

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

Do not enter Social Security numbers on this form as it may be made public.

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

A For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA Doing Business As THE ACADEMY OF NATURAL SCIENCES Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1900 BENJAMIN FRANKLIN PARKWAY City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA 19103-1101 F Name and address of principal officer: LISA MILLER SAME AS C ABOVE	D Employer identification number 23-1352000 E Telephone number 215-299-1000 G Gross receipts \$ 32,776,564. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.ANSP.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1812 M State of legal domicile: PA

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: FOUNDED IN 1812, THE ACADEMY OF NATURAL SCIENCES IS A LEADING NATURAL HISTORY MUSEUM DEDICATED TO		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	28
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	267
	6 Total number of volunteers (estimate if necessary)	6	85
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	57,597.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	11,343,064.
	9 Program service revenue (Part VIII, line 2g)	Current Year	11,059,883.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,540,565.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,854,092.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,101,909.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		376,947.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		417,519.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		19,114,668.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 983,417.		122,435.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,679,256.
19 Revenue less expenses. Subtract line 18 from line 12		8,843,470.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		9,703,994.
	21 Total liabilities (Part X, line 26)		15,522,726.
	22 Net assets or fund balances. Subtract line 21 from line 20		3,591,942.
			5,726,441.
		Beginning of Current Year	End of Year
		83,109,693.	92,042,498.
		9,581,699.	12,788,063.
		73,527,994.	79,254,435.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: <i>Lisa M Miller</i>	Date: 5-15-2015			
	LISA MILLER, VP OF FINANCE & CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name: _____	Preparer's signature: _____	Date: _____	Check if self-employed <input type="checkbox"/>	PTIN: _____
	Firm's name: ▶ _____	Firm's EIN: ▶ _____		Phone no.: _____	
	Firm's address: ▶ _____				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No



Department of Treasury
Internal Revenue Service
Ogden UT 84201

Notice	CP211A
Tax period	June 30, 2014
Notice date	March 9, 2015
Employer ID number	23-1352000
To contact us	Phone 1-877-829-5500 FAX 801-620-5555

027631.537249.391746.17832 1 AT 0.406 370



ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA
3201 ARCH ST STE 400
PHILADELPHIA PA 19104-2755

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027631

Important information about your June 30, 2014 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your
June 30, 2014 Form 990.

Your new due date is May 15, 2015.

What you need to do

File your June 30, 2014 Form 990 by May 15, 2015. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number (EIN) or 23-1352000
	Number, street, and room or suite no. If a P.O. box, see instructions. 1900 BENJAMIN FRANKLIN PARKWAY	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19103-1101	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

LISA MILLER, VP OF FINANCE & CFO - 1900 BENJAMIN

• The books are in the care of **FRANKLIN PARKWAY - PHILADELPHIA, PA 19101-1101**

Telephone No. **215-299-1000**

Fax No.

• 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 this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2015**.

5 For calendar year , or other tax year beginning **JUL 1, 2013**, and ending **JUN 30, 2014**.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return

Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Lisa Miller** Title **CERTIFIED PUBLIC ACCOUNTANT** Date **2-12-2015**



Department of Treasury
Internal Revenue Service
Ogden UT 84201

Notice	CP211A
Tax period	June 30, 2014
Notice date	December 8, 2014
Employer ID number	23-1352000
To contact us	Phone 1-877-829-5500 FAX 801-620-5555

021911.511098.298107.14699 1 AT 0.406 370



ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA
3201 ARCH ST STE 400
PHILADELPHIA PA 19104-2755

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Important information about your June 30, 2014 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your
June 30, 2014 Form 990.

Your new due date is February 15, 2015.

What you need to do

File your June 30, 2014 Form 990 by February 15, 2015. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which 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/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

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

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number (EIN) or 23-1352000
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1900 BENJAMIN FRANKLIN PARKWAY	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19103-1101	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (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

LISA MILLER, VP OF FINANCE & CFO - 1900 BENJAMIN

- The books are in the care of ▶ **FRANKLIN PARKWAY - PHILADELPHIA, PA 19101-1101**
Telephone No. ▶ **215-299-1000** Fax No. ▶ _____
- 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 this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2013**, and ending **JUN 30, 2014**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION IS "WE ADVANCE RESEARCH, EDUCATION, AND PUBLIC ENGAGEMENT IN BIODIVERSITY AND ENVIRONMENTAL SCIENCE." THE ACADEMY IMPLEMENTS ITS MISSION THROUGH IMPROVING UNDERSTANDING OF THE DIVERSITY OF LIFE, DEVELOPING AND APPLYING SCIENCE TO PROTECT THE ENVIRONMENT, ADVANCING

