

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2020

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation): Do not enter social security numbers on this form as it may be made public.

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

Form 990 Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: NATIONAL ACADEMY OF SCIENCES. Doing business as. Number and street (or P.O. box if mail is not delivered to street address): 2101 CONSTITUTION AVENUE NW. Room/suite. City or town, state or province, country, and ZIP or foreign postal code: WASHINGTON, DC 204180007

D Employer identification number: 53-0196932. E Telephone number: (202) 334-3003. G Gross receipts \$ 803,425,828

F Name and address of principal officer: MARCIA MCNUTT, 2101 CONSTITUTION AVENUE NW, WASHINGTON, DC 204180007

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3)

J Website: WWW.NAS.EDU

K Form of organization: Corporation

L Year of formation: 1863. M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE OTHE NATIONAL ACADEMY OF SCIENCES (NAS) IS DEDICATED TO THE FURTHERANCE OF SCIENCE AND ITS USE FOR THE GENERAL WELFARE.

Table with 2 columns: Description and Amount. Rows include: 2 Check this box, 3 Number of voting members (17), 4 Number of independent voting members (12), 5 Total number of individuals employed (1,201), 6 Total number of volunteers (5,700), 7a Total unrelated business revenue (-128,282), 7b Net unrelated business taxable income (23,919)

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants (258,178,179), 9 Program service revenue (6,856,570), 10 Investment income (80,524,548), 11 Other revenue (5,503,054), 12 Total revenue (351,062,351), 13 Grants and similar amounts paid (61,975,030), 14 Benefits paid (0), 15 Salaries, other compensation (136,093,308), 16a Professional fundraising fees (56,878), 16b Total fundraising expenses (3,060,887), 17 Other expenses (98,698,824), 18 Total expenses (296,824,040), 19 Revenue less expenses (54,238,311)

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets (1,553,804,321), 21 Total liabilities (266,222,110), 22 Net assets or fund balances (1,287,582,211)

Part II Signature Block

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

Sign Here: Signature of officer MARY SALMON CFO, Date 2021-11-08

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN P00847851, Firm's name GRANT THORNTON LLP, Firm's EIN 36-6055558, Firm's address 1000 WILSON BLVD SUITE 1400 ARLINGTON, VA 22209, Phone no. (703) 847-7500

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

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:

SEE SCHEDULE O

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 \$ **175,372,652** including grants of \$ **35,881,284**) (Revenue \$ **23,036**)
 PERFORMANCE IN CONNECTION WITH CONTRACTS AND GRANTS WITH THE U.S. GOVERNMENT IN ACCORDANCE WITH THE NATIONAL ACADEMY OF SCIENCES' CONGRESSIONAL CHARTER.

4b (Code:) (Expenses \$ **54,979,489** including grants of \$ **21,008,104**) (Revenue \$ **11,125,843**)
 STUDIES, PROJECTS AND OTHER SERVICES IN CONNECTION WITH PRIVATE GRANTS AND OTHER ARRANGEMENTS EXCLUSIVE OF WORK FUNDED BY THE U.S. GOVERNMENT.

4c (Code:) (Expenses \$ **8,663,855** including grants of \$ **5,085,642**) (Revenue \$ **346**)
 ENDOWMENT AND TRUST ACTIVITIES REPRESENTING SCIENTIFIC PRIZES, AWARDS, AND SUPPORT OF RESEARCH.

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

4e **Total program service expenses** **239,015,996**

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1 through 21, with sub-questions 11a-e and 12a-b. Each row has a corresponding 'Yes' and 'No' checkbox column.

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance
 Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings?	Yes	

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

Main form area containing questions 2a through 16, with various sub-questions and input fields for 'Yes', 'No', and numerical values.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included in line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, CO, FL, GA, HI, KY, MD, MA, MI, MN, NH, NJ, NM, NY, ND, OH, OK, PA, RI, TN, UT, VA, WA, WV, WI 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: LAURA DOUGLAS NAS 500 FIFTH STREET NW WASHINGTON, DC 20001 (202) 334-3003

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARCIA MCNUTT PRESIDENT	37.50 2.00	X		X				973,791	0	83,784
(2) VICTOR DZAU PRESIDENT - NAM	37.50 1.00			X				974,060	0	81,146
(3) JOHN ANDERSON PRESIDENT- NAE	37.50 2.00			X				967,241	0	82,773
(4) ROBERT ULLRICH RERF CHIEF OF RESEARCH	37.50 0.00					X		454,205	0	91,165
(5) ALINA BRENNER RERF SENIOR RESEARCHER	37.50 0.00					X		415,494	0	62,706
(6) JAMES F HINCHMAN CHIEF OPERATING OFFICER	37.50 0.00				X			407,512	0	56,850
(7) GREGORY SYMMES CHIEF PROGRAM OFFICER	37.50 0.00			X				374,929	0	74,815
(8) LEONARD KIM CHIEF INFORMATION OFFICER	37.50 0.00					X		313,265	0	94,131
(9) KENNETH FULTON EXECUTIVE DIRECTOR	37.50 1.00					X		329,067	0	69,530
(10) AUDREY MOSLEY GENERAL COUNSEL	37.50 0.00					X		323,621	0	63,008
(11) CLYDE BEHNEY EXECUTIVE DIRECTOR HMD	37.50 0.00				X			325,074	0	56,798
(12) MARY SALMON CHIEF FINANCIAL OFFICER	37.50 1.00			X				317,301	0	54,563
(13) NEIL PEDERSEN EXECUTIVE DIRECTOR TRB	37.50 0.00				X			282,501	0	53,935
(14) VAUGHAN TUREKIAN EXECUTIVE DIRECTOR PGA	37.50 0.00				X			259,382	0	75,478
(15) DIANE E GRIFFIN VICE PRESIDENT	19.00 0.00	X		X				0	0	0
(16) SUSAN R WESSLER HOME SECRETARY	19.00 0.00	X		X				0	0	0
(17) JOHN G HILDEBRAND INTERNATIONAL SECRETARY	19.00 0.00	X		X				0	0	0

