(38) JOHN J. SOROKO	2.00									
BOARD TRUSTEE	0.00	х						0.	0.	0.
(39) MICHAEL K. TUCKER	2.00									
BOARD TRUSTEE	0.00	х						0.	0.	0.
(40) ROBERT VICTOR	2.00									
SECRETARY	0.00	Х		Х				0.	0.	0.
(41) CYNTHIA P. HECKSCHER	2.00									
BOARD TRUSTEE - EMERITUS	0.00	Х						0.	0.	0.
(42) EDWARD A. MONTGOMERY, JR.	2.00									
BOARD TRUSTEE - EMERITUS	0.00	Х						0.	0.	0.
(43) I. WISTAR MORRIS III	2.00									
BOARD TRUSTEE - EMERITUS	0.00	Х						0.	0.	0.
(44) MINTURN T. WRIGHT, III	2.00								<u>^</u>	0
BOARD TRUSTEE - EMERITUS	0.00	Х						0.	0.	0.
		•								
]								
Total to Part VII, Section A, line 1c										

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Form							23-1352	000 Page 9
Pa	t V	/111	Statement of Revenue					
			Check if Schedule O contains a response	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					Total revenue	function revenue	business revenue	from tax under
								sections 512 - 514
ints Ints	1		Federated campaigns 1a	220 502				
Gra			Membership dues 1b	220,502.				
fts,			Fundraising events 1c Related organizations 1d	5,952,052.				
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations 1d Government grants (contributions) 1e	511,298.				
Sin			All other contributions, gifts, grants, and					
her		•	similar amounts not included above 1f	3,070,195.				
lot it		q	Noncash contributions included in lines 1a-1f	182,870.				
Cor			Total. Add lines 1a-1f	►	9,754,047.			
				Business Code				
ø	2	а	ENVIRONMENTAL RESEARCH	541700	2,482,796.	2,482,796.		
e vic		b	SYSTEMATIC BIOLOGY RE	541700	970,022.	970,022.		
enu Se		•	MUSEUM ADMISSIONS	712110	499,815.	499,815.		
ram leve			EDUCATION & MUSEUM PRO	611600	499,522.	499,522.		
Program Service Revenue		•	ALL OTHER PROGRAM SERVICES	712110	18,427.	18,427.		
ē			All other program service revenue					
			Total. Add lines 2a-2f		4,470,582.			
	3		Investment income (including dividends, intere	· .	1,109,046.			1,109,046.
	4		other similar amounts) Income from investment of tax-exempt bond p		1,105,040.			1,105,040.
	4 5		Royalties	ſ	30,415.			30,415.
	5		(i) Real	(ii) Personal	,			
	6	а	Gross rents 6a					
	-		Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)	►				
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 14,602,000.					
		b	Less: cost or other basis					
anu			and sales expenses 7b 10,562,731.					
evenue			Gain or (loss) 7c 4,039,269.	-2,885.				
r R			Net gain or (loss)	▶	4,036,384.			4,036,384.
Other R	8	а	Gross income from fundraising events (not					
0			including \$ of					
			contributions reported on line 1c). See Part IV, line 18					
		b	Less: direct expenses					
			Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities	►				
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold10b					
		С	Net income or (loss) from sales of inventory	Bueir and Carl				
sn		-	PENSION ACTUARIAL ADJUSTMENT	Business Code 900099	2,736,265.			2,736,265.
Miscellaneous <u>Revenue</u>	11		FACILITY SALES	531120	16,122.			16,122.
jlar ven			INCOME (LOSS) FROM PARTNERSHIP IN	525990	-44,266.		-44,266.	
isce Be		-	All other revenue		,200.			<u> </u>
Σ			Total. Add lines 11a-11d		2,708,121.			
	12		Total revenue. See instructions	>	22,108,595.	4,470,582.	-44,266.	7,928,232.
032009	9 12-	-23-						Form 990 (2020)

11

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA Part IX Statement of Functional Expenses

Dou	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	546,915.	546,915.		
2	Grants and other assistance to domestic	10,800.	10,800.		
~	individuals. See Part IV, line 22	10,000.	10,000.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ū	trustees, and key employees	895,722.	136,184.	682,787.	76,751
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	5,935,286.	5,187,914.	528,227.	219,145
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	266,712.	207,876.	47,283.	<u>11,553</u> 33,519
9	Other employee benefits	815,132.	644,930.	136,683.	33,519
10	Payroll taxes	484,028.	377,253.	85,809.	20,966
11	Fees for services (nonemployees):				
а	Management				
b	Legal	4,526.	4,526.		
	Accounting	90,200.		90,200.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	202 411		202 411	
f	Investment management fees	303,411.		303,411.	
g	Other. (If line 11g amount exceeds 10% of line 25,	1 040 124	244 701		22 202
	column (A) amount, list line 11g expenses on Sch 0.)	1,049,124. 254,854.	344,721. 254,854.	680,606.	23,797
12	Advertising and promotion	546,568.	452,223.	62,111.	32,234
13	Office expenses	173,157.	144,187.	24,760.	4,210
14 15	Information technology	11,689.	11,689.	24,700.	4,210
15 16	Royalties	1,651,796.	1,571,357.	61,753.	18,686
17	Occupancy Travel	32,439.	32,292.	147.	10,000
18	Payments of travel or entertainment expenses	5271551	5272521	/·	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,699.	7,699.		
20	Interest	,	,		
21	Payments to affiliates	2,528,792.	743,416.	1,718,484.	66,892
22	Depreciation, depletion, and amortization	1,323,439.	1,258,989.	49,479.	14,971
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	EXHIBITION EXPENSE	242,389.	242,389.		
b	MISCELLANEOUS	39,168.	29,768.	6,917.	2,483
c	PROFESSIONAL MEMBERSHIP	37,739.	10,112.	26,128.	1,499
d	PARTICIPANT EXPENSE	10,850.	10,850.	,	, 22
	All other expenses	19,460.	17,784.	1,026.	650
25	Total functional expenses. Add lines 1 through 24e	17,281,895.	12,248,728.	4,505,811.	527,356
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Figure if following SOP 98-2 (ASC 958-720)				Farma 990 (000

12

032010 12-23-20

Form 990 (2020)

Form 990 (2020)

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THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

orm Par	990 (2	2020) PHILADELPHIA Balance Sheet		23-	1352000 Page 1
-ar	1.7				
		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
			4,490.		
	1	Cash - non-interest-bearing	458,007.	1	4,333 659,489
	2	Savings and temporary cash investments	1,602,595.	2	
	3	Pledges and grants receivable, net		3	1,767,320
	4	Accounts receivable, net	147,773.	4	239,715
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		_	
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ji S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	CO 125	8	110.000
<	9	Prepaid expenses and deferred charges	68,135.	9	112,992
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D10a31,376,461.Less: accumulated depreciation10b12,333,088.	00 000 000		10 040 000
	b		20,070,398.	10c	
	11	Investments - publicly traded securities	39,702,549.	11	42,760,761
	12	Investments - other securities. See Part IV, line 11	28,634,591.	12	42,253,000
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	1 - 0	14	11.000
	15	Other assets. See Part IV, line 11	15,057.	15	11,060
_	16	Total assets. Add lines 1 through 15 (must equal line 33)	90,703,595.	16	106,852,043
	17	Accounts payable and accrued expenses	1,679,115.	17	1,679,687
	18	Grants payable	1 668 840	18	
	19	Deferred revenue	1,667,748.	19	3,067,919
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	10 000 001		
		of Schedule D	12,276,931.		6,216,276
_	26	Total liabilities. Add lines 17 through 25	15,623,794.	26	10,963,882
ر م		Organizations that follow FASB ASC 958, check here 🕨 🗴			
i ce		and complete lines 27, 28, 32, and 33.	0 701 000		
alar	27	Net assets without donor restrictions	2,721,000.	27	5,727,000 90,161,161
	28	Net assets with donor restrictions	72,358,801.	28	90,161,161
<u>s</u>		Organizations that do not follow FASB ASC 958, check here			
		and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
SSe	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Se	32	Total net assets or fund balances	75,079,801.	32	95,888,161
	33	Total liabilities and net assets/fund balances	90,703,595.	33	106,852,043 Form 990 (202