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No 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 \$ 6,719,422. including grants of \$ 118,535.) (Revenue \$ 1,377,606.) RESEARCH-ACADEMY SCIENTISTS CONDUCT RESEARCH AROUND THE WORLD, COLLECTING SPECIMENS THAT HELP THEM DOCUMENT BIODIVERSITY, TRACE EVOLUTION, AND TRACK ENVIRONMENTAL CHANGES OVER TIME. THROUGH FESTIVALS, MEMBERS' NIGHT, BEHIND-THE-SCENES TOURS, AND POPULAR PUBLICATIONS, THESE SCIENTISTS SHARE THEIR DISCOVERIES, ENABLING THEIR COLLEAGUES, VISITORS, AND MEMBERS TO GAIN FURTHER INSIGHT INTO LIFE ON EARTH AND HOW TO SUSTAIN IT IN THE FUTURE. ACADEMY SCIENTISTS PRODUCED MORE THAN 20 PEER-REVIEWED PUBLICATIONS WHILE CULTIVATING OUR COLLECTIONS AND TRAVELING OUTSIDE THE MUSEUM FOR RESEARCH ON DOZENS OF FIELD TRIPS AND EXPEDITIONS. WE CELEBRATED AN INTERNATIONAL SCIENTIFIC BREAKTHROUGH WHICH REVEALED A FINDING ON A NEW FOSSIL MATERIAL OF THE 375 MILLION YEAR OLD SPECIES TIKTAALIK ROSEAE DISCOVERED ON THE TUNDRA

4b (Code:) (Expenses \$ 6,792,839. including grants of \$ 900.) (Revenue \$ 2,233,675.) EDUCATION - THE ACADEMY BRINGS NATURAL SCIENCE TO LIFE THROUGH THREE FLOORS OF SIGNATURE EXHIBITS, INCLUDING DINOSAURS AND OTHER ANCIENT CREATURES. AT OUR MUSEUM IN FISCAL YEAR 2014, WE WELCOMED MORE THAN 208,000 VISITORS TO EXPLORE OUR DIORAMAS, DINOSAURS, BUTTERFLIES, LIVE ANIMALS, AND THE RENOVATED CHILDREN'S NATURE DISCOVERY CENTER, OUTSIDE IN. THE ACADEMY'S PUBLIC PROGRAMS INTEGRATE LIVE ANIMALS, REAL SPECIMENS, AND EXPERIENCED EDUCATORS WHO BRING NATURAL SCIENCE TO LIFE FOR LEARNERS OF ALL AGES. THE ACADEMY HAS DEVELOPED THE WOMEN IN NATURAL SCIENCES PROGRAM KNOWN AS WINS WHICH IS A FREE AFTER SCHOOL AND SUMMER ENRICHMENT PROGRAM FOR YOUNG WOMEN. THIS PROGRAM INTRODUCES HUNDREDS OF HIGH SCHOOL WOMEN TO FUTURE CAREERS IN SCIENCE. IN FISCAL YEAR 2014, THE ACADEMY LAUNCHED A NUMBER OF EXCITING NEW INITIATIVES

4c (Code:) (Expenses \$ 923,479. including grants of \$ 3,000.) (Revenue \$ 45,547.) LIBRARY AND ARCHIVES - ACADEMY 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. IN 2014, THE NEWLY-APPOINTED BROOKE DOLAN ARCHIVIST INITIATED SIGNIFICANT ACTIVITY IN THE ARCHIVES INCLUDING EVALUATING AND MOVING MATERIALS FROM THE OFFICE SPACE OF THE LATE DR. RUTH PATRICK. THE LIBRARY PROVIDED SERVICES TO ACADEMICS AND THE GENERAL PUBLIC WITH MORNING RESEARCH HOURS AND AFTERNOON HOURS WHEN THE PUBLIC WAS INVITED INTO THE LIBRARY READING ROOM TO VIEW PORTRAITS,

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 14,435,740.

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Form 990 (2013)

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Part IV Checklist of Required Schedules

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

Form 990 (2013)

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Form 990 (2013)

23-1352000 Page 4

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
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):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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 "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does 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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a	28	
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b	24	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
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?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, AR, CA, CO, DE, DC, FL, GA, HI, ID**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DREXEL UNIVERSITY, COMPROLLER'S OFFICE - 215-895-2225**
3201 ARCH STREET, SUITE 340, PHILADELPHIA, PA 19104