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) WILLIAM H PRESS TREASURER	19.00 1.00	X		X				0	0	0
(19) NANCY C ANDREWS NAS COUNCIL MEMBER (BEG 7/01/20)	4.00 0.00	X						0	0	0
(20) RUTH DEFRIES NAS COUNCIL MEMBER (BEG 7/01/20)	4.00 0.00	X						0	0	0
(21) JOSEPH FRANCISCO NAS COUNCIL MEMBER (BEG 7/01/20)	4.00 0.00	X						0	0	0
(22) PATRICIA KUHL NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(23) S JAMES GATES JR NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(24) CAROLINE S HARWOOD NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(25) RICHARD E LENSKI NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(26) BARBARA J MEYER NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(27) THOMAS D POLLARD NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(28) GERTRUD SCHUPBACH NAS COUNCIL MEMBER (BEG 7/01/20)	4.00 0.00	X						0	0	0
(29) SEAN C SOLOMON NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(30) RUTH J WILLIAMS NAS COUNCIL MEMBER	4.00 0.00	X						0	0	0
(31) INGRID DAUBECHIES NAS COUNCIL MEMBER (END 06/30/20)	4.00 0.00	X						0	0	0
(32) SUSAN FISKE NAS COUNCIL MEMBER (END 06/30/20)	4.00 0.00	X						0	0	0
(33) EVE MARDER NAS COUNCIL MEMBER (END 06/30/20)	4.00 0.00	X						0	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							6,717,443	0		1,000,682

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 **▶ 369**

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

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
DARTMOUTH JOURNAL SVCS, 11311 MCCORMICK RD STE 620 HUNT VALLEY, MD 21031	PRINTING/FULFILLMENT	3,376,023
TEXAS AM TRANSPORTATION INSTITUTE, 3135 TAMU COLLEGE STATION, TX 77843	TRANSPORTATION STUDY	3,221,974
WSP USA INC, 1401 K STREET NW STE 701 WASHINGTON, DC 20005	TRANSPORTATION STUDY	1,950,643
VIRGINIA POLYTECHNIC INSTITUTE, 222 BURRUSS HALL BLACKSBURG, VA 24061	TRANSPORTATION STUDY	1,851,457
COMPLETE BUILDING SERVICES, 2101 WISCONSIN AVENUE NW WASHINGTON, DC 20007	FACILITIES MGMT	1,763,435

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 **▶ 143**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
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Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a	
	b Membership dues . . .	1b	2,147,418
	c Fundraising events . . .	1c	
	d Related organizations	1d	5,712,671
	e Government grants (contributions)	1e	190,546,284
	f All other contributions, gifts, grants, and similar amounts not included above	1f	59,771,806
	g Noncash contributions included in lines 1a - 1f:\$	1g	424,342
h Total. Add lines 1a-1f			258,178,179

Program Service Revenue		Business Code				
		2a ANNUAL MTG./REG. FEES	900099	6,856,570	6,856,570	
b						
c						
d						
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			6,856,570			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		10,719,303		-179,673	10,898,976	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		1,038,828			1,038,828	
	6a Gross rents	(i) Real	290,851				
		(ii) Personal					
		b Less: rental expenses	290,851				
		c Rental income or (loss)	0				
	d Net rental income or (loss)		0				
	7a Gross amount from sales of assets other than inventory	(i) Securities	506,671,126				
		(ii) Other					
		b Less: cost or other basis and sales expenses	436,865,881				
		c Gain or (loss)	69,805,245				
	d Net gain or (loss)		69,805,245			69,805,245	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
		b Less: direct expenses					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less							

returns and allowances	10a	19,187,637			
b Less: cost of goods sold	10b	15,206,745			
c Net income or (loss) from sales of inventory			3,980,892	3,980,892	
Miscellaneous Revenue	Business Code				
11a PARKING REIMBURSEMENT	812930		111,880		111,880
b ADVERTISING	900099		45,160	45,160	
c PRINTING SERVICES	323100		6,231	6,231	
d All other revenue			320,063	311,763	8,300
e Total. Add lines 11a-11d			483,334		
12 Total revenue. See instructions			351,062,351	11,149,225	-128,282
					81,863,229

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
 Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	19,334,534	19,334,534		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	37,840,044	37,840,044		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	4,800,452	4,800,452		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,501,935		5,501,935	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	98,109,118	70,957,403	25,401,701	1,750,014
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,435,888	10,446,519	1,726,778	262,591
9 Other employee benefits	12,053,792	9,535,414	2,316,298	202,080
10 Payroll taxes	7,992,575	6,654,718	1,170,492	167,365
11 Fees for services (non-employees):				
a Management				
b Legal	235,172	49,534	184,392	1,246
c Accounting	423,275	12,919	410,031	325
d Lobbying				
e Professional fundraising services. See Part IV, line 17	56,878			56,878
f Investment management fees	2,668,617		2,668,617	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	11,852,672	8,352,662	3,343,830	156,180
12 Advertising and promotion	199,179	196,314	2,865	
13 Office expenses	1,921,161	1,305,524	591,283	24,354
14 Information technology	1,866,257	1,629,915	96,292	140,050
15 Royalties				
16 Occupancy	5,263,868	3,652,673	1,571,656	39,539
17 Travel	4,962,840	4,427,381	472,934	62,525
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	27,707	27,707		
19 Conferences, conventions, and meetings	1,878,289	1,357,063	484,689	36,537
20 Interest	3,366,570		3,366,570	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,581,754	6,308,125	3,195,899	77,730
23 Insurance	893,093	326,049	567,044	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUBCONTRACTS	45,755,988	45,659,369	96,619	
b PRINTING & PUBLICATIONS	5,401,925	4,715,956	606,068	79,901
c MISCELLANEOUS	2,386,322	1,425,721	957,029	3,572
d UNRELATED BUS. INC. TAX	14,135		14,135	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	296,824,040	239,015,996	54,747,157	3,060,887
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash-non-interest-bearing	9,828,244	1	58,528,202
	2 Savings and temporary cash investments	5,689,225	2	5,817,694
	3 Pledges and grants receivable, net	20,717,767	3	19,968,411
	4 Accounts receivable, net	68,899,107	4	54,447,676
	5 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	866,063	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	789,659	8	558,188
	9 Prepaid expenses and deferred charges	11,790,193	9	6,453,416
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 253,829,739		
	b Less: accumulated depreciation	10b 113,377,557	146,613,783	10c 140,452,182
	11 Investments—publicly traded securities	748,026,097	11	763,671,056
	12 Investments—other securities. See Part IV, line 11	395,505,757	12	484,414,961
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	12,648,523	15	19,492,535
16 Total assets: Add lines 1 through 15 (must equal line 33)	1,421,374,418	16	1,553,804,321	
Liabilities	17 Accounts payable and accrued expenses	32,400,458	17	35,240,071
	18 Grants payable		18	
	19 Deferred revenue	47,238,051	19	51,361,766
	20 Tax-exempt bond liabilities	153,504,891	20	149,184,169
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	27,590,580	25	30,436,104
	26 Total liabilities. Add lines 17 through 25	260,733,980	26	266,222,110
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	125,773,112	27	145,989,336
	28 Net assets with donor restrictions	1,034,867,326	28	1,141,592,875
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,160,640,438	32	1,287,582,211
33 Total liabilities and net assets/fund balances	1,421,374,418	33	1,553,804,321	