Form **990** (2020)

032011 12-23-20

THE	ACADEMY	OF	NATURAL	SCIENCES	OF
THE	ACADEMY	OF	NATURAL	SCIENCES	0

Form	990 (2020) PHILADELPHIA	23-1	352000	Р	_{age} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,10		
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,28		
3	Revenue less expenses. Subtract line 2 from line 1	3	4,82		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	75,07	<u> </u>	
5	Net unrealized gains (losses) on investments	5	15,98	<u>3,1</u>	L64.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-	·1,5	504.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	95,88	88,1	L61.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000	•

Form **990** (2020)

032012 12-23-20

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	2020 Open to Public
Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	
Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization THE ACADEMY OF NATURAL SCIENCES OF Employer idea	Inspection
	entification number
PHILADELPHIA 23- Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.	-1352000
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)	
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).	
 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 	
 A model and a cooperative nospital service organization described in section 170(b) (1)(A)(iii). Enter the l A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the l 	hospital's name
city, and state:	noopital o hamo,
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in	n
section 170(b)(1)(A)(iv). (Complete Part II.)	
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).	
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general publi	olic described in
section 170(b)(1)(A)(vi). (Complete Part II.)	
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)	
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant colle	lege
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or	
university:	
	•
activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after	-
See section 509(a)(2). (Complete Part III.)	
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).	
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purp	rposes of one or
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Chec	•
lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.	
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by givin	ing
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the suppo	orting
organization. You must complete Part IV, Sections A and B.	
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having	
control or management of the supporting organization vested in the same persons that control or manage the supporte	ted
organization(s). You must complete Part IV, Sections A and C.	vith
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated wi its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.	vitri,
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization	on(s)
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentivene:	
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.	
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III	
functionally integrated, or Type III non-functionally integrated supporting organization.	
f Enter the number of supported organizations	
g Provide the following information about the supported organization(s).	
(described on lines 1-10 (described on lines 1-10)	(vi) Amount of other pport (see instructions)
above (see instructions)) Yes No support (see instructions) support	
Total	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020 15

THE ACADEMY OF NATURAL SCIENCES OF Schedule A (Form 990 or 990-EZ) 2020 PHILADELPHIA

23-1352000 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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)						
	Public support. Subtract line 5 from line 4. ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4		(6) 2017	(6) 2010	(0) 2013	(6) 2020	
8	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for th		,			501(c)(3)	
	organization, check this box and stor	here					
Se	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2020 (li	ine 6, column (f), c	divided by line 11,	column (f))		14	%
	Public support percentage from 2019					15	%
16a	33 1/3% support test - 2020. If the c	organization did ne	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies		-				
k	33 1/3% support test - 2019. If the c	organization did ne	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts			-	-	t VI how the organi	zation
	meets the facts-and-circumstances te	0	•		•		
k	10% -facts-and-circumstances test	-	-				10% or
	more, and if the organization meets th						. —
40	organization meets the facts-and-circu		•		• • • •		
18	Private foundation. If the organizatio	n did not check a	100x on line 13, 16	a, 100, 17a, 0r 17			
					300	edule A (Form 990	J UI 33U-EL) 2U2U

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Schedule A (Form 990 or 990 EZ) 2020 PHILADELPHIA

23-1352000 Page 3

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support		-	-	-	-	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10349866.	8221368.	6903824.	7982410.	9754047.	<u>43211515.</u>
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	6451950.	10394300.	5945366.	5141736.	4486704.	32420056.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- 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	16801816.	18615668.	12849190.	13124146.	14240751.	75631571.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	1840017.	3345769.	455,927.	838,933.	901,541.	7382187.
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	1344004.	111,960.	364,149.	915,475.	1510390.	4245978.
c	Add lines 7a and 7b	3184021.	3457729.	820,076.	1754408.	2411931.	11628165.
	Public support. (Subtract line 7c from line 6.)						64003406.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	16801816.	<u>18615668.</u>	12849190.	<u>13124146.</u>	<u>14240751.</u>	<u>75631571.</u>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1557908.	1404993.	1684053.	1595922.	1139461.	7382337.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	1557908.	1404993.	1684053.	1595922.	1139461.	7382337.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	55,320.					55,320.
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)	331,039.	489,539.	271,587.		2736265.	3828430.
13	Total support. (Add lines 9, 10c, 11, and 12.)	18746083.			14720068.		
	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	, /ear as a section 5	01(c)(3) organizatio	on,
	check this box and stop here	~					
Sec	ction C. Computation of Publ						
15	Public support percentage for 2020 (ine 8, column (f), d	livided by line 13, c	column (f))		15	73.65 %
16	Public support percentage from 2019	Schedule A, Part	III, line 15			16	76.09 %
Sec	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20)20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	8.50 %
18	Investment income percentage from	2019 Schedule A,	Part III, line 17			18	8.11 %
19a	33 1/3% support tests - 2020. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box a	-	•		•••••		►X
b	33 1/3% support tests - 2019. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	is a publicly suppo	rted organization	▶□
20	Private foundation. If the organization	on did not check a	box on line 14, 19a	a, or 19b, check th			▶□]
03202	23 01-25-21		. –		Sch	edule A (Form 990) or 990-EZ) 2020
			17				

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Schedule A (Form 990 or 990-EZ) 2020 PHILADELPHIA

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

18

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1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Schedule A (Form 990 or 990-EZ) 2020

10b

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Yes No

Schedule A (Form 990 or 990 EZ) 2020 PHILADELPHIA Part IV Supporting Organizations (continued) 11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?

- b A family member of a person described in line 11a above?
- c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Part VI</u>

Section B. Type I Supporting Organizations

Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

upervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If</i> "Yes," <i>describe in</i> Part VI <i>the role the organization</i> 's	2		
	supported organizations played in this regard	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below. а
- b The organization is the parent of each of its supported organizations. Complete line 3 below.

c 🗌] The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
-----	---	---	--

19

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

3b

No

Yes

2a

2b

3a

2020.05094 THE ACADEMY OF NATURAL SC 06____1

11a

11b

11c

1

2

1

Yes No

Yes No

Yes No

Schedule A (Form 990 or 990-EZ) 2020 PHILADELPHIA Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 3 Enter greater of line 2 or line 3. 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions)

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

23-1352000

Sche Par	dule A (Form 990 or 990-EZ) 2020 PHILADELPHIA t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu		3-1352000 Page 7
		allo Supporting Orga	nizations (continu	iea)	Current Veer
	on D - Distributions	matauraaaa		1	Current Year
_1 _2	Amounts paid to supported organizations to accomplish exer				
2	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	e of supported organizations		2	
4	Amounts paid to acquire exempt-use assets	es of supported organizations	•	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovido dotailo in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
-	(provide details in Part VI). See instructions.	·····		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	IS	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

032027 01-25-21

	THE ACADEMY OF NA	TURAL SCIENCES OF	
Schedule A	(Form 990 or 990-EZ) 2020 PHILADELPHIA		23-1352000 Page 8
Part VI	Supplemental Information. Provide the explanations	required by Part II, line 10; Part II, line 17a or	17b; Part III, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, line	11a, 11b, and 11c; Part IV, Section B, lines 1	and 2; Part IV, Section C,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, a	and 6 Also complete this part for any addition	al information
	(See instructions.)		
		0-11-1	o A (Earm 000 at 000 EZ) 0000
032028 01-25-2	21	Schedul	e A (Form 990 or 990-EZ) 2020