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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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GEORGE W. GEPHART JR. PRESIDENT AND CEO	40.00	X		X				297,851.	0.	108,222.
(2) CYNTHIA P HECKSHER CHAIR	2.00	X		X				0.	0.	0.
(3) MICHAEL H. REED, ESQ. VICE CHAIR	2.00	X		X				0.	0.	0.
(4) PETER AUSTEN BOARD TRUSTEE	2.00	X						0.	0.	0.
(5) HELEN Y. BOWMAN BOARD TRUSTEE	2.00 40.00	X						0.	576,126.	39,783.
(6) BYRON T. CLARK BOARD TRUSTEE	2.00	X						0.	0.	0.
(7) CARL S. CUTLER BOARD TRUSTEE	2.00	X						0.	0.	0.
(8) ABBIE DEAN BOARD TRUSTEE	2.00	X						0.	0.	0.
(9) HARVEY I. FORMAN, ESQUIRE BOARD TRUSTEE	2.00	X						0.	0.	0.
(10) JOHN A. FRY BOARD TRUSTEE	2.00 40.00	X						0.	1,271,335.	231,264.
(11) MARK L. GREENBERG BOARD TRUSTEE	2.00 40.00	X						0.	534,921.	44,883.
(12) R. JAMES MACALEER BOARD TRUSTEE - EMERITUS	2.00	X						0.	0.	0.
(13) SANDRA L. MCLEAN SECRETARY	2.00	X		X				0.	0.	0.
(14) ALLEN MODEL BOARD TRUSTEE	2.00	X						0.	0.	0.
(15) ANTHONY K. MOORE BOARD TRUSTEE	2.00	X						0.	0.	0.
(16) I. WISTAR MORRIS III BOARD TRUSTEE - EMERITUS	2.00	X						0.	0.	0.
(17) JOHN NYHEIM BOARD TRUSTEE	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PATRICK M. OATES, PH.D BOARD TRUSTEE	2.00	X						0.	0.	0.
(19) SEYMOUR S. PRESTON III BOARD TRUSTEE	2.00	X						0.	0.	0.
(20) ANN L. REED BOARD TRUSTEE	2.00	X						0.	0.	0.
(21) GERALD B. RORER BOARD TRUSTEE	2.00	X						0.	0.	0.
(22) JOHN J. SOROKO BOARD TRUSTEE	2.00	X						0.	0.	0.
(23) KENNETH J. WARREN BOARD TRUSTEE	2.00	X						0.	0.	0.
(24) DAVID P. LAZAR, SR. TREASURER/VICE CHAIR	2.00	X		X				0.	0.	0.
(25) JUDITH E. SOLTZ, ESQ. BOARD TRUSTEE	2.00	X						0.	0.	0.
(26) CATHERINE T. HUNT, PH.D. BOARD TRUSTEE	2.00	X						0.	0.	0.
1b Sub-total								297,851.	2,382,382.	424,152.
c Total from continuation sheets to Part VII, Section A								544,032.	152,034.	54,270.
d Total (add lines 1b and 1c)								841,883.	2,534,416.	478,422.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
C ERICKSON & SONS INC., 2200 ARCH STREET, SUITE 200, PHILADELPHIA, PA 19103	CONSTRUCTION	863,710.
MAYO SEITZ MEDIA INC. 751 ARBOR WAY, #130, BLUE BELL, PA 19422	ADVERTISING	394,135.
CLEAN TECH SERVICES INC., 114 CHESTNUT STREET, 5TH FL, PHILADELPHIA, PA 19106	CLEANING SERVICES	241,635.
FLAG REAL ESTATE PARTNERS II, LP, 1266 E MAIN STREET, 5TH FL, STAMFORD, CT 06902	INVESTMENT MANAGEMENT	180,000.
ASSETS PROTECTION INC., 113 WEST LINCOLN HIGHWAY, LANGHORNE, PA 19047	SECURITY	107,187.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

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Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b 457,865.				
	c Fundraising events	1c 67,675.				
	d Related organizations	1d 5,008,001.				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 5,526,342.				
	g Noncash contributions included in lines 1a-1f: \$	298,437.				
	h Total. Add lines 1a-1f	▶ 11,059,883.				
Program Service Revenue	2 a MUSEUM ADMISSIONS	Business Code 900099	1,538,525.	1,538,525.		
	b ENVIRONMENTAL RESEARCH	541700	772,249.	772,249.		
	c SYSTEMATIC BIOLOGY RE	541700	605,358.	605,358.		
	d EDUCATION & MUSEUM PRO	611600	457,309.	457,309.		
	e LIBRARY	519100	45,547.	45,547.		
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶ 3,418,988.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 8,317,690.			8,317,690.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶ 144,469.			144,469.	
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	9,514,204.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	8,729,985.			
		c Gain or (loss)	784,219.			
d Net gain or (loss)	▶ 784,219.			784,219.		
8 a Gross income from fundraising events (not including \$ 67,675. of contributions reported on line 1c). See Part IV, line 18	a	25,893.				
	b Less: direct expenses	48,280.				
	c Net income or (loss) from fundraising events	▶ -22,387.			-22,387.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a FACILITY SALES	900099	137,375.	137,375.			
	b GIFT SHOP	453220	85,985.	85,985.		
	c INCOME (LOSS) FROM PARTNERSHIP IN	900099	57,597.		57,597.	
	d All other revenue	900099	14,480.	14,480.		
	e Total. Add lines 11a-11d	▶ 295,437.				
12 Total revenue. See instructions.	▶ 23,998,299.	3,656,828.	57,597.	9,223,991.		