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	351,062,351
2	Total expenses (must equal Part IX, column (A), line 25)	2	296,824,040
3	Revenue less expenses. Subtract line 2 from line 1	3	54,238,311
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,160,640,438
5	Net unrealized gains (losses) on investments	5	66,529,784
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	6,173,678
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	1,287,582,211

Part XII Financial Statements and Reporting

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

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

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990 or
990EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section
4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury

Internal Revenue Service
Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	299,919,256	275,205,501	268,443,497	278,346,510	258,178,179	1,380,092,943
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3	299,919,256	275,205,501	268,443,497	278,346,510	258,178,179	1,380,092,943
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						14,119,846
6 Public support. Subtract line 5 from line 4.						1,365,973,097

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4.	299,919,256	275,205,501	268,443,497	278,346,510	258,178,179	1,380,092,943
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,678,064	15,962,401	22,979,453	17,552,241	12,228,655	81,400,814
9 Net income from unrelated business activities, whether or not the business is regularly carried on.	171,748	357,640	0	0	23,919	553,307
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	1,841,760	1,778,940	1,799,953	1,952,015	431,943	7,804,611
11 Total support. Add lines 7 through 10						1,469,851,675
12 Gross receipts from related activities, etc. (see instructions)					12	120,488,447

13 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

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	92.930 %
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	93.180 %

- 16a 33 1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
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. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2020. 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 <input type="checkbox"/>		
b 33 1/3% support tests—2019. 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 <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	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>		
2	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>		
3a	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	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>		
c	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>		
4a	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	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>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a	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	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	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>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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>		
1		
2 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>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 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>		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):

- a** The organization satisfied the Activities Test. Complete **line 2** below.
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b** Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

3 Parent of Supported Organizations. **Answer lines 3a and 3b below.**

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in Part VI.*
- b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI. the role played by the organization in this regard.*

	Yes	No
2a		
2b		
3a		
3b		

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 Adjusted Net Income (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):	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 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 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

Current Year

1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 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 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

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

(continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	OTHER MISC REVENUE - 2016 AMOUNT: \$ 1,200,674. 2017 AMOUNT: \$ 1,221,081. 2018 AMOUNT: \$ 1,257,417. 2019 AMOUNT: \$ 1,402,286. 2020 AMOUNT: \$ 311,763. PARKING REIMBURSEMENT - 2016 AMOUNT: \$ 546,216. 2017 AMOUNT: \$ 550,801. 2018 AMOUNT: \$ 532,333. 2019 AMOUNT: \$ 532,856. 2020 AMOUNT: \$ 111,880. GOVERNMENT INTEREST - 2016 AMOUNT: \$ 94,870. 2017 AMOUNT: \$ 7,058. 2018 AMOUNT: \$ 10,203. 2019 AMOUNT: \$ 16,873. 2020 AMOUNT: \$ 8,300.

Additional Data

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Name of the organization NATIONAL ACADEMY OF SCIENCES	Employer identification number 53-0196932
--	---

Organization type (check one):

- | | |
|--------------------|---|
| Filers of: | Section: |
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)() (enter number) organization |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input type="checkbox"/> 501(c)(3) exempt private foundation |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | <input type="checkbox"/> 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number
53-0196932

Part I
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization
 NATIONAL ACADEMY OF SCIENCES

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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization
 NATIONAL ACADEMY OF SCIENCES

Employer identification number
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

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Supplemental Financial Statements

2020

Open to Public Inspection

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 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor and grantee information.

Part II Conservation Easements.

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

Form for Part II Conservation Easements. Includes checkboxes for various purposes (land for public use, natural habitat, open space, etc.), a table for 'Held at the End of the Year' with rows 2a-2d, and several text-based questions regarding monitoring, expenses, and reporting.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and a table for revenue and assets.

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

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

Part IV Escrow and Custodial Arrangements.