SC		Supplementa	al Financial Statements	OMB No. 1545-0047
	n 990)	Complete if the org	anization answered "Yes" on Form 990,	2020
Depart	ment of the Treasury	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.	Open to Public
Interna	Revenue Service	n. Inspection		
Nam	e of the organization		JRAL SCIENCES OF	Employer identification number
Pa	t I Organiza	PHILADELPHIA ations Maintaining Donor Advised	d Funds or Other Similar Funds or A	23-1352000
I u		n answered "Yes" on Form 990, Part IV, lin		Complete in the
	organization		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at er	nd of year		
2		f contributions to (during year)		
3		f grants from (during year)		
4	Aggregate value at	t end of year		
5	Did the organizatio	on inform all donors and donor advisors in v	writing that the assets held in donor advised fu	unds
			exclusive legal control?	
6	•		dvisors in writing that grant funds can be used	•
			r donor advisor, or for any other purpose conf	
Pa	impermissible priva		ganization answered "Yes" on Form 990, Part	
1		servation easements held by the organization		
•		of land for public use (for example, recrea		istorically important land area
		f natural habitat	, <u> </u>	ertified historic structure
		of open space		
2		• •	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year	· · · · · · · · · · · · · · · · · · ·		Held at the End of the Tax Year
а	Total number of co	onservation easements		2a
b	Total acreage restr	ricted by conservation easements		2b
С	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	
d			after 7/25/06, and not on a historic structure	
_				
3		vation easements modified, transferred, rel	eased, extinguished, or terminated by the orga	anization during the tax
4	year	where property subject to conservation eas		
4 5		tion have a written policy regarding the per		
5	•	orcement of the conservation easements it		Yes No
6	,		handling of violations, and enforcing conserva	
	▶			
7	Amount of expense	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easements during the year
	▶\$			
8		• • • • • • • • •	e satisfy the requirements of section 170(h)(4)	
9	,	0	on easements in its revenue and expense stat	
			ote to the organization's financial statements	that describes the
Pa	t III Organization s acco	ounting for conservation easements. Ations Maintaining Collections of	Art, Historical Treasures, or Other	^r Similar Assets.
		the organization answered "Yes" on Form		
- 1a			8, not to report in its revenue statement and b	palance sheet works
	•		blic exhibition, education, or research in furthe	
			ncial statements that describes these items.	·
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balar	nce sheet works of
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of public service,
	provide the followi	ng amounts relating to these items:		
	(i) Revenue inclue	ded on Form 990, Part VIII, line 1		► \$
	(ii) Assets include	ed in Form 990, Part X		
2	•		asures, or other similar assets for financial gai	n, provide
	-	unts required to be reported under FASB A	-	N .
		Form 990, Part X	for Form 990	Schedule D (Form 990) 2020
	Гог Рарегworк Ке	eduction Act Notice, see the instructions		Schedule D (FOIII 990) 2020
00200	2-01-20		27	

2020.05094 THE ACADEMY OF NATURAL SC 06____1

	THE ACA	DEMY OF NAT	TURAL SCIE	NCES OF					
	dule D (Form 990) 2020 PHILADE								Page 2
Par	t III Organizations Maintaining C	ollections of Art	i, Historical Tre	easures, or	Other \$	Similar	Asset	s _{(continu}	ued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	following that n	nake sigi	nificant u	se of its		
	collection items (check all that apply):								
а	X Public exhibition	d	X Loan or exc	hange progran	n				
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	ne organization	i's exemp	ot purpos	e in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other	similar a	ssets			
	to be sold to raise funds rather than to be ma							Yes	X No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizatio	n answered "Y	′es" on F	orm 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contribution	s or other asse	ets not in	cluded			
	on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII								
								Amount	
с	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on Fe					<u> </u>		Yes	No
	If "Yes," explain the arrangement in Part XIII.				-		······ –		
Par).			
		(a) Current year	(b) Prior year	(c) Two years		d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	58,758,000.	61,880,000.				1,000.)32,000.
	Contributions	171,000.	209,000.		,000.		10,000.		715,000.
	Net investment earnings, gains, and losses	17,979,000.	-24,000.				51,000.		993,000.
	Grants or scholarships					- / -			
	Other expenditures for facilities								
е		3,642,000.	3,307,000.	3,043,	000	2 3	14,000.	2	999,000.
	and programs	5,042,000.	5,507,000.	5,015,	,	2,5	11,000.	2,	,000.
	Administrative expenses	73,266,000.	58,758,000.	61,880,	000	62 10	8,000.	59 '	741,000.
-	End of year balance					02,12	,	55,	,41,000.
2	Provide the estimated percentage of the curr)) heid as:					
	Board designated or quasi-endowment	2.2700	_%						
	Permanent endowment $\blacktriangleright \frac{89.2400}{9.4000}$	%							
С		%							
	The percentages on lines 2a, 2b, and 2c show								
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administere	d for the	organiza	tion	Б	
	by:								Yes No
	(i) Unrelated organizations								X
	(ii) Related organizations								<u> </u>
b	If "Yes" on line 3a(ii), are the related organiza							3b	
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere								
	Description of property	(a) Cost or of		or other	. ,	cumulate	d	(d) Book	value
		basis (investr	nent) basis	(other)	depr	reciation			
1a	Land								
b	Buildings		25,75	5,140.	7,3	70,22	28. 1	<u>.8,384</u>	,912.
с	Leasehold improvements								
d	Equipment		5,53	1,249.		14,06		617	,180.
	Other		9	0,072.		48,79	1.	41	,281.
Total	. Add lines 1a through 1e. (Column (d) must e	aual Form 990. Part 2	X. column (B). line 1	0c.)			▶ 1	.9,043	,373.
			· · · · · · ·				Schedule	D (Form	990) 2020

THE	ACADEMY	OF	NATURAL	SCIENCES	OF
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Schedule D (Form 990) 2020 PHILADELPHI	A	23-	-1352000 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) INVESTMENT AT NAV			
(B) (PRIVATE EQUITY, REAL			
(C) ESTATE, HEDGE FUNDS AND			
(D) OTHER)	42,253,000.	END-OF-YEAR MARKET	VALUE
(E)(E)			
(F)			
(G)			
(H)			
	42,253,000.		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	42,255,000		
	an Faire 000 Bart N/ lines		
<u>Complete if the organization answered "Yes"</u> (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of year market value
	(b) BOOK value	(C) Method of Valuation. Cost of end-	oryear market value
(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"		11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	<u>- 15</u>)		
Part X Other Liabilities.	, 10,		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	, ,	, , ,	(b) Book value
(1) Federal income taxes			
(2) DEPOSITS			64,544.
(3) POST RETIREMENT AND PENSIO	ON		01/0110
(4) BENEFIT	~11		6,141,372.
			10,360.
			IU, JUU.
(6)			
(7)			
(8)			
<u>(9)</u>			6 016 076
Total. (Column (b) must equal Form 990, Part X, col. (B) line			6,216,276.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements that	at reports the

X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

032053 12-01-20

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	THE ACADEMY OF NATURAL SCIE	SNCES	S OF		
Sche	dule D (Form 990) 2020 PHILADELPHIA				1352000 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts Wi	th Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	37,491,957.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	15,983,164.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	15,983,164.
3	Subtract line 2e from line 1			3	21,508,793.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-2,885.		
с	Add lines 4a and 4b			4c	599,802.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	5	22,108,595.		
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	16,682,093.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	16,682,093.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		602,687.		
b	Other (Describe in Part XIII.)	4b	-2,885.		
с	Add lines 4a and 4b			4c	599,802.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	17,281,895.
Pa	t XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ACADEMY IS A NOT-FOR-PROFIT CORPORATION THAT HAS BEEN GRANTED TAX

EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND,

ACCORDINGLY FILES FEDERAL TAX FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM

INCOME TAX), ANNUALLY.

THE ACADEMY HAS FROM TIME TO TIME REPORTED UNRELATED BUSINESS INCOME FROM

INVESTMENTS HELD IN THE ENDOWMENT FUND, WHEN UNRELATED BUSINESS INCOME HAS

BEEN REPORTED BY THE INVESTMENT MANAGER ON SCHEDULE K-1. THE STATUTE OF

LIMITATIONS ON THE ACADEMY'S U.S. FEDERAL INFORMATIONAL RETURNS REMAINS

OPEN FOR THREE YEARS FOLLOWING THE YEAR THEY ARE FILED.

THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED ACCOUNTING

STANDARDS CODIFICATION ("ASC") 740-10, ACCOUNTING FOR UNCERTAINTY IN

032054 12-01-20

Schedule D (Form 990) 2020

1

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30

2020.05094 THE ACADEMY OF NATURAL SC 06____

 THE ACADEMY OF NATURAL SCIENCES OF

 Schedule D (Form 990) 2020
 PHILADELPHIA
 23-1352000 Page 5

 Part XIII
 Supplemental Information (continued)
 INCOME TAXES, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR

 DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THE ACADEMY DOES

 NOT BELIEVE THERE ARE ANY UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE

RECOGNITION IN THE FINANCIAL STATEMENTS AS OF JUNE 30, 2021, AND 2020.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS LOSS ON DISPOSAL OF ASSET

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS LOSS ON DISPOSAL OF ASSETS

PART III, LINE 1A:

COLLECTIONS ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ACADEMY'S INCEPTION ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR AS TEMPORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS. CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED ON THE FINANCIAL STATEMENTS. THE ACADEMY'S COLLECTIONS ARE MADE UP OF LIBRARY HOLDINGS, SCIENTIFIC SPECIMENS, MINERALS, EXHIBITS, AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL, RESEARCH, SCIENTIFIC, AND CURATORIAL PURPOSES. EACH OF THESE ITEMS ARE CATALOGED, PRESERVED, AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY.

PART III, LINE 4:

THE ACADEMY'S COLLECTIONS OF MORE THAN 19 MILLION CATALOGED NATURAL

HISTORY SPECIMENS AND ARTIFACTS ARE COLLECTIVELY AMONG THE 10 LARGEST IN
Schedule D (Form 990) 2020

31

032055 12-01-20

		THE ACADEM	Y OF NATU	RAL SCIENC	CES OF		
Schedule D (Form 990		PHILADELPH				23-1352000	Page 5
Part XIII Supple	ental Inform	nation _(continued)					
THE UNITED	STATES.	THROUGH IT	S THREE MA	IN COMPON	ENTS - RESI	EARCH,	
EDUCATION A	ND MUSEUM	, THE ACAD	EMY WORKS	TO SHARE	ITS SCIENT	IFIC KNOWLED	GE
GAINED FROM	THE COLL	ECTIONS AN	D OTHER OF	RGANIZATIO	NS, GOVERNI	MENTS,	
BUSINESSES,	AND INDI	VIDUALS TO	INSPIRE S	STEWARDSHI	P IN THE EI	NVIRONMENT AI	ND
TO PROMOTE	AND ENCOU	RAGE CONTI	NUED INVES	STMENT IN	THE NATURA	L SCIENCES.	

PART V, LINE 4:

THE ENDOWMENT FUNDS WERE ESTABLISHED TO SUPPORT SCIENTIFIC COLLECTIONS AND RESEARCH, EDUCATION, PUBLICATIONS, THE LIBRARY, DEPARTMENTAL CHAIRS AND POSITIONS, AND THE OVERALL OPERATION OF THE ACADEMY OF NATURAL SCIENCES.

Schedule D (Form 990) 2020

032055 12-01-20

SCHEDULE F	Stateme	nt of Act	ivities Outside the Un	ited Sta	tes	ОМ	B No. 1545-0047
(Form 990)			n answered "Yes" on Form 990, Part			2	2020
Department of the Treasury		-	Attach to Form 990.		-	Open	to Public
Internal Revenue Service	Go to v	www.irs.gov/Fo	rm990 for instructions and the latest	information.		Inspec	ction
Name of the organization THE ACADEMY OF	NATURAL S	SCIENCES	OF				cation number
PHILADELPHIA					23-13		
		ctivities Out	side the United States. Comple	ete if the organ	ization answ	vered "Ye	es" on
Form 990, Part I							
-	0		ds to substantiate the amount of its gra he selection criteria used to award the		-	X	Yes 🗌 No
2 For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	ner assistan	ce outsid	le the
	he following Part	I. line 3 table ca	n be duplicated if additional space is n	eeded.)			
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in	(d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service		expenditures for and
	in the region	independent	gram services, investments, grants to		specific typ		investments
		in the region	recipients located in the region)	of service	(s) in the reg	lion	in the region
EUROPE - INCLUDING							
ICELAND AND							
GREENLAND	0	0	PROGRAM SERVICES	RESEARCH/CO	LLECTING		3,685.
NORTH AMERICA -							
CANADA AND MEXICO,							
BUT NOT THE UNITED							
STATES	0	0	PROGRAM SERVICES	RESEARCH/CO	LLECTING		3,555.
EAST ASIA AND THE							450
PACIFIC	0	0	PROGRAM SERVICES	RESEARCH/CO	LLECTING		458.
	1						
3 a Subtotal	0	0					7,698.
b Total from continuation							<u> </u>
sheets to Part I	0	0					0.
c Totals (add lines 3a							
and 3b)	0	0					7,698.
LHA For Paperwork Reduct	tion Act Notice,	see the Instruct	tions for Form 990.		Sche	dule F (F	Form 990) 2020

032071 12-03-20

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Schedule F (Form 990) 2020

Part II 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.

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			l ecognized as charities by the t			I		1
			or counsel has provided a sect					
3 Enter total number of	other organizations c	or entities				>	Sched	ule F (Form 990) 2020

Page 2

23-1352000

032073 12-03-20

PHILADELPHIA	THE AC	CADEMY	OF	NATURAL	SCIENCES	OF
	PHILAI	DELPHIA				

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

23-1352000

Schedule F (Form 990) 2020

Schedule F (Form 990) 2020 PH

Sched	lule F (Form 990) 2020 PHILADELPHIA	23-1352000	Page 4
Part			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "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)	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2020

032074 12-03-20

THE	ACADEMY	OF	NATURAL	SCIENCES	OF
PHII	LADELPHIA	A			

Schedule F (Form 990) 2020 PHILADEL Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE EXPENDITURES INCURRED IN ACTIVITIES OUTSIDE THE UNITED STATES ARE

TRACKED ON EXPENSE REPORTS SUBMITTED BY THE SCIENTISTS AND EMPLOYEES.

THE EXPENSE REPORTS DOCUMENT THE ACTUAL EXPENDITURES AND DISBURSEMENTS

MADE WITHIN THE FOREIGN LOCATION.

PART I, LINE 3:

THE ACCRUAL ACCOUNTING METHOD IS USED TO ACCOUNT FOR THE EXPENSES.

Schedule F (Form 990) 2020

032075 12-03-20

SCHEDULE I	G	arants and Oth	er Assistand	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)	Go	vernments, an ete if the organization	d Individual	s in the Ŭni [.]	ted States		2020
Department of the Treasury Internal Revenue Service		► Go to www.ir	Attach to Forr s.gov/Form990 for		nation.		Open to Public Inspection
Name of the organization THE ACADE PHILADELP		URAL SCIENCI	-				Employer identification number 23-1352000
Part I General Information on Grants a							
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	tance?						
Part II Grants and Other Assistance to I					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PHILADELPHIA EDUCATION FUND 700 ARCH ST., #700N PHILADELPHIA, PA 19106	22-2567982	501(C)(3)	19,203.	0.			RESEARCH
TRUSTEES OF THE UNIVERSITY OF ILLINOIS – 506 S. WRIGHT ST., 209 HAB, NO. MC339 – URBANA, IL 61801	37-6000511	501(C)(3)	129,233.	0.			RESEARCH
UNIVERSITY OF DELAWARE 220 HULLIHEN HALL NEWARK, DE 19716	51-6000297	501(C)(3)	22,674.	0.			RESEARCH
ASPIRA INC OF PENNSYLVANIA 4322 N 5TH ST PHILADELPHIA, PA 19140	23-1712664	501(C)(3)	15,600.	0.			RESEARCH
TEMPLE UNIVERSITY 1805 N BROAD ST, WACHMAN HALL 1108 PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	316,833.	0.			RESEARCH
CONGRESO DE LATINOS UNIDOS (PHILADELPHIA BASED) - 216 W SOMERSET ST - PHILADELPHIA, PA 19133	23-2051143	501(C)(3)	11,600.	0.			RESEARCH
2 Enter total number of section 501(c)(3) ar			,	0.			► 7.
 2 Enter total number of section 50 n(c)(3) and 3 Enter total number of other organizations 							0.