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	19,477.	19,477.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	102,958.	102,958.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	573,884.	47,672.	431,553.	94,659.
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	5,519,798.	4,293,944.	940,561.	285,293.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,293,083.	926,567.	286,881.	79,635.
9 Other employee benefits	552,293.	407,932.	112,424.	31,937.
10 Payroll taxes	506,371.	360,778.	114,020.	31,573.
11 Fees for services (non-employees):				
a Management				
b Legal	19,496.	2,944.	16,552.	
c Accounting	71,075.		71,075.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	37,714.		37,714.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	536,889.	259,997.	269,183.	7,709.
12 Advertising and promotion	232,724.	232,724.		
13 Office expenses	1,132,717.	893,145.	191,315.	48,257.
14 Information technology	688,223.	490,344.	154,967.	42,912.
15 Royalties	8,452.	8,452.		
16 Occupancy	998,191.	949,581.	37,319.	11,291.
17 Travel	269,683.	260,553.	7,877.	1,253.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	181,823.	128,640.	27,705.	25,478.
20 Interest	16,242.		16,242.	
21 Payments to affiliates	3,613,482.	3,277,914.	43,287.	292,281.
22 Depreciation, depletion, and amortization	1,092,703.	1,039,490.	40,852.	12,361.
23 Insurance	560.	360.	200.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EXHIBITION EXPENSE	624,629.	624,629.		
b MISCELLANEOUS	74,053.	50,232.	22,221.	1,600.
c MEMBERSHIP EXPENSE	43,045.	15,976.	18,956.	8,113.
d ENTERTAINMENT	15,937.	2,863.	8,309.	4,765.
e All other expenses	46,356.	38,568.	3,488.	4,300.
25 Total functional expenses. Add lines 1 through 24e	18,271,858.	14,435,740.	2,852,701.	983,417.
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 if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	1,313,061.	1	6,800.
	2	Savings and temporary cash investments	52,537.	2	3,687,158.
	3	Pledges and grants receivable, net	376,777.	3	3,512,232.
	4	Accounts receivable, net	2,991,663.	4	20,446.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	6,401.	8	0.
	9	Prepaid expenses and deferred charges	86,684.	9	169,061.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 33,196,239.		
	b	Less: accumulated depreciation	10b 11,796,855.		
	11	Investments - publicly traded securities	21,636,265.	10c	21,399,384.
	12	Investments - other securities. See Part IV, line 11	32,594,608.	11	46,125,417.
	13	Investments - program-related. See Part IV, line 11	16,305,036.	12	17,122,000.
	14	Intangible assets	7,746,661.	13	
	15	Other assets. See Part IV, line 11		14	
16	Total assets. Add lines 1 through 15 (must equal line 34)	83,109,693.	15	92,042,498.	
Liabilities	17	Accounts payable and accrued expenses	296,179.	16	92,042,498.
	18	Grants payable		17	1,685,116.
	19	Deferred revenue	822,838.	18	
	20	Tax-exempt bond liabilities		19	9,718.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23	Secured mortgages and notes payable to unrelated third parties		22	
	24	Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	8,462,682.	24	
	26	Total liabilities. Add lines 17 through 25	9,581,699.	25	11,093,229.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	15,277,709.	26	12,788,063.
	28	Temporarily restricted net assets	7,897,818.	27	14,189,267.
	29	Permanently restricted net assets	50,352,467.	28	8,479,314.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		29	56,585,854.
	31	Paid-in or capital surplus, or land, building, or equipment fund		30	
	32	Retained earnings, endowment, accumulated income, or other funds		31	
33	Total net assets or fund balances	73,527,994.	32		
34	Total liabilities and net assets/fund balances	83,109,693.	33	79,254,435.	
			34	92,042,498.	