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

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

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	591,981,194	510,729,179	506,239,689	442,655,235	419,881,146
b Contributions	7,943,307	24,860,491	36,353,688	14,102,054	6,719,329
c Net investment earnings, gains, and losses	63,537,747	75,191,857	-12,549,155	65,052,736	34,017,585
d Grants or scholarships					
e Other expenditures for facilities and programs	20,209,064	18,800,333	19,315,043	15,570,336	17,962,825
f Administrative expenses					
g End of year balance	643,253,185	591,981,194	510,729,179	506,239,689	442,655,235

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 27.000 %
 - b** Permanent endowment ▶ 73.000 %
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		29,688,876		29,688,876
b Buildings		177,909,961	73,093,251	104,816,710
c Leasehold improvements		4,073,377	3,647,996	425,381
d Equipment		41,569,840	36,596,622	4,973,218
e Other		587,685	39,688	547,997
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				140,452,182

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) HEDGE FUNDS	331,028,911	F
(B) LONG/SHORT EQ. HDG. FUNDS	89,487,579	F
(C) PRIVATE EQUITY	63,898,471	F
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	484,414,961	

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
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (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
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (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	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	30,436,104

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

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	430,687,025
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	66,529,784
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	15,763,507
e	Add lines 2a through 2d	2e	82,293,291
3	Subtract line 2e from line 1	3	348,393,734
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	2,668,617
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	2,668,617
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	351,062,351

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	303,745,252
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	9,589,829
e	Add lines 2a through 2d	2e	9,589,829
3	Subtract line 2e from line 1	3	294,155,423
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	2,668,617
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	2,668,617
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	296,824,040

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.

Return Reference	Explanation
PART V, LINE 4:	USE OF ENDOWMENT FUNDS EARNINGS FROM THE ENDOWMENT ARE USED TO FURTHER THE EXEMPT PURPOSES OF THE ORGANIZATION.
PART X, LINE 2:	LIABILITY FOR UNCERTAIN TAX POSITION HAS FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. NAS IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE ("IRC") SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. NAS HAS PROCESSES PRESENTLY IN PLACE TO MAINTAIN ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT MAY HAVE A NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. NAS HAS DETERMINED THAT THERE ARE NO MATERIAL UNRELATED BUSINESS ACTIVITIES OR UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE ACCOMPANYING FINANCIAL STATEMENTS.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	COST OF GOODS SOLD 15,206,745. UNREALIZED LOSS ON DERIVATIVES -82,743. RENTAL EXPENSE 290,851. UNREALIZED GAIN ON CHARITABLE GIFT ANNUITIES 362,789. INVESTMENT RELATED EXPENSES -14,135.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	COST OF GOODS SOLD 15,206,745. RENTAL EXPENSE 290,851. INVESTMENT RELATED EXPENSE -14,135. RWBP ACTUARIAL VALUATION ADJ -5,893,632.

Additional Data

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Software Version:

2020

Open to Public Inspection

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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 or 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 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
(1) EAST ASIA AND THE PACIFIC	0	5	PROGRAM SERVICES	RADIATION EFFECTS RES	1,500,231
(2) CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		181,642
(3) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		1,213,580
(4) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		32,559
(5) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		583,388
(6) NORTH AMERICA	0	0	GRANTMAKING		1,750
(7) SOUTH AMERICA	0	0	GRANTMAKING		672,212
(8) SOUTH ASIA	0	0	GRANTMAKING		765,043
(9) SUB-SAHARAN AFRICA	0	0	GRANTMAKING		1,350,278
(10) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		243,468,209
(11) SUB-SAHARAN AFRICA	0	0	INVESTMENTS		11,128,852
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	5			4,950,405
b Total from continuation sheets to Part I	0	0			255,947,339
c Totals (add lines 3a and 3b)	0	5			260,897,744

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	139,764	WIRE			
(2)		SUB-SAHARAN AFRICA	RESEARCH GRANT	99,250	WIRE			
(3)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	80,000	WIRE			
(4)		SUB-SAHARAN AFRICA	RESEARCH GRANT	80,000	WIRE			
(5)		SOUTH ASIA	RESEARCH GRANT	78,758	WIRE			
(6)		SOUTH ASIA	RESEARCH GRANT	76,490	WIRE			
(7)		SOUTH ASIA	RESEARCH GRANT	74,000	WIRE			
(8)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	62,000	WIRE			
(9)		SUB-SAHARAN AFRICA	RESEARCH GRANT	59,620	WIRE			
(10)		SOUTH AMERICA	RESEARCH GRANT	54,160	WIRE			
(11)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	47,360	WIRE			
(12)		CENTRAL AMERICA AND THE CARIBBEAN	RESEARCH GRANT	42,595	WIRE			
(13)		SUB-SAHARAN AFRICA	RESEARCH GRANT	39,787	WIRE			
(14)		SOUTH ASIA	RESEARCH GRANT	32,313	WIRE			
(15)		EUROPE (INCLUDING ICELAND & GREENLAND)	RESEARCH GRANT	27,559	WIRE			
(16)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	8,239	WIRE			
(17)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	194,519	WIRE			
(18)		SOUTH ASIA	RESEARCH GRANT	159,521	WIRE			
(19)		SUB-SAHARAN AFRICA	RESEARCH GRANT	106,000	WIRE			
(20)		SUB-SAHARAN AFRICA	RESEARCH GRANT	100,360	WIRE			
(21)		SOUTH AMERICA	RESEARCH GRANT	100,000	WIRE			
(22)		SOUTH AMERICA	RESEARCH GRANT	100,000	WIRE			
(23)		CENTRAL AMERICA AND THE CARIBBEAN	RESEARCH GRANT	99,750	WIRE			
(24)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	97,693	WIRE			
(25)		SOUTH ASIA	RESEARCH GRANT	94,020	WIRE			
(26)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	92,800	WIRE			
(27)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	87,760	WIRE			
(28)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	86,079	WIRE			
(29)		SOUTH AMERICA	RESEARCH GRANT	85,848	WIRE			
(30)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	85,656	WIRE			
(31)		SOUTH AMERICA	RESEARCH GRANT	80,640	WIRE			
(32)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	80,000	WIRE			
(33)		SUB-SAHARAN AFRICA	RESEARCH GRANT	80,000	WIRE			
(34)		SOUTH AMERICA	RESEARCH GRANT	80,000	WIRE			
(35)		SOUTH ASIA	RESEARCH GRANT	79,860	WIRE			
(36)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	79,818	WIRE			
(37)		SOUTH AMERICA	RESEARCH GRANT	79,795	WIRE			
(38)		SUB-SAHARAN AFRICA	RESEARCH GRANT	79,456	WIRE			
(39)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	78,760	WIRE			
(40)		SUB-SAHARAN AFRICA	RESEARCH GRANT	78,430	WIRE			
(41)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	77,000	WIRE			
(42)		SUB-SAHARAN AFRICA	RESEARCH GRANT	75,800	WIRE			
(43)		SOUTH ASIA	RESEARCH GRANT	75,151	WIRE			
(44)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	74,000	WIRE			
(45)		SUB-SAHARAN AFRICA	RESEARCH GRANT	72,050	WIRE			
(46)		SOUTH AMERICA	RESEARCH GRANT	72,039	WIRE			
(47)		SUB-SAHARAN AFRICA	RESEARCH GRANT	70,716	WIRE			
(48)		SUB-SAHARAN AFRICA	RESEARCH GRANT	66,798	WIRE			
(49)		SUB-SAHARAN AFRICA	RESEARCH GRANT	66,500	WIRE			
(50)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	62,350	WIRE			
(51)		SUB-SAHARAN AFRICA	RESEARCH GRANT	60,615	WIRE			
(52)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	59,250	WIRE			
(53)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	58,514	WIRE			
(54)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	51,500	WIRE			
(55)		SUB-SAHARAN AFRICA	RESEARCH GRANT	50,000	WIRE			
(56)		SUB-SAHARAN AFRICA	RESEARCH GRANT	50,000	WIRE			
(57)		SUB-SAHARAN AFRICA	RESEARCH GRANT	48,642	WIRE			
(58)		SOUTH ASIA	RESEARCH GRANT	40,881	WIRE			
(59)		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	RESEARCH GRANT	39,297	WIRE			
(60)		SUB-SAHARAN AFRICA	RESEARCH GRANT	37,705	WIRE			
(61)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	33,000	WIRE			
(62)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	28,500	WIRE			
(63)		SOUTH ASIA	RESEARCH GRANT	25,000	WIRE			
(64)		SOUTH ASIA	RESEARCH GRANT	20,000	WIRE			
(65)		SOUTH AMERICA	RESEARCH GRANT	19,500	WIRE			
(66)		SUB-SAHARAN AFRICA	RESEARCH GRANT	18,549	WIRE			
(67)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	17,500	WIRE			
(68)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	16,833	WIRE			
(69)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	16,559	WIRE			
(70)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	16,500	WIRE			
(71)		SUB-SAHARAN AFRICA	RESEARCH GRANT	10,000	WIRE			
(72)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	9,080	WIRE			
(73)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	8,774	WIRE			
(74)		EAST ASIA AND THE PACIFIC	RESEARCH GRANT	8,560	WIRE			
(75)		MIDDLE EAST AND NORTH AFRICA	RESEARCH GRANT	7,600	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 16