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

THE ACADEMY OF NATURAL	SCIENCES	OF
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PHILADELPHIA Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
OCK HAVEN UNIVERSITY								
101 N FAIRVIEW ST								
LOCK HAVEN, PA 17745	23-2442881	115	31,772.	0.			RESERACH	

Schedule I (Form 990)

Schedule I (Form 990) 2020

PHILADELPHIA

23-1352000

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WARD	3	4,300.	0.		
UBCONTRACT PROFESSIONAL SERVICES	2	6,500.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE PRINCIPAL INVESTIGATOR HAVING RESPONSIBILITY FOR THE GRANT MONITORS

SUBCONTRACTOR PERFORMANCE BASED ON THE PROGRAM'S TASKS AND GOALS. THE

PRINCIPAL INVESTIGATOR REVIEWS THE PERFORMANCE BEFORE AUTHORIZING THE

SUBCONTRACTOR'S INVOICE FOR PAYMENT.

SC	HEDULE J	Compensation Information		Í	OMB No. 1	545-00	47	
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest				2020			
•	-	Compensated Employees	-		ZU	ZU	J	
Deres		Complete if the organization answered "Yes" on Form 990, Part IV Attach to Form 990.	, line 23.		Open to Public			
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest info	rmation.		Inspe	ction		
Nam	e of the organizatio			Employer	identificatio	on nu	mber	
		PHILADELPHIA		23-1	135200	0		
Pa	rt I Question	s Regarding Compensation						
						Yes	No	
1a	Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed	d on Form 9	990,				
	Part VII, Section A	line 1a. Complete Part III to provide any relevant information regarding these items	3.					
	First-class or	charter travel Housing allowance or residence	e for persor	nal use				
	Travel for con	npanions	ersonal res	sidence				
	Tax indemnifi	cation and gross-up payments Health or social club dues or ini	itiation fees	6				
	Discretionary	spending account Personal services (such as main	d, chauffeu	r, chef)				
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding paym	ent or					
	reimbursement or	provision of all of the expenses described above? If "No," complete Part III to expla			1b			
2	Did the organizatio	n require substantiation prior to reimbursing or allowing expenses incurred by all di	irectors,					
	trustees, and office	ers, including the CEO/Executive Director, regarding the items checked on line 1a?			2			
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization of the organization and the organization of the organization of the organization and the organization	anization's					
	CEO/Executive Dir	ector. Check all that apply. Do not check any boxes for methods used by a related	organizatio	on to				
	establish compens	ation of the CEO/Executive Director, but explain in Part III.						
	Compensatio	n committee X Written employment contract						
	X Independent	compensation consultant X Compensation survey or study						
	X Form 990 of c	other organizations X Approval by the board or comp	ensation co	ommittee				
4	During the year, di	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filir	ng					
	organization or a re	elated organization:						
а	Receive a severan	ce payment or change-of-control payment?			4a		X	
b	Participate in or re	ceive payment from a supplemental nonqualified retirement plan?			4b	Х		
с	Participate in or re	ceive payment from an equity-based compensation arrangement?			4c		X	
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.								
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any co	mpensatio	n				
	contingent on the	revenues of:						
а	The organization?				<u>5</u> a		X	
		zation?					X	
		or 5b, describe in Part III.						
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any co	mpensatio	n				
	contingent on the	net earnings of:						
а	The organization?				<u>6a</u>		X X	
		zation?					X	
		or 6b, describe in Part III.						
7	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	payments					
		nes 5 and 6? If "Yes," describe in Part III			7		X	
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was su	ubject to th	е				
	initial contract exc	eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part II	II		8		X	
9	If "Yes" on line 8, o	did the organization also follow the rebuttable presumption procedure described in						
	Regulations sectio	n 53.4958-6(c)?	<u></u>		9			
LHA	For Paperwork F	eduction Act Notice, see the Instructions for Form 990.		Scheo	dule J (Forn	n 990	2020	

032111 12-07-20

Schedule J (Form 990) 2020

23-1352000

Page 2

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) JOHN A. FRY	(i)	0.	0.	0.	0.	0.		0.
	ii)	762,051.	0.	1,275,244.	331,350.	15,626.	2,384,271.	574,959.
(2) PAUL JENSEN, PHD	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	545,872.	50,000.	0.	30,250.	18,342.	644,464.	0.
(3) SHARON L. WALKER, PHD, F. AEESP	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	372,954.	0.	0.	17,671.	18,342.	408,967.	0.
	(i)	375,629.	0.	0.	14,146.	18,342.	408,117.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID RUSENKO	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	277,216.	0.	0.	15,372.	14,011.	306,599.	0.
(6) LISA M MILLER	(i)	222,571.	0.	0.	12,530.	654.	235,755.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(7) DAVID VELINSKY	(i)	0.	0.	0.	0.	0.	0.	0.
	ii)	187,884.	0.	0.	8,652.	18,062.	214,598.	0.
(8) NICOLE STEWART	(i)	170,539.	0.	0.	7,727.	16,577.	194,843.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(9) JANE TAYLOR	(i)	157,303.	0.	0.	8,707.	511.	166,521.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Schedule J (Form 990) 2020

Part III Supplemental Information

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

PART I, LINE 4B:

DREXEL UNIVERSITY, A RELATED ORGANIZATION, PAID MR. FRY'S SUPPLEMENTAL

RETIREMENT PLAN OF \$887,307 IN DECEMBER 2020, WHICH BEGAN EFFECTIVE JULY 1,

2012. MR. FRY HAD BEEN CREDITED AN AMOUNT EQUAL TO 11% OF THE PREVIOUS

FISCAL YEAR'S TOTAL BASE AND BONUS COMPENSATION THAT EXCEEDS THE

COMPENSATION LIMIT UNDER THE IRC SECTION 401(A)(17) ON JUNE 30, 2013, AND

ON EACH FOLLOWING JUNE 30 THROUGH 2020. IN ADDITION, THE SUPPLEMENTAL

RETIREMENT PLAN EARNED EARNINGS BASED ON INVESTMENT OPTIONS SELECTED BY MR.

FRY. ON JUNE 30, 2020, MR. FRY BECAME FULLY VESTED IN THE SUPPLEMENTAL

RETIREMENT PLAN.

PART II

DREXEL UNIVERSITY, A RELATED ORGANIZATION, PROVIDES JOHN FRY WITH A

DEFERRED COMPENSATION ARRANGEMENT.

THE UNIVERSITY WILL CREDIT MR. FRY WITH \$300,000 ON JUNE 30, 2019, AND

ON EACH FOLLOWING JUNE 30 THROUGH 2021 WHILE HE REMAINS EMPLOYED BY THE

UNIVERSITY AS PRESIDENT AND CHIEF EXECUTIVE OFFICER. THE AMOUNT

CREDITED ON JUNE 30, 2021 WILL ALSO INCLUDE INVESTMENT EARNINGS, GAINS,

Schedule J (Form 990) 2020

PHILADELPHIA

Schedule J (Form 990) 2020

23-1352000 Page 3

Part III Supplemental Information

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

AND LOSSES, PROVIDED MR. FRY IS EMPLOYED BY THE UNIVERSITY ON THAT

DATE. IN THE EVENT MR. FRY VOLUNTARILY TERMINATES HIS EMPLOYMENT

WITHOUT GOOD REASON WITH THE UNIVERSITY PRIOR TO JUNE 30, 2021, OR THE

UNIVERSITY TERMINATES MR. FRY'S EMPLOYMENT FOR CAUSE, THE DEFERRED

COMPENSATION SHALL BE FORFEITED.