Form 990 (2013)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,998,299.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,271,858.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,726,441.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	73,527,994.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	79,254,435.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization **THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA** Employer identification number **23-1352000**

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii) A family member of a person described in (i) above? 11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

THE ACADEMY OF NATURAL SCIENCES OF

Schedule A (Form 990 or 990-EZ) 2013 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 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5810719.	5430352.	7384123.	11343064.	11059883.	41028141.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3693605.	3975761.	3757189.	3803301.	3656828.	18886684.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	9504324.	9406113.	11141312.	15146365.	14716711.	59914825.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	612,033.	406,589.	1192630.	6275924.	750,954.	9238130.
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	759,206.	636,948.	850,111.	978,870.	413,803.	3638938.
c Add lines 7a and 7b	1371239.	1043537.	2042741.	7254794.	1164757.	12877068.
8 Public support (Subtract line 7c from line 6.)						47037757.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	9504324.	9406113.	11141312.	15146365.	14716711.	59914825.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3557521.	3289252.	3061810.	3006202.	8462159.	21376944.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	3557521.	3289252.	3061810.	3006202.	8462159.	21376944.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					57,597.	57,597.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	-8861428.	-319,007.	3094821.	970,111.	237,839.	-4877664.
13 Total support. (Add lines 9, 10c, 11, and 12.)	4200417.	12376358.	17297943.	19122678.	23474306.	76471702.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	61.51 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	63.69 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	27.95 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	24.21 %

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2013

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
 ▶ **See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

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

Name of organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

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

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

THE ACADEMY OF NATURAL SCIENCES OF

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	854,742.	907,120.		1,761,862.
b	Lobbying ceiling amount (150% of line 2a, column(e))				2,642,793.
c	Total lobbying expenditures	98,013.	25,440.		123,453.
d	Grassroots nontaxable amount	213,686.	226,780.		440,466.
e	Grassroots ceiling amount (150% of line 2d, column (e))				660,699.
f	Grassroots lobbying expenditures				

Schedule C (Form 990 or 990-EZ) 2013

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

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

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

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

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

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

Part IV Supplemental Information

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Employer identification number 23-1352000

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement and grant usage.

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

Form for Part II Conservation Easements. Includes checkboxes for purposes like land preservation, habitat protection, and open space. Includes a table for 'Held at the End of the Tax Year' with rows 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets for financial gain.

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Schedule D (Form 990) 2013

23-1352000 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	48,638,612.	45,680,688.	45,794,134.	50,024,054.	47,438,833.
b Contributions	707,000.	821,546.	152,200.	1,623,397.	374,640.
c Net investment earnings, gains, and losses	7,905,000.	5,086,554.	2,486,317.	-776,448.	6,248,863.
d Grants or scholarships					
e Other expenditures for facilities and programs	3,639,612.	2,950,176.	2,751,963.	5,076,869.	4,038,282.
f Administrative expenses					
g End of year balance	53,611,000.	48,638,612.	45,680,688.	45,794,134.	50,024,054.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 2.75 %
 - b Permanent endowment 87.96 %
 - c Temporarily restricted endowment 9.29 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-------------------------------------|-------------------------------------|
| (i) unrelated organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 3b
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		21,073,531.	1,447,530.	19,626,001.
c Leasehold improvements				
d Equipment		12,102,291.	10,347,964.	1,754,327.
e Other		20,417.	1,361.	19,056.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				21,399,384.

Schedule D (Form 990) 2013

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Schedule D (Form 990) 2013

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	13,763,000.	END-OF-YEAR MARKET VALUE
(B) REAL ESTATE & REAL ASSETS	3,359,000.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	17,122,000.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year 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" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to 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	1,159,951.
(3) POST RETIREMENT AND PENSION	
(4) BENEFIT	5,946,275.
(5) DREXEL INTERCOMPANY LOAN	1,442,681.
(6) DUE TO DREXEL UNIVERSITY	2,544,322.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,093,229.

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

Schedule D (Form 990) 2013

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Schedule D (Form 990) 2013

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	23,991,823.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains on investments	2a		
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	48,280.	
	e Add lines 2a through 2d	2e		48,280.
3	Subtract line 2e from line 1		3	23,943,543.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	54,756.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		54,756.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	23,998,299.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	17,278,015.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	48,280.	
	e Add lines 2a through 2d	2e		48,280.
3	Subtract line 2e from line 1		3	17,229,735.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	54,756.	
	b Other (Describe in Part XIII.)	4b	987,367.	
	c Add lines 4a and 4b	4c		1,042,123.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	18,271,858.

Part 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:

EXPLANATION: THE ACADEMY IS A NONPROFIT ORGANIZATION THAT HAS BEEN GRANTED TAX EXEMPT STATUS UNDER SECTION 501 (C) 3 OF THE INTERNAL REVENUE CODE.

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.