3 Enter total number of other organizations or entities 59

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) INDIVIDUAL PRIZES & AWARDS	EAST ASIA AND THE PACIFIC	2	26,000	WIRE/ACH			
(2) INDIVIDUAL SPEAKER FEES & HONORARIA	EAST ASIA AND THE PACIFIC	4	5,000	WIRE			
(3) INDIVIDUAL PRIZES & AWARDS	EUROPE (INCLUDING ICELAND & GREENLAND)	5	5,000	WIRE/CHK			
(4) INDIVIDUAL SPEAKER FEES & HONORARIA	SOUTH ASIA	4	4,000	WIRE			
(5) INDIVIDUAL PRIZES & AWARDS	NORTH AMERICA	2	1,750	WIRE	0		
(6) INDIVIDUAL PRIZES & AWARDS	SOUTH ASIA	1	1,000	WIRE			
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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

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.

ReturnReference	Explanation
PART I, LINE 2:	MONITORING THE USE OF GRANTS AND OTHER ASSISTANCE NAS PROGRAMMATIC STAFF REVIEW GRANT PROPOSALS AND BUDGETS SUBMITTED BY RECIPIENT ORGANIZATIONS PRIOR TO AWARDING THE GRANT FUNDS. NAS POLICY IS TO COMPLY WITH RESTRICTIONS ON GRANT AWARDS TO COUNTRIES ON THE U.S. GOVERNMENT'S CURRENT LIST OF SANCTIONED COUNTRIES. RECIPIENTS ARE GENERALLY EXPECTED TO SUBMIT PROGRESS REPORTS DURING THE GRANT PERIOD.
PART I, LINE 3:	ACCOUNTING METHOD USED THE EXPENDITURES, PER REGION, ARE PRESENTED ON THE ACCRUAL BASIS OF ACCOUNTING.
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:

Software Version:

**Supplemental Information Regarding
Fundraising or Gaming Activities**

2020

**Open to Public
Inspection**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number
53-0196932

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MARTS & LUNDY INC 1200 WALL STREET WEST LYNDURST, NJ 07071	FUNDRAISING COUNSEL		No	0	56,878	0
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					56,878	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

A L, A K, A Z, A R, C A, C O, C T, D C, F L, G A, H I, K Y, M A, M D, M E, M I, M N, M S, N C, N H, N J, N M, N Y, N D, O H, O K, O R, P A, R I, S C, T N, U T, V A, W A, W V, W I

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

		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11 Net income summary. Subtract line 10 from line 3, column (d) ▶					

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
SCHEDULE G FILING	THE NATIONAL ACADEMY OF SCIENCES FILES SCHEDULE G DUE TO THE ENGAGEMENT OF A PROFESSIONAL FUNDRAISING COUNSEL, WHOSE ROLE IS LIMITED TO PROSPECT MANAGEMENT AND DOES NOT INVOLVE SOLICITING FUNDS.

