

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# Form 990

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.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

# 2022

Open to Public Inspection

**A** For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA</b>		<b>D</b> Employer identification number <b>23-1352000</b>
	Doing business as <b>THE ACADEMY OF NATURAL SCIENCES</b>		<b>E</b> Telephone number <b>215-299-1000</b>
	Number and street (or P.O. box if mail is not delivered to street address) <b>1900 BENJAMIN FRANKLIN PARKWAY</b>	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code <b>PHILADELPHIA, PA 19103-1101</b>		<b>G</b> Gross receipts \$ <b>31,495,330.</b>
	<b>F</b> Name and address of principal officer: <b>LISA MILLER</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527  
**J** Website: **WWW.ANSP.ORG**  
**K** Form of organization:  Corporation  Trust  Association  Other **L** Year of formation: **1812** **M** State of legal domicile: **PA**

## Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>UNDERSTAND THE NATURAL WORLD AND INSPIRE EVERYONE TO CARE FOR IT.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>24</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>20</b>
	<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a)	<b>5</b>	<b>235</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>45</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>145,691.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>20,670.</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 12,298,612.	<b>Current Year</b> 11,477,927.
	<b>9</b> Program service revenue (Part VIII, line 2g)	6,006,240.	5,806,106.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,007,573.	4,309,372.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,557,686.	257,218.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,870,111.	21,850,623.
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	873,956.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,533,893.	10,675,592.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		1,230,140.	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		10,189,771.	10,527,432.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	20,597,620.	21,659,963.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	8,272,491.	190,660.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 101,031,754.	<b>End of Year</b> 101,737,515.
	<b>21</b> Total liabilities (Part X, line 26)	7,801,744.	4,976,270.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	93,230,010.	96,761,245.

## 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.

<b>Sign Here</b>	<i>Lisa Miller</i>		Date	
	Signature of officer		5-15-2024	
<b>Paid Preparer Use Only</b>	LISA MILLER, VP, CFO/COO		Type or print name and title	
	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
<b>Preparer Use Only</b>	Firm's name		Firm's EIN	
	Firm's address		Phone no.	

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA</b>	Taxpayer identification number (TIN) <b>23-1352000</b>
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. <b>1900 BENJAMIN FRANKLIN PARKWAY</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PHILADELPHIA, PA 19103-1101</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	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
Form 990-T (corporation)	07		

**DREXEL UNIVERSITY, COMPTROLLER'S OFFICE**

• The books are in the care of ▶ **3141 CHESTNUT STREET, STE 225 - PHILADELPHIA, PA 19104**

Telephone No. ▶ **215-895-1442** Fax No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If 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 TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **MAY 15, 2024**, 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, 2022**, and ending **JUN 30, 2023**.

**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

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</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.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

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

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION IS "TO UNDERSTAND THE NATURAL WORLD AND INSPIRE EVERYONE TO CARE FOR IT." THE ACADEMY IMPLEMENTS ITS MISSION THROUGH UNDERSTANDING THE DIVERSITY OF LIFE; DEVELOPING AND APPLYING SCIENCE TO PROTECT THE ENVIRONMENT; AND INFORMING AND BUILDING A MOVEMENT OF

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  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  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 \$ 6,876,627. including grants of \$ 356,813. ) (Revenue \$ 3,490,645. )  
SCIENCE DIVISION - ACADEMY SCIENTISTS CONDUCT RESEARCH AROUND THE WORLD, COLLECTING SAMPLES THAT HELP THEM DOCUMENT BIODIVERSITY, TRACE EVOLUTION AND TRACK ENVIRONMENTAL CHANGES OVER TIME. FOR OVER 200 YEARS, ACADEMY SCIENTISTS HAVE PRESERVED, CURATED, AND STUDIED WHAT IS NOW A WORLD-CLASS COLLECTION OF AN ESTIMATED 19 MILLION BIOLOGICAL SPECIMENS THAT DOCUMENTS THE HISTORY OF LIFE ON EARTH. THE ACADEMY'S ENVIRONMENTAL WORK INCLUDES A FOCUS ON UNDERSTANDING AND MANAGING THE VARIED IMPACTS OF ENVIRONMENTAL CONDITIONS ON DIVERSE HUMAN COMMUNITIES. FUNDING FOR RESEARCH COMES FROM FEDERAL, STATE, AND LOCAL GOVERNMENTAL AGENCIES AND FOUNDATIONS. THROUGH FESTIVALS (SUCH AS OUR POPULAR BUG FEST), MEMBERS' NIGHT, BEHIND-THE-SCENES TOURS, POPULAR PUBLICATIONS, AND PUBLIC PROGRAMS (INCLUDING THE ACADEMY TOWN SQUARES

4b (Code: ) (Expenses \$ 7,230,968. including grants of \$ 97,126. ) (Revenue \$ 2,251,155. )  
PUBLIC EDUCATION - THE ACADEMY BRINGS NATURAL SCIENCE TO LIFE THROUGH THREE FLOORS OF ENGAGING PERMANENT EXHIBITS THAT INCLUDE OUR HISTORIC DIORAMAS AND DINOSAUR HALL AS WELL AS THE CHILDREN'S NATURE DISCOVERY CENTER, OUTSIDE IN, THAT FACILITATES HANDS-ON EXPERIENCES WITH LIVE ANIMALS. WHILE VISITATION TO THE ACADEMY IS STILL REBOUNDING FROM THE EFFECTS OF THE GLOBAL COVID-19 PANDEMIC, WE WELCOMED MORE THAN 80,000 VISITORS IN THE FISCAL YEAR 2023. THIS PAST SUMMER, THE NUMBER OF GROUP VISITS FOR SUMMER CAMPS CONTINUED TO INCREASE, AND THE ATTENDEES IN THE ACADEMY'S POPULAR EXPLORERS CAMP ROSE SIGNIFICANTLY. THE ACADEMY CONTINUES TO OFFER EXCITING NEW INITIATIVES AIMED AT TAKING OUR VISITOR EXPERIENCE TO THE NEXT LEVEL. IN FISCAL YEAR 2023, WE CONTINUED TO COLLABORATE WITH DREXEL FACULTY ON THE MUSEUM INNOVATION

4c (Code: ) (Expenses \$ 1,195,734. including grants of \$ 3,000. ) (Revenue \$ 64,306. )  
LIBRARY AND ARCHIVES - THE ACADEMY'S LIBRARY AND ARCHIVES IS INTERNATIONALLY RECOGNIZED FOR ITS RARE AND HISTORIC COLLECTION OF MORE THAN 250,000 TITLES THAT SPAN FIVE CENTURIES, AS WELL AS OVER A MILLION ITEMS, INCLUDING MANUSCRIPTS, CORRESPONDENCE, FIELD NOTEBOOKS, FILMS, JOURNALS, PHOTOGRAPHS, AND WORKS OF ART. THE LIBRARY AND ARCHIVES PROVIDES SERVICES TO BOTH A WIDE RANGE OF SCHOLARLY USERS AND THE GENERAL PUBLIC. THE DEPARTMENT FREQUENTLY HOSTS RESEARCH APPOINTMENTS, SPECIAL CLASS TOURS, AND SESSIONS WITH THE DREXEL ACADEMIC COMMUNITY, AND TOGETHER WITH CSBE AND DREXEL'S DEPT. OF HISTORY, CONVENES THE SPECIMEN-SPECIAL COLLECTIONS, IDEAS, AND MATERIALITIES OF THE ENVIRONMENT READING GROUP. ITS HOLDINGS AND SERVICES ARE REGULARLY USED BY ACADEMY SCIENTISTS, COLLECTIONS EXPERTS, AND EXTERNAL RESEARCHERS.