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ACADEMY AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF IT HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. MANAGEMENT BELIEVES THE ACADEMY HAS NOT TAKEN AN UNCERTAIN POSITION AS DEFINED IN THE ACCOUNTING LITERATURE.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT EXPENSE

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT EXPENSE

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES RELATED TO FROZEN DEFINED BENEFIT PENSION PLAN

PART III, LINE 1A:

EXPLANATION: 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, GEMS, 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:

EXPLANATION: THE ACADEMY'S COLLECTIONS OF MORE THAN 18 MILLION CATALOGED NATURAL HISTORY SPECIMENS AND ARTIFACTS ARE COLLECTIVELY AMONG THE 10

Part XIII Supplemental Information (continued)

LARGEST IN THE UNITED STATES. THROUGH ITS THREE MAIN COMPONENTS -
RESEARCH, EDUCATION AND MUSEUM, THE ACADEMY WORKS TO SHARE ITS SCIENTIFIC
KNOWLEDGE GAINED FROM THE COLLECTIONS AND OTHER ORGANIZATIONS,
GOVERNMENTS, BUSINESSES, AND INDIVIDUALS TO INSPIRE STEWARDSHIP IN THE
ENVIRONMENT AND TO PROMOTE AND ENCOURAGE CONTINUED INVESTMENT IN THE
NATURAL SCIENCES.

PART V, LINE 4:

EXPLANATION: 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 F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization
**THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA**

Employer identification number

23-1352000

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	463.
EUROPE	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	2,115.
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	11,668.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	395.
EUROPE	0	0	PROGRAM SERVICES	INSTRUCTION RELATED CONFERENCES/TRAVEL	500.
3 a Sub-total	0	0			15,141.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			15,141.

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

Schedule F (Form 990) 2013

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2013

Part V Supplemental Information

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

PART I, LINE 2:

EXPLANATION: 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.

THE ACADEMY OF NATURAL SCIENCES OF

Schedule G (Form 990 or 990-EZ) 2013 PHILADELPHIA

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Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CUISINE FROM THE COLLECT (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	93,568.		93,568.
	2	Less: Contributions	67,675.		67,675.
	3	Gross income (line 1 minus line 2)	25,893.		25,893.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	4,604.		4,604.
	7	Food and beverages	29,693.		29,693.
	8	Entertainment			
	9	Other direct expenses	13,983.		13,983.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			48,280.
	11	Net income summary. Subtract line 10 from line 3, column (d)			-22,387.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization **THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA** Employer identification number **23-1352000**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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 non-cash assistance	(h) Purpose of grant or assistance
TEXAS A&M UNIVERSITY PO BOX 30017 COLLEGE STATION, TX 77842-3017	74-6000531		6,000.	0.			RESEARCH
UNIVERSITY OF DELAWARE 220 HULLIHEN HALL NEWARK, DE 19716	51-6000297	501.(C).(3)	11,559.	0.			RESEARCH

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

3 Enter total number of other organizations listed in the line 1 table **0.**

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THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

23-1352000

Page 2

Schedule I (Form 990) (2013)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ENTOMOLOGY GRANT	1	94,693.	0.		
	0	0.	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:

EXPLANATION: 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.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Employer identification number
23-1352000

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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Schedule J (Form 990) 2013

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

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Schedule J (Form 990) 2013

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:

EXPLANATION: PART I, LINE 4B AND PART II, COLUMN C;

THE ORGANIZATION PROVIDES GEORGE GEPHART WITH DEFERRED COMPENSATION DESCRIBED IN SECTION 457(F). IF EXECUTIVE IS CONTINUOUSLY EMPLOYED BY THE ACADEMY THROUGH AUGUST 8, 2015, THE DEFERRED COMPENSATION AMOUNT SHOULD BE PAID TO THE EXECUTIVE IN A SINGLE SUM ON OR BEFORE AUGUST 31, 2015. VESTING AND PAYMENT OF THE DEFERRED COMPENSATION SHALL OCCUR ON AUGUST 8, 2015 PROVIDED THAT THE EXECUTIVE IS EMPLOYED BY THE ACADEMY OF NATURAL SCIENCES ON THAT DATE.

DREXEL UNIVERSITY (RELATED ORGANIZATION) WILL PROVIDE JOHN FRY WITH DEFERRED COMPENSATION. DREXEL UNIVERSITY SHALL CREDIT MR. FRY WITH \$100,000 ON JULY 31, 2011, AND ON EACH FOLLOWING JULY 31 THROUGH 2015 WHILE HE REMAINS EMPLOYED BY DREXEL UNIVERSITY AS PRESIDENT AND CHIEF EXECUTIVE OFFICER. VESTING AND PAYMENT OF THE DEFERRED COMPENSATION SHALL OCCUR ON JULY 31, 2015, PROVIDED MR. FRY IS EMPLOYED BY DREXEL UNIVERSITY ON THAT DATE.

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Schedule J (Form 990) 2013

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.