Schedule J (Form 990) 2020

(Form 980 or 990-E2) (b) Complete if the organization answered "Ves" on Form 990, Part IV, line 25a, 25b, 26b, 27, 28a, 28b, 27b, 27b, 27b, 28b, 28b, 27b, 28b, 27b, 27b, 28b, 28b, 27b, 27b, 27b, 27b, 27b, 27b, 27b, 27	SCHEDU	LEL		Tra	nsaction	ıs V	Vith	Int	erested	P	ersons			ON	1B No	1545-00	47
Determine of the Treasury Internal Revise Open To Public Inspection Determine of the organization Open To Public Inspection Name of the organization The ACADEWY OF NATURAL SCIENCES OF PHILADELPHIA Employer identification number 23-1352000 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations on work in a gov/Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction (d) Corrected Yes 2 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization > \$ \$ \$ Part II Loans to and/or From 114 rested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part V, line 26; or if the organization reported an amount on form 990, Part X, line 5, 6, or 22. * \$ \$ (a) Name of (b) Relationship intersted Persons. (c) Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part V, line 26; or if the organization reported an amount on form 990, Part X, line 5, or 22. (f) Balance due (g) In (h) Paproved (g) Witter to form an organization (h) Paproved (g) Witter to form an organization (h) Paproved (g) Witter torganization </th <th>(Form 990 o</th> <th>or 990-EZ)</th> <th>Complete if</th> <th>the or</th> <th>-</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>6, 27,</th> <th>28a,</th> <th></th> <th>2</th> <th>n2</th> <th>N</th>	(Form 990 o	or 990-EZ)	Complete if	the or	-							6, 27,	28a,		2	n2	N
Image: Construction of the organization Image: Construction of the organization Image: Construction of the organization THE ACADEMY OF NATURAL SCIENCES OF Employer identification number 23 – 135 200 0 Part1 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(20) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. Image: Construction of transaction Image: Construction of transaction 1 (a) Name of disqualified person (b) Pelationship between disqualified persons and organization (c) Description of transaction Image: Construction of transaction Image: Construction of transaction 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ \$ 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ \$ Part III Coans to and/or From Interested Persons. (c) Orginal mount of tax, if any, on line 2, above, reimbursed by the organization \$ \$ (a) Name of with organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part V, line 28; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (f) Balance due (g) Immonization answered "Yes" on Form from parketing principal amount of loginal amount of loginal mount of loginal amount of loginal amount of loginal am	Dependence of the	Treesum							•		400.			O			
PHILADELPHIA 23-1352000 Part I Excess Benefit Transactions (section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Ez, Part V, line 40b. (d) Petationship between disqualified person and organization (e) Pescription of transaction (d) Corrected? 1 (a) Name of disqualified person (b) Relationship between disqualified persons during the year under section 4958 S Image: Section 4958 S 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 S S 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization reported an amount on Form 990, Part X, line 5, 6, or 22. S S Part II Loans to and/or From Interested Persons. Complete fithe organization answered "Yes" on Form 990, Part IV, line 28, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (f) Approved (f) Written detaut? (f) Approved (f) Written detaut? (a) Name of interested person (b) Relationship (c) Purpose (f) from to a graphic principal amount (f) Balance due (g) In (f) Approved (g) Written detaut? (f) Approved (g) Written detaut? (f) Approved (g) Written detaut? (a) Name of interested person (g) for form from the graphic principal amount (f) Balance due (g) In (f) Approved (g) Written detaut? (g) Amount of a a a a a a a a a a a a a a a a a a			► G	io to v	vww.irs.gov/Fo	rm99	0 for iı	nstruc	tions and the	late	st information.						
Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (d) Corrected? 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction (d) Corrected? 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 > \$ > \$ 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization (e) Description of transaction > \$ Part III Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization (g) Name of (h) Relationship (c) Purpose of agreement (a) Name of line organization (d) Corrected? (e) Organization (f) Balance due (g) Name of (h) Relationship (f) Purpose of agreement (a) Name of line organization (f) Relationship (f) Purpose of (f) Salance due (g) N Yes No Yes No Yes No Yes No Yes (a) Name of line orga	Name of the o	organization	THE AC	ADEI	Y OF NA	TUR.	AL S	SCIE	ENCES OF	F			-			on nu	mber
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction (d) Corrected? 2 Part III Complete if the organization answered 'Yes' on Form 990-Part IV, line 26a or 25b, or 25c,															00		
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			-								(d) Type	of		(e)	Purp	ose o	f
the organization Interview Interview Interview Intervi				`			d		assistance		assistan	се		á	assista	ance	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 202	LHA For Pa	perwork Red	duction Act No	tice, s	see the Instruct	tions f	or For	m 990) or 990-EZ.		Sch	edule	L (Fo	rm 990	or 99	Ю-EZ) 2020

032131 12-09-20

Schedule L (Form 990 or 990-EZ) 2020 PHILADELPHIA Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (d) Description of (b) Relationship between interested (c) Amount of organization's person and the organization transaction transaction revenues? Yes No JOHN GAUSAS FAMILY OF TRUSTEE 33,656. EMPLOYMENT Х Part V Supplemental Information. Provide additional information for responses to questions on Schedule L (see instructions).

Schedule L (Form 990 or 990-EZ) 2020

032132 12-09-20

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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



Employer identification number

Name	of the	organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

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THE ACADEMY OF NATURAL SCIENCES OF

	PHILADELPHIA					23-1	352	000	
Par	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VI	ted on	(d) Method of de noncash contribu	etermin		S
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	X	18	182	<u>,870.</u>	SELLING PRI	CE		
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
14	Augulified conservation contribution - Other								
14 15	Real estate - Residential								
15 16	Real estate - Commercial								
17									
18	Real estate - Other								
19	Collectibles								
20	Food inventory Drugs and medical supplies								
20									
22	Taxidermy Historical artifacts								
23	Scientific specimens	X	1			PART II EXP	T.AN	ΔΨΤΟ	אכ
23 24	Archeological artifacts								211
25	- · · · · · · · · · · · · · · · · · · ·								
25 26	Other ► () Other ► ()								
20	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organi	zation during	the tax year for c	ontributions					
20	for which the organization completed Form 82				29			1	
			encer territering					Yes	No
30a	During the year, did the organization receive b	v contributio	n any property rep	orted in Part I, line	s 1 throua	h 28. that it			
	must hold for at least three years from the date	-	• • • •		-				
	exempt purposes for the entire holding period	•					30a		х
h	If "Yes," describe the arrangement in Part II.	• • • • • • • • • • • • • • • • • • • •					000		
31	Does the organization have a gift acceptance	policy that re	equires the review of	of any nonstandard	l contribut	ions?	31	х	
	Does the organization hire or use third parties								
020	contributions?		•	· •			32a		х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	column (c) fo	r a type of property	/ for which column	(a) is chec	ked,			
	describe in Part II.								
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 990).		Schedule N	/I (Forr	n 990)	2020

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

23-1352000 Page 2

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN

(B), NOT THE NUMBER OF ITEMS.

SCHEDULE M, LINE 33:

Schedule M (Form 990) 2020

THE ORGANIZATION DOES NOT RECOGNIZE REVENUE FOR CONTRIBUTIONS OF

COLLECTION ITEMS BECAUSE COLLECTIONS ARE NOT CAPITALIZED AS ALLOWED

UNDER SFAS 116. THE ORGANIZATION ALSO DOES NOT RECOGNIZE REVENUE FOR

NONCASH CONTRIBUTIONS (OTHER THAN SECURITIES).