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

4e Total program service expenses 15,303,329.

**THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA**

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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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> .....	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>X</b>	
<b>3</b> 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> .....		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> 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> .....		<b>X</b>
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		<b>X</b>
<b>6</b> 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> .....		<b>X</b>
<b>7</b> 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> .....		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>X</b>	
<b>9</b> 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> .....		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>X</b>	
<b>11</b> 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.		
<b>a</b> 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> .....	<b>X</b>	
<b>b</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> .....	<b>X</b>	
<b>c</b> 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> .....		<b>X</b>
<b>d</b> 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> .....		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>X</b>	
<b>f</b> 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> .....	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>X</b>	
<b>b</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> .....	<b>X</b>	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		<b>X</b>
<b>b</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> .....	<b>X</b>	
<b>15</b> 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> .....	<b>X</b>	
<b>16</b> 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> .....		<b>X</b>
<b>17</b> 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> See instructions .....		<b>X</b>
<b>18</b> 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> .....		<b>X</b>
<b>19</b> 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> .....		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>X</b>	

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<b>23</b> 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> .....	<b>23</b> X	
<b>24a</b> 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> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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> .....	<b>25a</b>	X
<b>b</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> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b> X	
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b> X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b> X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> 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> .....	<b>32</b>	X
<b>33</b> 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> .....	<b>33</b>	X
<b>34</b> 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> .....	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</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> .....	<b>35b</b>	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> 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> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	<b>38</b> X	

**Note:** All Form 990 filers are required to complete Schedule O

**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
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 20	
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b> X	

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**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b>	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 ..... <b>2a</b> 235		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .....	<input checked="" type="checkbox"/>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? .....	<input checked="" type="checkbox"/>	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> .....	<input checked="" type="checkbox"/>	
<b>4a</b>	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)? .....		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .....		<input checked="" type="checkbox"/>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .....		<input checked="" type="checkbox"/>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .....		
<b>6a</b>	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? .....		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? .....		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? .....		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....		<input checked="" type="checkbox"/>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year ..... <b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....		<input checked="" type="checkbox"/>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....		<input checked="" type="checkbox"/>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ...		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? .....		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966? .....		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .....		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 ..... <b>10a</b>		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ..... <b>10b</b>		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders ..... <b>11a</b>		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) ..... <b>11b</b>		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? .....		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year ..... <b>12b</b>		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? .....		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</b>	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 ..... <b>13b</b>		
<b>c</b>	Enter the amount of reserves on hand ..... <b>13c</b>		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? .....		<input checked="" type="checkbox"/>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .....		
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? .....		<input checked="" type="checkbox"/>
	If "Yes," see the instructions and file Form 4720, Schedule N.		
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .....		<input checked="" type="checkbox"/>
	If "Yes," complete Form 4720, Schedule O.		
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? .....		
	If "Yes," complete Form 6069.		

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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 on 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
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	24		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	20		
<b>2</b> 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?	<b>2</b>			<b>X</b>
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	<b>3</b>			<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		<b>X</b>	
<b>7a</b> 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?	<b>7a</b>		<b>X</b>	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		<b>X</b>	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		<b>X</b>	
<b>9</b> 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 on Schedule O	<b>9</b>			<b>X</b>

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

			Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>			<b>X</b>
<b>b</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?	<b>10b</b>			
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>		<b>X</b>	
<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>		<b>X</b>	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>		<b>X</b>	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<b>12c</b>		<b>X</b>	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>		<b>X</b>	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>		<b>X</b>	
<b>15</b> 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?				
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>		<b>X</b>	
<b>b</b> Other officers or key employees of the organization	<b>15b</b>		<b>X</b>	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>			<b>X</b>
<b>b</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?	<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on 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, address, and telephone number of the person who possesses the organization's books and records  
DREXEL UNIVERSITY, COMPTROLLER'S OFFICE - 215-895-1442  
3141 CHESTNUT STREET, STE 225, 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) JOHN A. FRY BOARD TRUSTEE	2.00 45.00	X					0.	2,077,353.	157,401.	
(2) SCOTT COOPER, PHD PRESIDENT AND CEO	40.00 2.00	X		X			466,394.	3,000.	93,459.	
(3) SHARON L. WALKER PHD, F. AEESP, BOARD TRUSTEE	2.00 40.00	X					0.	451,088.	46,117.	
(4) DAVID RUSENKO (TO 4/23) BOARD TRUSTEE	2.00 42.00	X					0.	328,610.	47,867.	
(5) LISA M MILLER VP, CFO/COO	40.00 0.00			X			244,973.	0.	52,657.	
(6) DAVID VELINSKY VP, CENTER FOR ACADEMY SCIENCES	2.00 40.00				X		0.	205,901.	41,533.	
(7) MARINA MCDUGALL VP, EXPERIENCE & ENGAGEMENT	40.00 0.00				X		168,151.	0.	21,732.	
(8) JANE TAYLOR VP, MARKETING, SALES & COM	40.00 0.00				X		172,817.	0.	498.	
(9) MAURICE BAYNARD VP, COMMUNITY LEARNING	40.00 0.00				X		155,669.	0.	16,223.	
(10) JACQUELINE GENOVESI EXEC DIRECTOR, CENTER FOR STEAM	40.00 0.00					X	143,446.	0.	15,918.	
(11) MEGHAN BUCCI EXEC DIRECTOR, FINANCE & ADMIN	40.00 0.00					X	127,345.	0.	15,317.	
(12) ROLAND WALL DIRECTOR, PATRICK CENTER	40.00 2.00					X	110,298.	3,000.	26,864.	
(13) JOSEPH RESNICK SR DIR TECH/INFRASTRUCTURE	40.00 0.00					X	103,252.	0.	28,554.	
(14) LINDSAY PEREZ PROGRAM DIRECTOR & EDS LEAD	40.00 0.00					X	103,622.	0.	12,708.	
(15) JEFFREY A. BEACHELL BOARD TRUSTEE	2.00 2.00	X					0.	0.	0.	
(16) AMY BRANCH-BENOLIEL BOARD TRUSTEE	2.00 0.00	X					0.	0.	0.	
(17) ERICA CARPENTER, PHD BOARD TRUSTEE	2.00 0.00	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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) MAUREEN CRAIG BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
(19) ABBIE DEAN VICE CHAIR	2.00 2.00	X		X				0.	0.	0.
(20) ROBERT J. DELANY TREASURER	2.00 0.00	X		X				0.	0.	0.
(21) SUZANNE EVELAND BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
(22) JASON FRIEDLAND BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
(23) MARC E. GOLD BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
(24) DAVID E. GRIFFITH CHAIR	2.00 2.00	X		X				0.	0.	0.
(25) LATASHA HARLING BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
(26) JUN HUANGPU, PH.D. (TO 9/22) BOARD TRUSTEE	2.00 0.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,795,967.	3,068,952.	576,848.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,795,967.	3,068,952.	576,848.