IN ADDITION, IN RECOGNITION OF AND CONSIDERATION FOR THE GOODS AND VALUABLE SERVICES MR. FRY HAS PROVIDED, AND WILL CONTINUE TO PROVIDE, TO DREXEL UNIVERSITY DURING HIS EMPLOYMENT, DREXEL UNIVERSITY AGREES TO PROVIDE MR. FRY WITH CERTAIN SUPPLEMENTAL RETIREMENT AND DEATH BENEFITS, EFFECTIVE AS OF JULY 1, 2012. MR. FRY'S ACCOUNT SHALL BE CREDITED WITH AN ALLOCATION BY DREXEL UNIVERSITY IN THE FALL OF EACH YEAR (AND NOT LATER THAN DECEMBER 15), BEGINNING IN THE FALL OF 2013, AND ENDING IN THE FALL OF 2020, IN ACCORDANCE WITH THE FOLLOWING FORMULA. THE ALLOCATION FOR EACH YEAR SHALL BE CONDITIONED ON MR. FRY'S CONTINUED EMPLOYMENT THROUGH THE END OF THE FISCAL YEAR ENDING ON THE IMMEDIATELY PRECEDING JUNE 30 (OR UPON THE DATE OF DEATH, TOTAL DISABILITY, OR INVOLUNTARY TERMINATION, IF EARLIER). THE FORMULA IS 11% OF THE SUM OF MR. FRY'S PAID COMPENSATION (BASE SALARY AND ANNUAL PERFORMANCE BONUS (IF ANY)) FOR THE FISCAL YEAR ENDING ON THE IMMEDIATELY PRECEDING JUNE 30 THAT IS IN EXCESS OF THE COMPENSATION LIMIT UNDER SECTION 401(A)(17) OF THE INTERNAL REVENUE CODE AS IN EFFECT DURING SUCH PERIOD IN DETERMINING THE MAXIMUM COMPENSATION UNDER DREXEL UNIVERSITY'S PENSION PLAN.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public Inspection

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

Name of the organization **THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA** Employer identification number **23-1352000**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art	X	2	0.	PART II EXPLANATION
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X			PART II EXPLANATION
5	Clothing and household goods				
6	Cars and other vehicles	X	2	0.	PART II EXPLANATION
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	24	298,437.	SELLING PRICE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	12	0.	PART II EXPLANATION
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens	X	7	0.	PART II EXPLANATION
24	Archeological artifacts				
25	Other ▶ (MISCELLANEOUS)	X	33	0.	PART II EXPLANATION
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **2**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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):

EXPLANATION: THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN (B), NOT THE NUMBER OF ITEMS.

SCHEDULE M, LINE 33:

EXPLANATION: 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) THAT ARE LESS THAN \$5,000 IN VALUE.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE ACADEMY OF NATURAL SCIENCES OF
PHILADELPHIA

Employer identification number
23-1352000

FORM 990, PART I, DOING BUSINESS AS:

THE ACADEMY OF NATURAL SCIENCES OF DREXEL
UNIVERSITY

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

ADVANCING RESEARCH, EDUCATION AND PUBLIC ENGAGEMENT IN BIODIVERSITY AND
ENVIRONMENTAL SCIENCE.

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

PUBLIC INTEREST AND 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:

OF NUNAVUT, CANADA FILLING YET ANOTHER GAP IN OUR KNOWLEDGE OF
EVOLUTION FROM CREATURES OF WATER TO THOSE OF LAND. THE ACADEMY AND
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.

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

AIMED AT TAKING OUR VISITOR EXPERIENCE TO THE NEXT LEVEL. WE BOOSTED
THE PRESENCE OF LIVE ANIMALS IN MUSEUM PROGRAMMING BY ADDING DAILY
SHOWS, HOSTING STORY TIME, AND ACQUIRING A PORCUPINE, A BLUE TONGUED
SKINK, AND TWO HEDGEHOGS. WE DEVELOPED NEW CARTS OF CURIOSITY, WHICH
OFFER UP CLOSE ENCOUNTERS WITH ACADEMY STAFF AND LIVE ANIMAL

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

Schedule O (Form 990 or 990-EZ) (2013)

332211
09-04-13

Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
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AMBASSADORS. THE ACADEMY ALSO PILOTED AN EIGHT WEEK PROGRAM FOR TEENS WITH AUTISM SPECTRUM DISORDER, BUILT AROUND THE TOPIC OF PALEONTOLOGY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
LIBRARY RESOURCES, AND SPECIAL EXHIBITS.

FORM 990, PART V, LINE 7G:
EXPLANATION: NOT APPLICABLE.

FORM 990, PART V, LINE 7H:
EXPLANATION: NOT APPLICABLE.

FORM 990, PART VI, SECTION A, LINE 1:
EXPLANATION: EMERTIUS TRUSTEES AND HONORARY TRUSTEES SHALL HAVE SUCH OTHER PRIVILEGES AS THE BOARD SHALL DETERMINE BUT SHALL NOT BE ELIGIBLE TO VOTE.