Schedule M (Form 990) 2020

032142 11-23-20

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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. ► Go to www.irs.gov/Form990 for the latest information. THE ACADEMY OF NATURAL SCIENCES OF



Employer identification number 23 - 1352000

FORM 990, PART I, DOING BUSINESS AS:

PHILADELPHIA

THE ACADEMY OF NATURAL SCIENCES OF DREXEL UNIVERSITY

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENGAGEMENT IN NATURAL SCIENCES AND ENVIRONMENTAL ISSUES, AND PRESERVING

THE HERITAGE OF NATURAL SCIENCE IN SPECIMENS, IMAGES, WORDS, AND

NUMBERS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLICATIONS, AND OUTREACH EVENTS (E.G., ACADEMY TOWN SQUARES AND

CONVERSATIONS), SCIENTISTS SHARE THEIR DISCOVERIES, ENABLING THEIR

COLLEAGUES, VISITORS, AND MEMBERS TO GAIN FURTHER INSIGHT INTO LIFE ON

EARTH, ENVIRONMENTAL PROCESSES AND HOW TO MAINTAIN A SUSTAINABLE

FUTURE. ACADEMY SCIENTISTS CONTINUE TO PRODUCE SCIENTIFIC PUBLICATIONS

WHILE CULTIVATING OUR COLLECTIONS AND TRAVELING OUTSIDE THE MUSEUM FOR

RESEARCH ON DOZENS OF FIELD TRIPS AND EXPEDITIONS. THE ACADEMY & DREXEL

UNIVERSITY'S BIODIVERSITY, EARTH & ENVIRONMENTAL SCIENCE (BEES) PROGRAM

HAS GROWN WITH MANY NEW PROJECTS ON THE HORIZON AS WE CONTINUE TO BE

THE EPICENTER OF DISCOVERY. FROM DIGITIZATION OF THE COLLECTIONS, TO

LOOKING FOR CHEMICAL CLUES TO BIODIVERSITY, TO UNDERSTANDING

ENVIRONMENTAL CHANGE IN WETLANDS AND WATERSHEDS, THE SCIENTISTS ARE

LEADING RESEARCHERS IN NATURAL SCIENCES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THROUGH 89 VIRTUAL PROGRAMS FOR BOTH ADULTS AND CHILDREN. WE BEGAN

 RESUMING IN-PERSON PROGRAMS TOWARDS THE END OF THE FISCAL YEAR WHERE WE

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

21060516 137310 06

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Schedule O (Form 990 or 990-EZ) 2020	Page 2					
Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000					
ENGAGED WITH 110 CHILDREN AND THEIR CAREGIVERS THROUGH 11 ADDITIONAL						
ONSITE AND FIELD TRIP PROGRAMS.						
THE ACADEMY'S NATIONALLY RECOGNIZED WOMEN IN NATURAL SCIEN	ICES PROGRAM					
KNOWN AS WINS IS A FREE AFTER SCHOOL AND SUMMER ENRICHMENT	PROGRAM FOR					
YOUNG WOMEN. THIS PROGRAM INTRODUCES HUNDREDS OF HIGH SCHO	OL WOMEN TO					
FUTURE CAREERS IN SCIENCE. IN JUNE OF 2018 THE ACADEMY'S	WINS PROGRAM					
RECEIVED THE PRESIDENTIAL AWARD FOR EXCELLENCE IN SCIENCE,	MATHEMATICS					
AND ENGINEERING (STEM) MENTORING. IT IS THE HIGHEST NATIO	NAL MENTORING					
AWARD BESTOWED BY THE WHITE HOUSE OFFICE OF SCIENCE AND TECHNOLOGY						
POLICY AND THE NATIONAL SCIENCE FOUNDATION. OUR ENGINEERING WINS						
PROGRAM IS A CURRICULUM MODULE THAT INFUSES WINS LESSONS A	ND					
ENGINEERING CONTENT AND CONNECTS STUDENTS WITH SCIENTISTS	WHO SERVE AS					
MENTORS CONTRIBUTING TO THE PRORAM-TO-WORKFORCE PIPELINE F	OR YOUNG					
WOMEN OF COLOR IN STEM CAREERS. THIS PROGRAMIS CURRENTLYY	OFFERED IN A					
HYBRID FORMAT, AND THE 70 GIRLS IN WINS WERE ENGAGED WEEKL	Y IN THE					
PROGRAM.						
THE ACADEMY CONTINUES TO LAUNCH SEVERAL EXCITING NEW INITI	ATIVES AIMED					
AT TAKING OUR VISITOR EXPERIENCE TO THE NEXT LEVEL. WE FINALIZED A NEW						
EXPERIENTIAL MASTER PLAN AND IMPLEMENTED THE FIRST STEPS TOWARD MAKING						
PHYSICAL CHANGES TO OUR GALLERIES' INTERPRETIVE CONTENT. A FULL-SCALE						
PLAN FOR RESCRIPTING THE INSTITUTION'S SIGNATURE GALLERIES IS UNDERWAY.						
FOR CLIMATE YEAR, THE ACADEMY PRESENTED THE EXHIBITION GIDEON MENDEL:						
DROWNING WORLD IN THE WILLIAM B. DIETRICH GALLERY. THE EXH	IBITION BY					

THE AWARD-WINNING PHOTOGRAPHER PRESENTS 37 ARRESTING PORTRAITS OF

INDIVIDUALS AROUND THE WORLD EXPERIENCING EXTREME FLOODING EVENTS. THE

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EXHIBITION DRAWS FORTH A SHARED SENSE OF OUR COMMON HUMANITY BY

DEPICTING HOW CLIMATE CHANGE AFFECTS EVERYONE.

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMEN	TS:
INCLUDING NATURA FEMINAE: PURSING SCIENCE AGAINST THE ODDS	, AND SECRETS
OF THE DIORAMA. BOTH EVENTS HIGHLIGHTED LIBRARY AND ARCHI	VES
COLLECTIONS AND BROUGHT TO LIGHT THE HISTORY OF WOMEN NATU	RALISTS AT
THE ACADEMY AND THE HISTORY OF THE ACADEMY'S DIORAMAS.	
FORM 990, PART V, LINE 7G:	
NOT APPLICABLE.	
FORM 990, PART V, LINE 7H:	
NOT APPLICABLE.	
FORM 990, PART VI, SECTION A, LINE 1:	
EMERITUS TRUSTEES AND HONORARY TRUSTEES SHALL HAVE SUCH OT	HER PRIVILEGES AS
THE BOARD SHALL DETERMINE BUT SHALL NOT BE ELIGIBLE TO VOT	Е
FORM 990, PART VI, SECTION A, LINE 6:	
THE MEMBERSHIP OF THE ACADEMY CONSISTS OF ONE VOTING MEMBE	R WHICH IS DREXEL
UNIVERSITY.	
FORM 990, PART VI, SECTION A, LINE 7A:	
DREXEL UNIVERSITY IS THE SOLE VOTING MEMBER AND HAS THE AU	THORITY TO
APPOINT OR REMOVE AN ACADEMY TRUSTEE.	
FORM 990, PART VI, SECTION A, LINE 7B:	
TO THE FULLEST EXTENT PERMITTED UNDER THE PENNSYLVANIA NON	-PROFIT

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51 2020.05094 THE ACADEMY OF NATURAL SC 06____1

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Page 2							
Name of the organization	THE ACADEM	Y OF NATURAL	SCIENCES OF	Employer identification number			
	PHILADELPH	IA		23-1352000			
CORPORATION L	AW OF 1988	AS AMENDED	CERTAIN CORPORATE	ACTIONS REQUIRE THE			

APPROVAL OF THE MEMBER.