Schedule I (Form 990) Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Department of the Treasury Internal Revenue Service Name of the organization NATIONAL ACADEMY OF SCIENCES Employer identification number 53-0196932

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.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows include organizations like AMERICAN OSTEOPATHIC FOUNDATION, ARIZONA STATE UNIVERSITY, AUBURN UNIVERSITY, etc.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 74
3 Enter total number of other organizations listed in the line 1 table

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) FELLOWSHIP STEPENDS	990	32,212,852			
(2) TRAVEL GRANTS	367	2,280,414			
(3) HONORARIA PRIZES	195	3,346,777			
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART II, LINE 2:	MONITORING THE USE OF GRANTS AND OTHER ASSISTANCE DISBURSEMENTS FOR GRANTS, SCHOLARSHIPS, AND FELLOWSHIPS ARE MADE IN FURTHERANCE OF THE INSTITUTION'S EXEMPT PURPOSES AND IN ACCORDANCE WITH PROCEDURES INTENDED TO CONFIRM THAT INDIVIDUALS AND ORGANIZATIONS ARE ADEQUATELY INVESTIGATED TO CONFIRM THAT THEY ARE QUALIFYING RECIPIENTS. RECIPIENTS ARE GENERALLY EXPECTED TO SUBMIT PROGRESS REPORTS DURING THE GRANT PERIOD AND TO RETURN FUNDS NOT SPENT FOR THE PURPOSE OF THE GRANT.

Additional Data

Return to Form

Software ID:
Software Version:

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

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 for instructions and the latest information.**

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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

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

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

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

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input 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 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 in 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
1a		
1b	Yes	
2		
3		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7	Yes	
8		No
9		

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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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 MARCIA MCNUTT PRESIDENT	(i)	733,340	0	240,451	52,850	30,934	1,057,575	0
	(ii)	0	0	0	0	0	0	0
2 VICTOR DZAU PRESIDENT - NAM	(i)	732,358	0	241,702	52,850	28,296	1,055,206	0
	(ii)	0	0	0	0	0	0	0
3 JOHN ANDERSON PRESIDENT- NAE	(i)	554,780	175,286	237,175	52,850	29,923	1,050,014	0
	(ii)	0	0	0	0	0	0	0
4 ROBERT ULLRICH RERF CHIEF OF RESEARCH	(i)	227,759	0	226,446	44,293	46,872	545,370	0
	(ii)	0	0	0	0	0	0	0
5 ALINA BRENNER RERF SENIOR RESEARCHER	(i)	132,950	0	282,544	18,771	43,935	478,200	0
	(ii)	0	0	0	0	0	0	0
6 JAMES F HINCHMAN CHIEF OPERATING OFFICER	(i)	364,772	0	42,740	52,850	4,000	464,362	0
	(ii)	0	0	0	0	0	0	0
7 GREGORY SYMMES CHIEF PROGRAM OFFICER	(i)	337,239	0	37,690	52,850	21,965	449,744	0
	(ii)	0	0	0	0	0	0	0
8 LEONARD KIM CHIEF INFORMATION OFFICER	(i)	284,215	0	29,050	52,850	41,281	407,396	0
	(ii)	0	0	0	0	0	0	0
9 KENNETH FULTON EXECUTIVE DIRECTOR	(i)	309,589	0	19,478	52,850	16,680	398,597	0
	(ii)	0	0	0	0	0	0	0
10 AUDREY MOSLEY GENERAL COUNSEL	(i)	312,071	0	11,550	52,850	10,158	386,629	0
	(ii)	0	0	0	0	0	0	0
11 CLYDE BEHNEY EXECUTIVE DIRECTOR HMD	(i)	313,750	0	11,324	52,850	3,948	381,872	0
	(ii)	0	0	0	0	0	0	0
12 MARY SALMON CHIEF FINANCIAL OFFICER	(i)	293,122	0	24,179	38,600	15,963	371,864	0
	(ii)	0	0	0	0	0	0	0
13 NEIL PEDERSEN EXECUTIVE DIRECTOR TRB	(i)	257,541	0	24,960	51,262	2,673	336,436	0
	(ii)	0	0	0	0	0	0	0
14 VAUGHAN TUREKIAN EXECUTIVE DIRECTOR PGA	(i)	256,990	0	2,392	36,192	39,286	334,860	0
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation
PART I, LINE 1A	HOUSING ALLOWANCE THE PRESIDENT OF THE NATIONAL ACADEMY OF SCIENCES, THE NATIONAL ACADEMY OF MEDICINE, AND THE NATIONAL ACADEMY OF ENGINEERING EACH RECEIVED A SUPPLEMENT TO SALARY FOR THE COST OF RENTAL HOUSING IN THE WASHINGTON, DC AREA FOR PERSONAL USE AND TRAVEL EXPENSES. THE ALLOWANCE IS REPORTED AS TAXABLE INCOME ON FORM W-2. TRAVEL FOR COMPANIONS NAS PROCEDURES PROVIDE FOR REIMBURSEMENT OF TRAVEL EXPENSES FOR THE SPOUSES OF THE PRESIDENTS OF NAS, NAE, AND NAM SOLELY IN CIRCUMSTANCES IN WHICH THE SPOUSE'S PRESENCE SERVES A BONA FIDE BUSINESS PURPOSE OF THE NAS AND THE EXPENSES HAVE BEEN PROPERLY SUBSTANTIATED. TRAVEL EXPENSES ARE REVIEWED EACH YEAR THROUGH A SURVEY OF THE EXECUTIVE OFFICES OF THE PRESIDENTS. TAX INDEMNIFICATION AND GROSS-UP PAYMENTS NAS PROVIDES TAX EQUALIZATION PAYMENTS FOR EMPLOYEES ON INTERNATIONAL ASSIGNMENT IN JAPAN GREATER THAN SIX MONTHS. THE OBJECTIVE OF THE NAS TAX EQUALIZATION GUIDELINES IS TO EQUALIZE THE TAX BURDEN OF EMPLOYEES ASSIGNED TO JAPAN. PART-TIME OFFICERS' COMPENSATION FOR THE VICE PRESIDENT, TREASURER, INTERNATIONAL SECRETARY AND HOME SECRETARY, TIME ESTIMATES ARE BASED ON A PERCENTAGE LEVEL OF EFFORT, WHICH RANGES BETWEEN 25% AND 50%. NAS REIMBURSES EACH PART-TIME OFFICER'S HOME INSTITUTION FOR THE APPLICABLE PERCENTAGE OF SALARY PAID BY THE HOME INSTITUTION.
PART I, LINE 7	NON-FIXED PAYMENTS CERTAIN OFFICERS, KEY, AND OTHER EMPLOYEES OF NAS RECEIVED LUMP-SUM MERIT AWARDS. MERIT AWARDS ARE DETERMINED BY A NUMBER OF VARIABLES INCLUDING BUT NOT LIMITED TO INDIVIDUAL PERFORMANCE AS WELL AS ORGANIZATION OPERATIONAL ACHIEVEMENTS. MERIT AWARDS PAYMENTS ARE REPORTED IN PART II, COLUMN B(II).