**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 10

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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
CLEAN TECH SERVICES, INC 114 CHESTNUT ST, PHILADELPHIA, PA 19106	CLEANING SERVICES	433,549.
LIMBACH COMPANY, LLC, 175 TITUS AVENUE, STE 100, WARRINGTON, PA 18976	HVAC SERVICES	330,287.
CAPACITY INTERACTIVE CONSULTING, LLC 82 NASSAU STREET #60283, NEW YORK, NY 10038	PROFESSIONAL SERVICES	308,251.
NEW PARADISE LABORATORIES THEATER INC, 747 CORINTHIAN AVENUE, PHILADELPHIA, PA 19130	CONSULTING SERVICES	203,654.
PRICEWATERHOUSECOOPERS LLP, 2001 MARKET ST, SUITE 1700, PHILADELPHIA, PA 19103	AUDIT SERVICES	189,226.

**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 9

**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)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns .....	<b>1a</b> 1,623.				
	<b>b</b>	Membership dues .....	<b>1b</b> 329,512.				
	<b>c</b>	Fundraising events .....	<b>1c</b>				
	<b>d</b>	Related organizations .....	<b>1d</b> 7,103,120.				
	<b>e</b>	Government grants (contributions) .....	<b>1e</b> 40,000.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b> 4,003,672.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b> \$ 629,023.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		11,477,927.			
	Program Service Revenue	<b>2 a</b>	ENVIRONMENTAL RESEARCH	Business Code 541700	2,716,599.	2,716,599.	
<b>b</b>		EDUCATION & MUSEUM PRO	611600	1,169,823.	1,169,823.		
<b>c</b>		MUSEUM ADMISSIONS	712110	1,081,332.	1,081,332.		
<b>d</b>		SYSTEMATIC BIOLOGY RE	541700	774,046.	774,046.		
<b>e</b>		ALL OTHER PROGRAM SERVICES	712110	64,306.	64,306.		
<b>f</b>		All other program service revenue .....					
<b>g</b>		<b>Total.</b> Add lines 2a-2f .....		5,806,106.			
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		1,653,079.		1653079.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....					
	<b>5</b>	Royalties .....		28,981.		28,981.	
	<b>6 a</b>	Gross rents .....	(i) Real				
			(ii) Personal				
	<b>b</b>	Less: rental expenses ...	<b>6b</b>				
	<b>c</b>	Rental income or (loss)	<b>6c</b>				
	<b>d</b>	Net rental income or (loss) .....					
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	(i) Securities				
			(ii) Other				
				12,301,000.			
	<b>b</b>	Less: cost or other basis and sales expenses .....	<b>7b</b> 9,626,999.	17,708.			
	<b>c</b>	Gain or (loss) .....	<b>7c</b> 2,674,001.	-17,708.			
<b>d</b>	Net gain or (loss) .....		2,656,293.		2656293.		
<b>8 a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>					
<b>b</b>	Less: direct expenses .....	<b>8b</b>					
<b>c</b>	Net income or (loss) from fundraising events .....						
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>					
<b>b</b>	Less: direct expenses .....	<b>9b</b>					
<b>c</b>	Net income or (loss) from gaming activities .....						
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....						
<b>b</b>	Less: cost of goods sold .....	<b>10b</b>					
<b>c</b>	Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue	<b>11 a</b>	INCOME (LOSS) FROM PARTNERSHIP IN	Business Code 525990	145,691.	145,691.		
	<b>b</b>	FACILITY SALES	531120	82,546.		82,546.	
	<b>c</b>	.....					
	<b>d</b>	All other revenue .....					
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....		228,237.			
<b>12</b>	<b>Total revenue.</b> See instructions .....		21,850,623.	5,806,106.	145,691.	4420899.	

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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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	323,759.	323,759.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	5,580.	5,580.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	127,600.	127,600.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,361,801.	381,759.	874,848.	105,194.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	34,812.	34,812.		
<b>7</b> Other salaries and wages	7,063,468.	5,866,673.	728,813.	467,982.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	743,442.	552,148.	140,925.	50,369.
<b>9</b> Other employee benefits	848,250.	647,081.	148,324.	52,845.
<b>10</b> Payroll taxes	623,819.	463,306.	118,249.	42,264.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	5,629.	5,629.		
<b>c</b> Accounting	98,100.		98,100.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	161,754.		161,754.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	978,363.	548,439.	398,144.	31,780.
<b>12</b> Advertising and promotion	354,957.	351,957.	3,000.	
<b>13</b> Office expenses	786,982.	712,106.	54,760.	20,116.
<b>14</b> Information technology	293,428.	208,332.	67,745.	17,351.
<b>15</b> Royalties				
<b>16</b> Occupancy	2,392,770.	2,276,246.	89,458.	27,066.
<b>17</b> Travel	221,076.	209,660.	8,815.	2,601.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	110,676.	86,187.	24,489.	
<b>20</b> Interest	9,671.		9,671.	
<b>21</b> Payments to affiliates	3,067,539.	769,712.	2,027,058.	270,769.
<b>22</b> Depreciation, depletion, and amortization	1,289,881.	1,227,066.	48,224.	14,591.
<b>23</b> Insurance				
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>EXHIBITION EXPENSE</b>	227,221.	227,001.	220.	
<b>b</b> <b>HOSPITALITY</b>	162,819.	113,288.	1,100.	48,431.
<b>c</b> <b>PROGRAM EXPENSES</b>	136,600.	49,715.	85,243.	1,642.
<b>d</b> <b>BAD DEBT EXPENSE</b>	75,000.			75,000.
<b>e</b> All other expenses	154,966.	115,273.	37,554.	2,139.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	21,659,963.	15,303,329.	5,126,494.	1,230,140.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	4,500.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	914,702.
	<b>3</b> Pledges and grants receivable, net .....	2,397,686.	<b>3</b>	1,761,445.
	<b>4</b> Accounts receivable, net .....	616,619.	<b>4</b>	397,109.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	179,670.	<b>9</b>	422,085.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 32,025,633.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 14,835,878.	18,255,165.	<b>10c</b> 17,189,755.
	<b>11</b> Investments - publicly traded securities .....	37,648,617.	<b>11</b>	42,493,051.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	41,927,000.	<b>12</b>	38,552,000.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	6,997.	<b>15</b>	2,868.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	101,031,754.	<b>16</b>	101,737,515.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,873,023.	<b>17</b>	1,344,331.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	1,312,847.	<b>19</b>	1,207,111.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	4,615,874.	<b>25</b>	2,424,828.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	7,801,744.	<b>26</b>	4,976,270.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	6,820,301.	<b>27</b>	7,982,498.
	<b>28</b> Net assets with donor restrictions .....	86,409,709.	<b>28</b>	88,778,747.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	93,230,010.	<b>32</b>	96,761,245.
<b>33</b> Total liabilities and net assets/fund balances .....	101,031,754.	<b>33</b>	101,737,515.	