FORM 990, PART VI, SECTION A, LINE 6:
EXPLANATION: THE MEMBERSHIP OF THE ACADEMY CONSISTS OF ONE VOTING MEMBER WHICH IS DREXEL UNIVERSITY.

FORM 990, PART VI, SECTION A, LINE 7A:
EXPLANATION: DREXEL UNIVERSITY IS THE SOLE VOTING MEMBER AND HAS THE AUTHORITY TO APPOINT OR REMOVE AN ACADEMY TRUSTEE.

FORM 990, PART VI, SECTION A, LINE 7B:
EXPLANATION: TO THE FULLEST EXTENT PERMITTED UNDER THE PENNSYLVANIA

Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
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NON-PROFIT CORPORATION LAW OF 1988, AS AMENDED, CERTAIN CORPORATE ACTIONS
REQUIRE THE APPROVAL OF THE MEMBER.

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

EXPLANATION: THE DRAFT 990 IS PREPARED INTERNALLY AND REVIEWED BY THE
ACADEMY'S AUDIT COMMITTEE. ACTING ON BEHALF OF THE BOARD, THE AUDIT
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:

EXPLANATION: ALL TRUSTEES AND APPROPRIATE ACADEMY STAFF REVIEW AND SIGN A
CONFLICT OF INTEREST POLICY EACH YEAR WHICH IS MONITORED FOR COMPLIANCE BY
DREXEL UNIVERSITY'S OFFICE OF GENERAL COUNSEL.

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

EXPLANATION: THE ACADEMY'S BOARD OF TRUSTEES IS RESPONSIBLE FOR DETERMINING
THE COMPENSATION OF THE ACADEMY'S PRESIDENT AND CEO. DECISIONS REGARDING
COMPENSATION ARE BASED ON OVERALL PERFORMANCE AND APPLICABLE MARKET AND
ECONOMIC CONDITIONS AS WELL AS APPROPRIATE COMPARABILITY DATA AS DEFINED IN
IRS TREASURY REGULATION 53.4958-6(C)(2), AS AMENDED. THE COMPENSATION OF
THE ACADEMY PRESIDENT AND CEO IS SUBJECT TO THE APPROVAL OF THE DREXEL
UNIVERSITY BOARD OF TRUSTEES THROUGH ITS APPROVAL OF THE ACADEMY'S
OPERATING BUDGET, OF WHICH SUCH COMPENSATION IS A PART.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VT, VA, WA, WV, WI, WY

Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

Employer identification number 23-1352000

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

EXPLANATION: 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:

EXPLANATION: THE ACADEMY'S AUDIT COMMITTEE REVIEWS AND APPROVES THE AUDIT PLAN AND AUDITED FINANCIAL STATEMENTS FOR THE ACADEMY OF NATURAL SCIENCES. THE TASK OF SELECTING THE INDEPENDENT AUDITOR, FOR THE UNIVERSITY AND ITS SUBSIDIARIES, IS THE RESPONSIBILITY OF DREXEL UNIVERSITY'S AUDIT COMMITTEE.

THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 b Gift, grant, or capital contribution to related organization(s)
 c Gift, grant, or capital contribution from related organization(s)
 d Loans or loan guarantees to or for related organization(s)
 e Loans or loan guarantees by related organization(s)
 f Dividends from related organization(s)
 g Sale of assets to related organization(s)
 h Purchase of assets from related organization(s)
 i Exchange of assets with related organization(s)
 j Lease of facilities, equipment, or other assets to related organization(s)
 k Lease of facilities, equipment, or other assets from related organization(s)
 l Performance of services or membership or fundraising solicitations for related organization(s)
 m Performance of services or membership or fundraising solicitations by related organization(s)
 n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 o Sharing of paid employees with related organization(s)
 p Reimbursement paid to related organization(s) for expenses
 q Reimbursement paid by related organization(s) for expenses
 r Other transfer of cash or property to related organization(s)
 s Other transfer of cash or property from related organization(s)

	Yes	No
1a	X	
1b		X
1c		X
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l		X
1m	X	
1n		X
1o		X
1p	X	
1q		X
1r		X
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) DREXEL UNIVERSITY	M	2,007,000.BOOK AMOUNT	BOOK AMOUNT
(2) DREXEL UNIVERSITY	P	262,000.BOOK AMOUNT	BOOK AMOUNT
(3) DREXEL UNIVERSITY	A	16,000.BOOK AMOUNT	BOOK AMOUNT
(4)			
(5)			
(6)			

THE ACADEMY OF NATURAL SCIENCES OF 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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax, under section 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-JBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