Additional Data

Return to Form

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule K
(Form 990)**

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2020

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	DISTRICT OF COLUMBIA	53-6001131	000000000	08-01-2019	57,100,000	REFUND SERIES 2008A BONDS		X		X		X
B	DISTRICT OF COLUMBIA	53-6001131	000000000	05-01-2017	46,770,000	REFUND SERIES 2009A BONDS		X		X		X
C	DISTRICT OF COLUMBIA	53-6001131	000000000	12-21-2017	52,760,000	PARTIAL REFUND SERIES 2010A BONDS		X		X		X

Part II Proceeds

	A	B	C	D	
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue	66,325,000	52,120,000	52,760,000	
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows			52,756,156	
7	Issuance costs from proceeds				
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds				
11	Other spent proceeds			844	
12	Other unspent proceeds				
13	Year of substantial completion	2002	2002	2012	
		Yes No	Yes No	Yes No	
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2019, a current refunding issue)?	X		X	X
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2019, an advance refunding issue)?		X		X
16	Has the final allocation of proceeds been made?	X		X	X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X	X

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X					
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X					

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c Are there any research agreements that may result in private business use of bond-financed property?	X							
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X							
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0.790 %						
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0.010 %						
6 Total of lines 4 and 5		0.800 %						
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X	X			
b Exception to rebate?	X		X			X		
c No rebate due?		X		X		X		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X		X			
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X			

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Return Reference	Explanation
PART II, LINE 3, COLUMNS A AND B:	PART II, LINE 3 AMOUNT REFLECTS THE TOTAL PROCEEDS FROM THE ORIGINAL BOND ISSUES, WHILE THE ISSUE PRICE IN PART I REFLECTS THE REISSUED AMOUNT PER THE FORM 8038.
PART III, LINE 3A, COLUMNS C:	NAS HAS ENTERED INTO A MANAGEMENT OR SERVICE CONTRACT, WHICH NAS BELIEVES SATISFIES THE SAFE HARBOR STANDARDS UNDER REV. PROC. 97-13.
PART III, LINE 3C, COLUMNS C:	THE NAS HAS ENTERED INTO RESEARCH AGREEMENTS, WHICH NAS BELIEVES SATISFIES THE SAFE HARBOR STANDARDS UNDER REV. PROC. 2007-47.
PART IV, LINE 2B, COLUMN A:	THE REBATE COMPUTATION WAS PERFORMED ON DECEMBER 3, 2012.
PART IV, LINE 2B, COLUMN B:	THE REBATE COMPUTATION WAS PERFORMED ON DECEMBER 3, 2012.

Additional Data

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Software ID:

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Noncash Contributions

2020

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- ▶ **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 for the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	20	424,342	SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

		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 three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?			
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?		Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?			
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.

Return Reference	Explanation
PART I, COLUMN (B):	NUMBER OF CONTRIBUTIONS THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN (B).

Additional Data

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SCHEDULE O
(Form 990 or 990-
EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2020