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**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	21,850,623.
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,659,963.
3	Revenue less expenses. Subtract line 2 from line 1	3	190,660.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	93,230,010.
5	Net unrealized gains (losses) on investments	5	1,664,728.
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 on Schedule O)	9	1,675,847.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	96,761,245.

**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 on 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		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	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 on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	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 on Schedule O and describe any steps taken to undergo such audits _____	X	

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**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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2021 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2022.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2021.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2022.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> 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"/>



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6903824.	7982410.	9754047.	12298612.	11477927.	48416820.
<b>2</b> 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	5945366.	5141736.	4486704.	6039109.	5888651.	27501566.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	12849190.	13124146.	14240751.	18337721.	17366578.	75918386.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	455,927.	838,933.	901,541.	2543765.	1745356.	6485522.
<b>b</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	364,149.	915,475.	1510390.	1889585.	1724983.	6404582.
<b>c</b> Add lines 7a and 7b	820,076.	1754408.	2411931.	4433350.	3470339.	12890104.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						63028282.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6	12849190.	13124146.	14240751.	18337721.	17366578.	75918386.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1684053.	1595922.	1139461.	1897368.	1682060.	7998864.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0.	0.	0.	0.	16,329.	16,329.
<b>c</b> Add lines 10a and 10b	1684053.	1595922.	1139461.	1897368.	1698389.	8015193.
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	271,587.		2736265.	1457404.		4465256.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	14804830.	14720068.	18116477.	21692493.	19064967.	88398835.

**14 First 5 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**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	71.30 %
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15	<b>16</b>	71.56 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	9.07 %
<b>18</b> Investment income percentage from 2021 Schedule A, Part III, line 17	<b>18</b>	8.59 %

**19a 33 1/3% support tests - 2022.** 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 - 2021.** 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 Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No	
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3.	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d <b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e <b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2 Acquisition indebtedness applicable to non-exempt-use assets	2	
3 Subtract line 2 from line 1d.	3	
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by 0.035.	6	
7 Recoveries of prior-year distributions	7	
8 <b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount	(A) Prior Year	(B) Current Year (optional)
1 Adjusted net income for prior year (from Section A, line 8, column A)	1	Current Year
2 Enter 0.85 of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

THE ACADEMY OF NATURAL SCIENCES OF  
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Schedule A (Form 990) 2022

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b> Distributable amount for 2022 from Section C, line 6	<b>9</b>
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
<b>f Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7 Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018			
<b>b</b> Excess from 2019			
<b>c</b> Excess from 2020			
<b>d</b> Excess from 2021			
<b>e</b> Excess from 2022			

Schedule A (Form 990) 2022



**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

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" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \_\_\_\_\_

4 Number of states where property subject to conservation easement is located \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

b Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

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

Schedule D (Form 990) 2022





**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A) INVESTMENT AT NAV		
(B) (PRIVATE EQUITY, REAL		
(C) ESTATE, HEDGE FUNDS AND		
(D) OTHER)	38,552,000.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	38,552,000.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on 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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on 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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEPOSITS	125,293.
(3) POST RETIREMENT AND PENSION	
(4) BENEFIT	297,367.
(5) OPERATING LEASE LIABILITY	2,168.
(6) DUE TO DREXEL UNIVERSITY	2,000,000.
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,424,828.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

THE ACADEMY OF NATURAL SCIENCES OF  
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**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

1	Total revenue, gains, and other support per audited financial statements		1	22,995,719.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	1,664,728.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	1,664,728.	
3	Subtract line 2e from line 1	3	21,330,991.	
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	537,340.	
b	Other (Describe in Part XIII.)	4b	-17,708.	
c	Add lines 4a and 4b	4c	519,632.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	21,850,623.	

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

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

1	Total expenses and losses per audited financial statements		1	21,140,331.
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		
e	Add lines 2a through 2d	2e	0.	
3	Subtract line 2e from line 1	3	21,140,331.	
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	537,340.	
b	Other (Describe in Part XIII.)	4b	-17,708.	
c	Add lines 4a and 4b	4c	519,632.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	21,659,963.	

**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:**

THE ACADEMY HAS BEEN GRANTED TAX EXEMPT STATUS AS A NON-PROFIT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND, ACCORDINGLY FILES FEDERAL TAX FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX), ANNUALLY.

THE ACADEMY HAS FROM TIME TO TIME REPORTED UNRELATED BUSINESS INCOME FROM INVESTMENTS HELD IN THE ENDOWMENT FUND, WHEN UNRELATED BUSINESS INCOME HAS BEEN REPORTED BY THE INVESTMENT MANAGER ON SCHEDULE K-1. THE STATUTE OF LIMITATIONS ON THE ACADEMY'S U.S. FEDERAL INFORMATIONAL RETURNS REMAINS OPEN FOR THREE YEARS FOLLOWING THE YEAR THEY ARE FILED.

THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10, ACCOUNTING FOR UNCERTAINTY IN

**Part XIII** Supplemental Information (continued)

INCOME TAXES, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR  
DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THE ACADEMY DOES  
NOT BELIEVE THERE ARE ANY UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE  
RECOGNITION IN THE FINANCIAL STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS LOSS ON DISPOSAL OF ASSET

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS LOSS ON DISPOSAL OF ASSETS

PART III, LINE 1A:

COLLECTIONS ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS ARE NOT  
RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION. PURCHASES OF  
COLLECTION ITEMS ARE RECORDED AS DECREASES IN NET ASSETS WITHOUT DONOR  
RESTRICTIONS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR NET ASSETS  
WITH DONOR RESTRICTIONS 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 THE  
ITEMS IS CATALOGED, PRESERVED, AND CARED FOR, AND ACTIVITIES VERIFYING  
THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY.