FORM 990, PART VI, SECTION B, LINE 11B:

THE DRAFT 990 IS PREPARED INTERNALLY AND REVIEWED BY THE ACADEMY'S FINANCE COMMITTEE. ACTING ON BEHALF OF THE BOARD, THE FINANCE COMMITTEE WILL APPROVE THE FINAL VERSION AND DIRECT THE RETURN TO BE FILED. A COPY OF THE FINAL VERSION IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO FILING AND POSTED ON THE WEBSITE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA ("ACADEMY") IMPLEMENTS THE CONFLICT OF INTEREST AND COMMITMENT PROTOCOLS POLICY OF ITS PARENT, DREXEL UNIVERSITY. THE POLICY APPLIES TO ALL EMPLOYEES, OFFICERS, AND TRUSTEES OF THE ACADEMY/UNIVERSITY. THE POLICY IS INTENDED TO SATISFY COMPLIANCE REQUIREMENTS AND GUIDE ACADEMY/UNIVERSITY EMPLOYEES IN AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT. THE KEY TO AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT IS TO MAKE EMPLOYEES AWARE OF WHAT CONSTITUTES A CONFLICT AND FOR THEM TO DISCLOSE POTENTIAL SITUATIONS BEFORE THE ACTIVITY IS UNDERTAKEN. IN THE CSE OF EMPLOYEES AND OFFICERS, EACH EMPLOYEE AND OFFICER IS REQUIRED TO COMPLETE A DISCLOSURE QUESTIONNAIRE DURING THE ANNUAL COMPLIANCE PERIOD. EMPLOYEE CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE QUSTIONNAIRES ARE MANAGED THROUGH THE HUMAN RESOURCES DEPARTMENT'S ELECTRONIC SYSTEM, AS REQUIRED BY THE VICE PRESIDENT AND CHIEF COMPLIANCE AND PRIVACY OFFICER. COMPLETED CONFLICT OF INTEREST DISCLSOURE QUESTIONNAIRES ARE ROUTED TO THE EMPLOYEE'S SENIOR LEADER FOR RESOLUTION. AFTER THE SENIOR LEADER'S REVEIW, A DETERMINATION IS MADE AS TO WHETHER A Schedule O (Form 990 or 990-EZ) 2020 032212 11-20-20 52

2020.05094 THE ACADEMY OF NATURAL SC 06____

Schedule O (Form 990 or 990-EZ) 2020	Page 2				
Name of the organization THE ACADEMY OF NATURAL SCIENCES OF	Employer identification number				
PHILADELPHIA	23-1352000				
CONFLICT OF INTREST EXISTS AND AT WHAT LEVEL. CONFLICTS T	HAT ARE				
DETERMINED TO BE A VIOLATION OF UNIVERSITY POLICY ARE DISC	USSED WITH THE				
EMPLOYEE AND THE EMPLOYEE IS ADVISED TO TERMINATE THE ACTI	VITY. EMPLOYEES				
WHO WILLINGLY OR OTHERWISE CONTINUE TO VIOLATE THE CONFLIC	T OF INTERST AND				
COMMITMENT POLICY ARE SUBJECT TO DISCIPLINARY ACTION UP TO	AND INCLUDING				
TERMINATION OF EMPLOYMENT. IN THE CASE OF TRUSTEES, A CON	FLICT OF INTEREST				
DISCLOSURE QUESTIONNAIRE IS MAILED TO EACH TRUSTEE ANNUALL	Y. TRUESTEES ARE				
REQUIRED TO COMPLETE THE QUESTIONNAIRE AND DISCLOSE ANY IN	TRESTS IN ANY				
CORPORATION, PARTNERSHIP, OR OTHER ORGANIZATION IN WHICH THEY OWN OR					
CONTROL 5% OR MORE OF THE ENTITY. COMPLETED TRUSTEE CONFL	ICT OF INTEREST				
DISCLOSURE QUSTIONNAIRS ARE SUBMITTED DIRECTLY TO THE OFFICE OF THE GENERAL					
COUNSEL FOR REVIEW AND RESOLUTION.					

FORM 990, PART VI, SECTION B, LINE 15:

ACADEMY CEO COMPENSATION IS DETERMINED BY THE ACADEMY BOARD CHAIR AND DREXEL UNIVERSITY PRESIDENT, IN CONSULTATION WITH THE UNIVERSITY'S HUMAN RESOURCES DEPARTMENT, USING DATA ON THE COMPENSATION OF OTHER NON-PROFIT CEOS IN THE REGION TO RECOMMEND AN APPROPRIATE SALARY RANGE.

COMPENSATION SPECIALIST(S) REVIEWED ALL POSITIONS AT THE ACADEMY AND RECOMMENDED A COMPENSATION STRUCTURE BASED ON JOB CLASS, INDUSTRY SECTOR, AND GEOGRAPHIC REGION. INDIVIDUAL COMPENSATION LEVELS ARE ESTABLISHED WITHIN THE RANGE FOR THE GIVEN POSITION BASED ON THE EXPERIENCE AND YEARS OF SERVICE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND NV, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI Schedule O (Form 990 or 990-EZ) 2020 032212 11-20-20 53

Schedule O (Form 990 or 9	90-EZ) 2020				Page 2
Name of the organization	THE ACADEMY (OF NATURAL	SCIENCES	OF	Employer identification number
	PHILADELPHIA				23-1352000

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

THROUGH THE ACADEMY'S PUBLIC WEBSITE THE PUBLIC MAY REQUEST AND PRINT THE

ACADEMY'S BY-LAWS, ARTICLES OF INCORPORATION, FORM 990, CODE OF ETHICS AND

CONDUCT AND THE CURRENT AUDIT FINANCIAL STATEMENTS. THE ACADEMY WILL ALSO

RESPOND TO WRITTEN REQUESTS AS WELL AS PHONE REQUESTS FOR INFORMATION FOR

THOSE WITHOUT COMPUTER ACCESS. THE ACADEMY'S 990 ALSO APPEARS ON

INDEPENDENT NON-PROFIT WEBSITES LIKE GUIDESTAR AND CHARITY NAVIGATOR.

FORM 990, PART XII, LINE 2C:

THE ACADEMY'S FINANCE COMMITTEE REVIEWS THE AUDITED FINANCIAL

STATEMENTS FOR THE ACADEMY OF NATURAL SCIENCES. THE TASK OF SELECTING

THE INDEPENDENT AUDITOR AND APPROVING THE AUDIT PLAN, FOR THE

UNIVERSITY AND ITS SUBSIDIARIES, IS THE RESPONSIBILITY OF DREXEL

UNIVERSITY'S AUDIT COMMITTEE.

Schedule O (Form 990 or 990-EZ) 2020

Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990 F NATURAL SCIENCES	"Yes" on Form 990, Part IV, tach to Form 990. <u>for instructions and the late</u> OF	line 33, 34, 35b, 36	ô, or 37.				20 Public ion
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state c foreign country)	or Total incol	ne End-of-year			(f) controllin entity	g
Part II Identification of Related Tax-Exempt Organization	ations. Complete if the organization	n answered "Yes" on Form 990	D, Part IV, line 34, b	ecause it had one	or more	related tax-ex	empt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direc	(f) ct controlling entity	cont	g) 512(b)(13) trolled tity? No
3201 ARCH STREET, SUITE 400 PHILADELPHIA, PA 19104	EDUCATIONAL INSTITUTION	PENNSYLVANIA	501(C)3	2	N/A			x
	-							

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

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 PHILADELPHIA

23-1352000 Page 2

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

		, jour									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate itions?		Genera manag partne	or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr enti	i) tion b)(13) rolled ity?
		country)		of truoty		400010		Yes	No
	-								

Schedule R (Form 990) 2020 PHILADELPHIA

Part V	Transactions With Related Organizations.	Complete if the organization answered	"Yes" on Form 990, Part IV	/, line 34, 35b, or 36.
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NOT	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	NO
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1 a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
с	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	Sharing of paid employees with related organization(s)	10		X
р	Reimbursement paid to related organization(s) for expenses	1p	X	
	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
<u>(3)</u>			
<u>(4)</u>			
(5)			
(6)			

Schedule R (Form 990) 2020 PHILADELPHIA

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)		(6	a)	(f)	(g)	()	n)	(i)	(j)	(k)										
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501(org	all rs sec	Share of	Share of		• , opor-	Code V-UBI	Genera											
of entity	· · · · · · · · · · · · · · · · · · ·	(state or foreign	(related, unrelated,	501(c)(3) s ?	total	end-of-year	Dispr tior alloca	nate tions?	amount in box 20	manag	^{ng} ownership										
-		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes	No	income	assets	Yes	No		Yes	10										
			, , , , , , , , , , , , , , , , , , ,																			
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Schedule R (Form 990) 2020

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Schedule R	(Form 9	90) 2020
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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2020

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