Open to Public Inspection

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

Return Reference	Explanation
FORM 990, PART III, LINE 1	THE NATIONAL ACADEMY OF SCIENCES (NAS) WAS FORMED UNDER A CHARTER PASSED AS AN ACT OF INCORPORATION BY THE UNITED STATES CONGRESS AND SIGNED INTO LAW ON MARCH 3, 1863. THE NAS OPERATES AS A PRIVATE MEMBERSHIP ORGANIZATION OF DISTINGUISHED SCHOLARS ENGAGED IN SCIENTIFIC, ENGINEERING, OR MEDICAL RESEARCH. NAS IS DEDICATED TO THE FURTHERANCE OF SCIENCE FOR THE GENERAL WELFARE. NAS PROVIDES ADVICE AND OTHER SERVICES TO THE U.S. GOVERNMENT AND OTHER PRIVATE SPONSORS. THE NAS IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT FOR UNRELATED BUSINESS INCOME.
FORM 990, PART VI, SECTION A, LINE 1	PART-TIME OFFICERS' COMPENSATION FOR THE VICE PRESIDENT, TREASURER, INTERNATIONAL SECRETARY AND HOME SECRETARY, TIME ESTIMATES ARE BASED ON A PERCENTAGE LEVEL OF EFFORT, WHICH RANGES BETWEEN 25% AND 50%. NAS REIMBURSES EACH PART-TIME OFFICER'S HOME INSTITUTION FOR THE APPLICABLE PERCENTAGE OF SALARY PAID BY THE HOME INSTITUTION.
FORM 990, PART VI, SECTION A, LINE 6	MEMBERS OR STOCKHOLDERS THE ORGANIZATION IS A PRIVATE MEMBERSHIP ORGANIZATION. THE NAS CONSTITUTION PROVIDES THAT THE ACADEMY SHALL CONSIST OF MEMBERS, MEMBERS EMERITI AND INTERNATIONAL ASSOCIATES. MEMBERS OF NAS ARE ELECTED BY THE MEMBERS IN RECOGNITION OF THEIR DISTINGUISHED AND CONTINUING ACHIEVEMENTS IN ORIGINAL RESEARCH. THE OFFICERS OF THE ACADEMY ARE CHOSEN FROM THE MEMBERSHIP, AND AMENDMENTS TO THE ORGANIZATION'S CONSTITUTION AND BYLAWS, AND ELECTION OF NEW MEMBERS, OFFICERS, AND COUNCIL MEMBERS REQUIRE A VOTE OF THE MEMBERS. THE OFFICERS OF THE ORGANIZATION, TOGETHER WITH TWELVE MEMBERS TO BE ELECTED, SHALL CONSTITUTE THE NATIONAL ACADEMY OF SCIENCES (NAS) COUNCIL FOR THE TRANSACTION OF SUCH BUSINESS AS MAY BE ASSIGNED TO IT BY THE CONSTITUTION, BYLAWS, OR THE MEMBERSHIP. THE NAS COUNCIL HAS GENERAL SUPERVISION OVER THE ELECTION OF THE OFFICERS OF THE ORGANIZATION, AND SHALL SET THE DATE FOR ELECTION AND APPOINTING NOMINATING COMMITTEES. THE NAS COUNCIL MAY DELEGATE ITS AUTHORITY TO APPROPRIATE OFFICIALS OF THE ORGANIZATION EXCEPT WITH RESPECT TO THOSE AUTHORITIES CONCERNING MEMBERSHIP AFFAIRS.
FORM 990, PART VI, SECTION A, LINE 7A	PLEASE SEE FORM 990, PART VI, SECTION A, LINE 6 NARRATIVE.
FORM 990, PART VI, SECTION A, LINE 7B	PLEASE SEE FORM 990, PART VI, SECTION A, LINE 6 NARRATIVE.
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS THE DRAFT 990 IS PREPARED BY THE OFFICE OF THE CHIEF FINANCIAL OFFICER. IT IS REVIEWED BY THE OFFICE OF GENERAL COUNSEL AND AN EXTERNAL TAX ADVISOR BEFORE BEING REVIEWED BY THE AUDITING COMMITTEE. THE FINAL FORM IS THEN PROVIDED TO THE NAS COUNCIL PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT ANNUALLY, THE GENERAL COUNSEL LEADS A DISCUSSION AT A MEETING OF OFFICERS AND COUNCIL MEMBERS AT WHICH THE CONFLICT OF INTEREST POLICY IS REVIEWED. OFFICERS AND COUNCIL MEMBERS ARE ASKED TO SIGN A STATEMENT THAT THEY WILL ABIDE BY THE ORGANIZATION'S CONFLICT OF INTEREST POLICIES AND PROCEDURES. OFFICERS, COUNCIL MEMBERS, AND KEY EMPLOYEES ARE ASKED TO COMPLETE AN ANNUAL QUESTIONNAIRE REGARDING CERTAIN BUSINESS TRANSACTIONS THAT COULD POTENTIALLY RESULT IN A CONFLICT OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15	PROCESS OF DETERMINING COMPENSATION DECISIONS FOR ALL DISQUALIFIED PERSONS AS DEFINED IN IRC SECTION 4958 ARE MADE ANNUALLY BY AN EXECUTIVE COMPENSATION COMMITTEE COMPOSED OF INDEPENDENT MEMBERS ON THE BASIS OF EXECUTIVE COMPENSATION COMPATIBILITY DATA, INCLUDING A MARKET COMPENSATION SURVEY CONDUCTED BY THE OFFICE OF HUMAN RESOURCES THAT REVIEWS THE COMPENSATION OF THE HEADS OF THE LEADING UNIVERSITIES AND CHIEF EXECUTIVE OFFICERS OF SIMILAR ORGANIZATIONS. THERE IS A RECORD OF THE EXECUTIVE COMPENSATION COMMITTEE'S DELIBERATIONS AND DECISIONS. COMPENSATION DECISIONS ARE MADE ANNUALLY FOR OTHER KEY AND HIGH PAID EMPLOYEES BY SENIOR STAFF ON THE BASIS OF COMPARABILITY DATA.
FORM 990, PART VI, SECTION C, LINE 19	HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC NAS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE GOVERNING DOCUMENTS AND ANNUAL FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE.
FORM 990, PART XI, LINE 9:	POST EMPLOYMENT VALUATION ADJUSTMENT 5,893,632. UNREALIZED GAIN ON CHARITABLE GIFT ANNUITIES 362,789. UNREALIZED LOSS ON DERIVATIVES -82,743.

Additional Data

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**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2020

Open to Public Inspection

- ▶ 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 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL ACADEMY OF SCIENCES

Employer identification number

53-0196932

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
(1) NAS TITLE HOLDING LLC 5635 BENT BRANCH ROAD BETHESDA, MD 20816 53-0196932	TITLE HOLDING	MD	0	80,300,144	NAS

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
(1) THE NATIONAL ACADEMIES CORPORATION 100 ACADEMY WAY IRVINE, CA 92617 94-2994279	SCI. MEETINGS	CA	501(C)(3)	LINE 12A, I	NAS	Yes	
(2) NAS RETIREE WELFARE BENEFIT PLAN TRUST 2101 CONSTITUTION AVENUE NW WASHINGTON, DC 20418 52-6976965	EMP. BENEFITS	DC	501(C)(3)	LINE 12A, I	NAS	Yes	
(3) NATIONAL ACADEMY OF ENGINEERING FUND 2101 CONSTITUTION AVENUE NW WASHINGTON, DC 20418 23-7284092	SCI. SUPPORT	DC	501(C)(3)	LINE 7	N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

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

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l	Yes	
1m		No
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r	Yes	
1s		No

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) RETIREE WELFARE BENEFIT PLAN TRUST	Q	1,164,121	CASH
(2) RETIREE WELFARE BENEFIT PLAN TRUST	R	656,595	CASH
(3) THE NATIONAL ACADEMIES CORPORATION	C	624,869	CASH
(4) THE NATIONAL ACADEMIES CORPORATION	Q	265,191	CASH
(5) NATIONAL ACADEMY OF ENGINEERING FUND	C	5,087,802	CASH

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference

Explanation

Schedule R (Form 990) 2020

Additional Data[Return to Form](#)

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