PART III, LINE 4:

THE ACADEMY'S COLLECTIONS OF MORE THAN 19 MILLION CATALOGED NATURAL  
HISTORY SPECIMENS AND ARTIFACTS ARE COLLECTIVELY AMONG THE 10 LARGEST IN

**Part XIII** Supplemental Information (continued)

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:

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.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
EUROPE - INCLUDING ICELAND AND GREENLAND	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	334.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	16,743.
EUROPE - INCLUDING ICELAND AND GREENLAND	0	0	PROGRAM SERVICES	TRAVEL/CONFERENCES	57,111.
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	1,510.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	84.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	4,150.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	TRAVEL/CONFERENCES	3,000.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RESEARCH/COLLECTING	169,823.
<b>3 a</b> Subtotal .....	0	0			252,755.
<b>b</b> Total from continuation sheets to Part I .....	0	0			127,600.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			380,355.

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

Schedule F (Form 990) 2022

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

Schedule F (Form 990)

23-1352000

Page 1

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		127,600.
<b>Totals</b> .....					127,600.







THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

Schedule F (Form 990) 2022

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**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 separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* .....  Yes  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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* .....  Yes  No

Schedule F (Form 990) 2022

**Part V Supplemental Information**

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

**PART I, LINE 2:**

THE EXPENDITURES INCURRED IN ACTIVITIES OUTSIDE THE UNITED STATES ARE  
TRACKED ON EXPENSE REPORTS SUBMITTED BY THE SCIENTISTS AND EMPLOYEES.  
THE EXPENSE REPORTS DOCUMENT THE ACTUAL EXPENDITURES AND DISBURSEMENTS  
MADE WITHIN THE FOREIGN LOCATION.

**PART I, LINE 3:**

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

**SCHEDULE 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" on Form 990, Part IV, line 21 or 22.  
**Attach to Form 990.**  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
DAUPHIN ISLAND SEA LAB 101 BIENVILLE BLVD. DAUPHIN ISLAND, AL 36528	46-0502262	501(C)(3)	8,659.	0.			RESEARCH
EAST STROUDSBURG UNIVERSITY 200 PROSPECT STREET EAST STROUDSBURG, PA 18301	22-2826714	501(C)(3)	9,834.	0.			RESEARCH
ENVIROSCIENCE INC. 1100 ATHENS AVE, SUITE F RICHMOND, VA 23227	34-1603505	FOR-PROFIT	13,251.	0.			RESEARCH
FRIENDS OF THE UPPER DELAWARE RIVER - 158 E. FRONT ST - HANCOCK, NY 13783	20-0337027	501(C)(3)	19,218.	0.			RESEARCH
GROWING GREAT 2711 N SEPULVEDA BLVD MANHATTAN BEACH, CA 90266	56-2565503	501(C)(3)	92,509.	0.			RESEARCH
LOCK HAVEN UNIVERSITY 401 N FAIRVIEW ST LOCK HAVEN, PA 17745	23-2442881	115	15,621.	0.			RESERACH

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 8.
- 3** Enter total number of other organizations listed in the line 1 table 1.

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

Schedule I (Form 990) 2022

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

Schedule I (Form 990)

23-1352000

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE UNIVERSITY 1805 N BROAD ST, WACHMAN HALL 1108 PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	69,125.	0.			RESEARCH
THE COMMONS 1875 CONNECTICUT AVE, NW FL 10 WASHINGTON, DC 20009	81-2531881	501(C)(3)	26,815.	0.			RESEARCH
TRUSTEES OF THE UNIVERSITY OF ILLINOIS - 506 S. WRIGHT ST., 209 HAB, NO. MC339 - URBANA, IL 61801	37-6000511	501(C)(3)	50,125.	0.			RESEARCH

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
AWARDS	91	5,580.	0.		

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

PART I, LINE 2:

THE PRINCIPAL INVESTIGATOR HAVING RESPONSIBILITY FOR THE GRANT MONITORS  
SUBCONTRACTOR PERFORMANCE BASED ON THE PROGRAM'S TASKS AND GOALS. THE  
PRINCIPAL INVESTIGATOR REVIEWS THE PERFORMANCE BEFORE AUTHORIZING THE  
SUBCONTRACTOR'S INVOICE FOR PAYMENT.

**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.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

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 on 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 (such as 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 on line 1a? .....

**3** Indicate which, if any, of the following the 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 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 on 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

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

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

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

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

**8** Were any amounts reported on 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

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

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

Schedule J (Form 990) 2022

THE ACADEMY OF NATURAL SCIENCES OF  
PHILADELPHIA

23-1352000

Schedule J (Form 990) 2022

Page 2

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN A. FRY BOARD TRUSTEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	886,109.	360,000.	831,244.	142,203.	15,198.	2,234,754.	0.
(2) SCOTT COOPER, PHD PRESIDENT AND CEO	(i)	404,557.	61,837.	0.	74,792.	18,667.	559,853.	0.
	(ii)	3,000.	0.	0.	0.	0.	3,000.	0.
(3) SHARON L. WALKER PHD, F. AEEESP, BOARD TRUSTEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	451,088.	0.	0.	27,450.	18,667.	497,205.	0.
(4) DAVID RUSENKO (TO 4/23) BOARD TRUSTEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	328,610.	0.	0.	33,550.	14,317.	376,477.	0.
(5) LISA M MILLER VP, CFO/COO	(i)	223,642.	21,331.	0.	51,983.	674.	297,630.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DAVID VELINSKY VP, CENTER FOR ACADEMY SCIENCES	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	189,599.	0.	16,302.	23,312.	18,221.	247,434.	0.
(7) MARINA MCDUGALL VP, EXPERIENCE & ENGAGEMENT	(i)	168,151.	0.	0.	15,583.	6,149.	189,883.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JANE TAYLOR VP, MARKETING, SALES & COM	(i)	164,743.	8,074.	0.	0.	498.	173,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MAURICE BAYNARD VP, COMMUNITY LEARNING	(i)	155,669.	0.	0.	9,625.	6,598.	171,892.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JACQUELINE GENOVESI EXEC DIRECTOR, CENTER FOR STEAM	(i)	143,446.	0.	0.	15,484.	434.	159,364.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

## PART I, LINE 4B:

DREXEL UNIVERSITY, A RELATED ORGANIZATION, PAID MR. FRY'S DEFERRED COMPENSATION OF \$338,622, WHICH BEGAN EFFECTIVE JULY 31, 2021. MR. FRY HAD BEEN CREDITED \$25,000 PER MONTH, BEGINNING JANUARY 31, 2022, THROUGH DECEMBER 31, 2022, PROVIDED MR. FRY IS EMPLOYED BY THE UNIVERSITY ON THE LAST DAY OF THE MONTH. IN ADDITION, THE DEFERRED COMPENSATION WAS CREDITED WITH INTEREST EARNED MONTHLY. MR. FRY WAS VESTED IN THE MONTHLY CREDITS AND EARNINGS IN THE DEFERRED COMPENSATION ARRANGEMENT FROM JANUARY 31, 2022, THROUGH DECEMBER 31, 2022.

DREXEL UNIVERSITY, A RELATED ORGANIZATION, PROVIDES MR. FRY WITH A SUPPLEMENTAL RETIREMENT BENEFIT PLAN, AMENDED AND RESTATED EFFECTIVE APRIL 1, 2022, WHICH APPLIES TO CONTRIBUTION CREDITS COMMENCING FOR THE FISCAL YEARS ENDING ON JUNE 30, 2021, THROUGH JUNE 30, 2028. THE ALLOCATION FOR EACH FISCAL YEAR SHALL BE CONDITIONED ON MR. FRY'S CONTINUED EMPLOYMENT THROUGH THE END OF THE FISCAL YEAR (OR UPON THE DATE OF DEATH, TOTAL DISABILITY, OR INVOLUNTARY TERMINATION, IF EARLIER). THE ANNUAL ALLOCATION AMOUNT IS EQUAL TO 11% OF THE SUM OF MR. FRY'S BASE SALARY AND ANNUAL PERFORMANCE BONUS (IF ANY) FOR SUCH FISCAL YEAR THAT IS IN EXCESS OF THE



**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.

COMPENSATION LIMIT UNDER SECTION 401(A)(17) OF THE INTERNAL REVENUE CODE.

PART I, LINE 7:

MEMBERS OF THE SENIOR LEADERSHIP TEAM SHALL BE ELIGIBLE FOR AN ANNUAL  
PERFORMANCE BONUS, SUBJECT TO LIMITATION, RECOMMENDED BY DREXEL UNIVERSITY  
(A RELATED ORGANIZATION) PRESIDENT FRY AND APPROVED BY THE EXECUTIVE  
COMPENSATION COMMITTEE OF THE BOARD.

SCHEDULE J, PART II

DREXEL UNIVERSITY, A RELATED ORGANIZATION, PROVIDES JOHN FRY, SCOTT  
COOPER, AND LISA MILLER WITH DEFERRED COMPENSATION ARRANGEMENTS.

THE UNIVERSITY WILL CREDIT MR. FRY WITH \$25,000 ON JANUARY 31, 2022,  
AND ON EACH FOLLOWING MONTH THROUGH JUNE 30, 2023, WHILE HE REMAINS  
EMPLOYED BY THE UNIVERSITY AS PRESIDENT AND CHIEF EXECUTIVE OFFICER.  
THE DEFERRED COMPENSATION CREDITED, AND INTEREST EARNED IS VESTED  
MONTHLY, PROVIDED THAT MR. FRY IS EMPLOYED BY THE UNIVERSITY ON THE  
LAST DAY OF EACH MONTH.

**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.

THE UNIVERSITY WILL CREDIT MR. COOPER WITH \$50,000 EACH JULY 1,  
BEGINNING WITH JULY 1, 2021, AND ENDING JULY 1, 2024, IF HE REMAINS  
EMPLOYED WITH THE UNIVERSITY. THE ACCOUNT WILL BE CREDITED ANNUALLY  
WITH INTEREST. MR. COOPER WILL BECOME FULLY VESTED IN THE BALANCE OF  
THE ACCOUNT UPON THE EARLIEST OF THE FOLLOWING: (I) JULY 1, 2024, (II)  
INVOLUNTARY TERMINATION BY THE UNIVERSITY FOR ANY REASON OTHER THAN  
CAUSE, (III) DEATH, OR (IV) TERMINATION DUE TO TOTAL AND PERMANENT  
DISABILITY. IF MR. COOPER RESIGNS OR IS TERMINATED BY THE UNIVERSITY  
FOR CAUSE BEFORE THE ACCOUNT IS VESTED, THE ENTIRE ACCOUNT WILL BE  
FORFEITED.

THE UNIVERSITY WILL CREDIT MS. MILLER WITH \$25,000 EACH JULY 1,  
BEGINNING WITH JULY 1, 2021, AND ENDING JULY 1, 2024, IF SHE REMAINS  
EMPLOYED WITH THE UNIVERSITY. THE ACCOUNT WILL BE CREDITED ANNUALLY  
WITH INTEREST. MS. MILLER WILL BECOME FULLY VESTED IN THE BALANCE OF  
THE ACCOUNT UPON THE EARLIEST OF THE FOLLOWING: (I) JULY 1, 2024, (II)  
INVOLUNTARY TERMINATION BY THE UNIVERSITY FOR ANY REASON OTHER THAN  
CAUSE, (III) DEATH, OR (IV) TERMINATION DUE TO TOTAL AND PERMANENT  
DISABILITY. IF MS. MILLER RESIGNS OR IS TERMINATED BY THE UNIVERSITY

**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.

FOR CAUSE BEFORE THE ACCOUNT IS VESTED, THE ENTIRE ACCOUNT WILL BE  
FORFEITED.





**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2022**

Open to Public Inspection

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

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	1	0.	<b>PART II EXPLANATION</b>
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....	X		0.	<b>PART II EXPLANATION</b>
5 Clothing and household goods .....	X		1,850.	<b>MARKET VALUE</b>
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	19	624,573.	<b>SELLING PRICE</b>
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ( <b>FANNY PACKS &amp; W</b> ) .....	X	1	2,600.	<b>MARKET VALUE</b>
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 V, Donee Acknowledgement ..... **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't 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 nonstandard 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 didn't 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):

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

SCHEDULE M, LINE 33:

THE ORGANIZATION DOES NOT RECOGNIZE REVENUE FOR CONTRIBUTIONS OR  
DONATIONS TO THE COLLECTIONS PURSUANT TO ASC 958-605-25-19. THE  
ORGANIZATION ALSO DOES NOT RECOGNIZE REVENUE FOR NONCASH CONTRIBUTIONS  
OR ASSETS WITH UNCERTAIN OR NO VALUE.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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 Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization	THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number	23-1352000
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FORM 990, ITEM C, DOING BUSINESS AS:

THE ACADEMY OF NATURAL SCIENCES OF DREXEL UNIVERSITY

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

ENVIRONMENTALLY ENGAGED COMMUNITIES FOR A HEALTHY, SUSTAINABLE AND  
EQUITABLE PLANET.

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

AND CONVERSATIONS), SCIENTISTS SHARE THEIR DISCOVERIES, ENABLING  
COLLEAGUES, VISITORS, AND MEMBERS TO GAIN FURTHER INSIGHT INTO EARTH'S  
ENVIRONMENTAL PROCESSES AND HOW TO MAINTAIN A SUSTAINABLE FUTURE.  
ACADEMY SCIENTISTS CONTINUE TO PRODUCE SCIENTIFIC PUBLICATIONS AND  
CULTIVATE OUR COLLECTIONS, WHICH ARE UTILIZED BY SCIENTISTS AROUND THE  
WORLD, BY TRAVELING ON FIELD TRIPS AND EXPEDITIONS FOR RESEARCH. THE  
ACADEMY AND DREXEL UNIVERSITY'S JOINT PROGRAM BIODIVERSITY, EARTH AND  
ENVIRONMENTAL SCIENCE (BEES) HAS GROWN WITH MANY NEW PROJECTS ON THE  
HORIZON AS WE CONTINUE TO BE THE EPICENTER OF DISCOVERY. DIGITIZING THE  
COLLECTIONS, SEARCHING FOR GENETIC CLUES TO BIODIVERSITY, AND  
UNDERSTANDING ENVIRONMENTAL CHANGES IN LOCAL WETLANDS AND WATERSHEDS,  
ACADEMY SCIENTISTS CONTINUE TO BE THE LEADING RESEARCHERS IN NATURAL  
SCIENCES.

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

FUND, A PROJECT THAT INSPIRES EXPERIMENTATION WITH THE ACADEMY AS A  
SPACE FOR NEW APPROACHES TO MUSEUMS AND PUBLIC ENGAGEMENT. FOR  
BIODIVERSITY YEAR 2023, THE ACADEMY PRESENTED TWO EXHIBITIONS IN THE

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

Schedule O (Form 990) 2022

232211 10-28-22



Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
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WILLIAM B. DIETRICH GALLERY. MICRCOSCULPTURE: THE INSECT PORTRAITS OF LEVON BISS PRESENTED VISITORS WITH ASTOUNDING LARGE-SCALE PRINTS OF THE MICROPHOTOGRAPHY OF INSECTS TO HIGHLIGHT THEIR EVOLUTIONARY TRAITS AND GENERATE AWARENESS OF THREATS TO ALARMING INSECT BIODIVERSITY LOSS. WE ALSO PRESENTED TWO IN-HOUSE DEVELOPED EXHIBITIONS ON THE OBSERVATION OF BIRDS. WHILE CONVERSATIONS WITH BIRDS IN OUR SPECIAL EXHIBITION GALLERY HIGHLIGHTED THE ROLE OF CITIZEN SCIENCE IN ADVANCING BOTH THE PUBLIC AND SCIENTIFIC UNDERSTANDING AND STEWARDSHIP OF BIRDS; ILLUMINATING BIRDS: DRAWING AS A WAY OF KNOWING IN THE DIETRICH GALLERY HIGHLIGHTED THE ROLE OF ILLUSTRATION IN THE HISTORY OF ORNITHOLOGY AS A FIELD AND ITS CONTINUED IMPORTANCE IN THE APPRECIATION AND ADVANCEMENT OF KNOWLEDGE OF OUR AVIAN COMPANIONS. WE ALSO PRESENTED THE BEAUTIFULLY CONCEIVED AND DESIGNED EXHIBITION SKIN: LIVING ARMOR, EVOLVING IDENTITY FROM THE CALIFORNIA ACADEMY OF SCIENCES ON THE FASCINATING ORGAN SKIN AND ITS FUNCTION ACROSS A DIVERSITY OF ANIMALS HUMANS INCLUDED. PUBLIC PROGRAMMING SUCH AS THE ACADEMY TOWN SQUARE SERIES; SPEAKER SERIES; DINOS AFTER DARK AND FESTIVALS SUCH AS THE BELOVED BUG FEST ANIMATED THE PUBLIC EXPERIENCE THROUGHOUT THE YEAR.

THE COMMUNITY LEARNING DIVISION CONTINUES TO CREATE COMMUNITY-CENTERED INITIATIVES THAT MOBILIZE ENVIRONMENTAL JUSTICE LEADERS AND CIVICALLY MINDED INDIVIDUALS. PARTNERING WITH COMMUNITIES ACROSS THE CITY, THE ACADEMY PROVIDE SCIENCE-INFUSED CURRICULUM TO SCHOOLS AND EDUCATORS, SUPPORT PROFESSIONAL DEVELOPMENT WITHIN A NETWORK OF EDUCATORS, AND CREATE PROGRAMS FOR STUDENTS THAT PROMOTE ENVIRONMENTAL JUSTICE. THE NEWLY FORMED DEPARTMENT OF COMMUNITY SCIENCE WORKS IN PARTNERSHIP WITH DREXEL'S ENVIRONMENTAL COLLABORATORY TO IDENTIFY AND DELIVER FUNDED PROJECTS IN WHICH INDIVIDUALS AND COMMUNITIES' PARTNER WITH SCIENTISTS TO ANSWER AND ADDRESS REAL-WORLD ENVIRONMENTAL QUESTIONS. DRAWING ON

Name of the organization THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Employer identification number 23-1352000
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THE ACADEMY'S UNIQUE ATTRIBUTES - INCLUDING ITS SCIENTISTS, COLLECTIONS, AND RELATIONSHIP WITH DREXEL, THE EDUCATION LEARNING AND DEVELOPMENT DEPARTMENT CREATES PROGRAMS AND CURRICULA IN SUPPORT OF LIFELONG LEARNING. THE ACADEMY'S CENTER FOR STEAM EQUITY WORKS IN PARTNERSHIP WITH DREXEL (IN PARTICULAR THE SCHOOL OF EDUCATION) TO ADDRESS SOCIAL INEQUITY THROUGH STEAM TEACHING AND LEARNING BY CONDUCTING, CATALYZING AND SUPPORTING COMMUNITY-BASED RESEARCH. AMONG THESE EFFORTS, THE NATIONALLY RECOGNIZED AND AWARD-WINNING WOMEN IN NATURAL SCIENCES (WINS) PROGRAM, THE LONGEST-RUNNING OF ITS KIND IN THE REGION, CONTINUES TO DELIVER AFTER-SCHOOL AND SUMMER ENRICHMENT PROGRAM FOR YOUNG WOMEN, INTRODUCING HUNDREDS OF HIGH-SCHOOL STUDENTS TO FUTURE CAREERS IN SCIENCE. OUR ENGINEERING WINS PROGRAM INFUSES WINS LESSONS WITH ENGINEERING CONTENT AND CONTINUES TO CONNECT STUDENTS WITH SCIENTISTS WHO SERVE AS MENTORS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:  
 IT ALSO PLAYS A KEY ROLE IN THE ACADEMY'S EFFORTS TO MAKE ITS COLLECTIONS AND ASSOCIATED DATA MORE WIDELY ACCESSIBLE. ITS STAFF ACTIVELY CONTRIBUTE TO THE CONCEPTION AND IMPLEMENTATION OF ACADEMY EXHIBITIONS AND PROGRAMS, AND ITS MATERIALS CONTINUE TO BE POPULARLY FEATURED IN THE MUSEUM'S OFFERINGS AND DIGITAL OUTREACH. LIBRARY & ARCHIVES IS A MEMBER OF THE CONSORTIUM FOR THE HISTORY OF SCIENCE, TECHNOLOGY, AND MEDICINE (TOGETHER WITH DREXEL UNIVERSITY LIBRARIES AND THE LEGACY CENTER); A PARTICIPATING CONTRIBUTOR OF THE BIODIVERSITY HERITAGE LIBRARY; AND AN ACTIVE PARTNER IN PACSCL - THE PHILADELPHIA AREA CONSORTIUM OF SPECIAL COLLECTIONS LIBRARIES.

FORM 990, PART V, LINE 7G:

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NOT APPLICABLE.

FORM 990, PART V, LINE 7H:

NOT APPLICABLE.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERSHIP OF THE ACADEMY CONSISTS OF ONE VOTING MEMBER WHICH IS DREXEL UNIVERSITY.

FORM 990, PART VI, SECTION A, LINE 7A:

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:

TO THE FULLEST EXTENT PERMITTED UNDER THE PENNSYLVANIA NON-PROFIT CORPORATION LAW OF 1988, AS AMENDED, CERTAIN CORPORATE ACTIONS REQUIRE THE APPROVAL OF THE MEMBER.

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

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

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

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THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA ("ACADEMY") IMPLEMENTS THE CONFLICT OF INTEREST AND COMMITMENT PROTOCOLS POLICY OF ITS PARENT, DREXEL UNIVERSITY. THE POLICY APPLIES TO ALL EMPLOYEES, OFFICERS, AND TRUSTEES OF THE ACADEMY/UNIVERSITY. THE POLICY IS INTENDED TO SATISFY COMPLIANCE REQUIREMENTS AND GUIDE ACADEMY/UNIVERSITY EMPLOYEES IN AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT. THE KEY TO AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT IS TO MAKE EMPLOYEES AWARE OF WHAT CONSTITUTES A CONFLICT AND FOR THEM TO DISCLOSE POTENTIAL SITUATIONS BEFORE THE ACTIVITY IS UNDERTAKEN. IN THE CASE OF EMPLOYEES AND OFFICERS, EACH EMPLOYEE AND OFFICER IS REQUIRED TO COMPLETE A DISCLOSURE QUESTIONNAIRE DURING THE ANNUAL COMPLIANCE PERIOD. EMPLOYEE CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE QUESTIONNAIRES ARE MANAGED THROUGH THE HUMAN RESOURCES DEPARTMENT'S ELECTRONIC SYSTEM, AS REQUIRED BY THE VICE PRESIDENT AND CHIEF COMPLIANCE AND PRIVACY OFFICER. COMPLETED CONFLICT OF INTEREST DISCLOSURE QUESTIONNAIRES ARE ROUTED TO THE EMPLOYEE'S SENIOR LEADER FOR RESOLUTION. AFTER THE SENIOR LEADER'S REVIEW, A DETERMINATION IS MADE AS TO WHETHER A CONFLICT OF INTEREST EXISTS AND AT WHAT LEVEL. CONFLICTS THAT ARE DETERMINED TO BE A VIOLATION OF UNIVERSITY POLICY ARE DISCUSSED WITH THE EMPLOYEE AND THE EMPLOYEE IS ADVISED TO TERMINATE THE ACTIVITY. EMPLOYEES WHO WILLINGLY OR OTHERWISE CONTINUE TO VIOLATE THE CONFLICT OF INTEREST AND COMMITMENT POLICY ARE SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION OF EMPLOYMENT. IN THE CASE OF TRUSTEES, A CONFLICT OF INTEREST DISCLOSURE QUESTIONNAIRE IS MAILED TO EACH TRUSTEE ANNUALLY. TRUSTEES ARE REQUIRED TO COMPLETE THE QUESTIONNAIRE AND DISCLOSE ANY INTERESTS IN ANY CORPORATION, PARTNERSHIP, OR OTHER ORGANIZATION IN WHICH THEY OWN OR CONTROL 5% OR MORE OF THE ENTITY. COMPLETED TRUSTEE CONFLICT OF INTEREST DISCLOSURE QUESTIONNAIRES ARE SUBMITTED DIRECTLY TO THE OFFICE OF THE

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GENERAL COUNSEL FOR REVIEW AND RESOLUTION.

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

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

USING THE EXECUTIVE COMPENSATION ANALYSIS, A THIRD-PARTY ADVISOR PREPARED A REPORT AND SUBMITTED THE REPORT TO THE UNIVERSITY'S EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES (THE "COMMITTEE") ALONG WITH CERTAIN PERFORMANCE CRITERIA. THE THIRD-PARTY ADVISOR PROVIDED THE COMMITTEE WITH A LETTER ON THE APPROPRIATENESS OF THE DECISION-MAKING PROCESS AND REASONABLENESS OF THE PROPOSED COMPENSATION.

ALL EXECUTIVE COMPENSATION IS REVIEWED AND APPROVED ANNUALLY BY THE ACADEMY'S AND THE UNIVERSITY'S EXECUTIVE COMPENSATION COMMITTEE PRIOR TO BECOMING EFFECTIVE.

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

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

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND  
NV, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI

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

THROUGH THE ACADEMY'S PUBLIC WEBSITE THE PUBLIC MAY REQUEST AND PRINT THE ACADEMY'S BY-LAWS, ARTICLES OF INCORPORATION, FORM 990, CODE OF ETHICS AND CONDUCT AND THE CURRENT AUDIT FINANCIAL STATEMENTS. THE ACADEMY WILL ALSO RESPOND TO WRITTEN REQUESTS AS WELL AS PHONE REQUESTS FOR INFORMATION FOR THOSE WITHOUT COMPUTER ACCESS. THE ACADEMY'S 990 ALSO APPEARS ON INDEPENDENT NON-PROFIT WEBSITES LIKE GUIDESTAR AND CHARITY NAVIGATOR.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PENSION ACTUARIAL ADJUSTMENT	1,261,354.
HEALTH INSURANCE RECOVERY	414,493.
TOTAL TO FORM 990, PART XI, LINE 9	1,675,847.

FORM 990, PART XII, LINE 2C:

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

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

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

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
DREXEL UNIVERSITY - 23-1352630 3201 ARCH STREET, SUITE 400 PHILADELPHIA, PA 19104	EDUCATIONAL INSTITUTION	PENNSYLVANIA	501(C)3	2	N/A		<b>X</b>

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

Schedule R (Form 990) 2022





**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?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....	X	
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	X	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

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



