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For Paperwork Reduction Act Notice, see instructions:

0169359-00004

Form 990-T (2019)

a Amounts paid for disallowed finges. 33 Amounts paid for disallowed finges. 34 Charitable contributions (see instructions for limitation rules)	Form 990-	T (2019) NATIONAL ACADEMY OF SCIENCES	53-0196932	Page 2
Samutations	Part III	` Total Unrelated Business Taxable Income		
Samutations	32 Tot	al of unrelated business taxable income computed from all unrelated trades or businesses (see		
33 Anounts paid for disallowed fringes A Charlafable contributions (see mistructions for imitation rules) 34 Charlafable contributions (see mistructions for imitation rules) 35 Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 3 Afron the sum of lines 32 and 33		·	32	
36 Charlable contributions (see instructions for inmister nulse) 37 Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33 38 Deduction for net operating loss arising in tax years beginning before. January 1, 2018 (see instructions) 38 37 Total of unrelated business taxable income before specific deduction. Subtract line 38 from line 35. 38 Specific deduction (Generally 15.00), but see line 38 instructions for exceptions). 38 1.1 39 Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37. 39 Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37. 30 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 30 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 31 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 32 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 33 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 34 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 35 Unrelated business taxable income. Subtract line 39 by 21% (0.21). 36 Unrelated business taxable line 40 unrelated business for tax computation. Income tax on the amount on line 39 from: ☐ Tax tax and Payments. 36 Unrelated business for line 40 unrelated business for tax computation. Income tax on the amount on line 39 from: ☐ Tax tax subtract line 39 from: ☐ Tax tax subtract line 40 unrelated business from 41 unrelated busin		To the second	† 	
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Tax Computation Tax Computation Tax care corporations, Multiply line 39 by 21% (0.21),		·	30	0.
Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)			"	
Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: □ Tax rate schedule or □ Schedule D (Form 1041). ■ 44 Proxy tax. See instructions			40	
the amount on line 39 from: Tax rate schedule or Schedule D (Form 1041).	<i>/</i>	• • • • • • • • • • • • • • • • • • • •	40	
Again Agai	41 Tru		- }	
Alternative minimum tax (trusts only). 45 47 48 47 48 48 48 48 48 48 48	the	amount on line 39 from: Tax rate schedule or Schedule D (Form 1041) ▶	41	
44 Tax on Noncompliant Facility Income. See instructions 45	42 Pro	xy tax. See instructions	42	
Tax on Noncompliant Facility Income. See instructions 15	43 Alte	rnative minimum tax (trusts only)	43	
15 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies 45		· · · · · · · · · · · · · · · · · · ·	44	
Tax and Payments ### A Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116),				
b Other credits (corporations attach Form 1118; trusts attach Form 1116). d 6b b Other credits (see instructions). d Geb d Credit for prior year minimum tax (attach Form 8801 or 8827). d Total credits. Add lines 46a through 46d Subtract line 46e from line 45. Other traws Check if from			"	
b Other credits (see instructions). c General business credit. Attach Form 3800 (see instructions). d Credit for prior year minimum tax (attach Form 8801 or 8827). e Total credits. Add lines 45e through 46d 47 Subtract line 48e from line 45. Other taxes Check if from □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (attach schedule). 48 Other taxes Check if from □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (attach schedule). 49 Total tax. Add lines 47 and 48 (see instructions). 50 2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part III, column (k), line 3. 51a Payments: A 2018 overpayment credited to 2019 □ Form 455 □ Form 455 □ Form 455 □ Form 455 □ Form 451 □ F	_	· · · · · · · · · · · · · · · · · · ·		
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b 2019 estimated tax payments		· · · · · · · · · · · · · · · · · · ·	- i - i	
b 2019 estimated tax payments			*{	
Tax deposited with Form 8868, d Foreign organizations: Tax paid or withheld at source (see instructions) e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) g Other credits, adjustments, and payments: Form 4136 Total payments. Add lines 51a through 51g Total payments. Add lines 52g Total payments. Add lines 51a through 51g Total payments.			1	
d Foreign organizations: Tax paid or withheld at source (see instructions)		3		
e Backup withholding (see instructions)				
Total payments. Add lines 51a through 51g. Total payments. Add lines 51a through 51g. Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Total payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Tax due. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Total payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Total payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Total payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Total payment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Total payments. Add lines 51a through 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Add lines 51a through 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Total payments. Total payments. Add lines 51g. Total payments. Total payments. Total payments. Add				
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Form 4136 Other Total > 51g Total payments. Add lines 51a through 51g	q Oth	er credits, adjustments, and payments Form 2439		
Total payments. Add lines 51a through 51g	, L		١	
Estimated tax penalty (see instructions) Check if Form 2220 is attached. Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed. Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 55 you want. Credited to 2020 estimated tax. Toverpayment. If line 55 you want. Credited to 2020 estimated tax. Toverpayment. If line 55 you want. Credited to 2020 estimated tax. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid. Toverpayment. If line 52 is less	 52 Tot		2	52,750.
Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		· • • • • • • • • • • • • • • • • • • •	1	22,700.
Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid				
Enter the amount of line 55 you want				20 250
Enter the amount of line 55 you want	55 Ove	prpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid \dots \emptyset		52,750.
At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country here 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$ Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and bel true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this with the preparer shown the prepar	56 ∕ Ent	er the amount of line 55 you want	<u></u>	52,750.
At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country here 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and bel true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this with the preparer shown in	Part V	Statements Regarding Certain Activities and Other Information (see instructions	1 42	3,802
over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country here 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$ Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and bel true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this with the preparer shown in the pr	57 At	7.1		Yes No
FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country here 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and bel true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this with the preparer shown in the preparer show				
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Here Many Salmon 11/9/2020 70/22CFM CST with the preparer shown is	Sign		the IDC dia	hin satirie
Comprehenses profession Date Title	_	11/9/2020 /m2/2c/ffM CST		
ا مملا القاب ا		Muta	instructions)? X Yes	No No
Print/Type preparer's name Preparer's signature Date PTIN		Print/Type preparer's name Preparer's signature Date	PTIN	, , 140
Deid Check ☐ If	Paid	Check	Ш п	70E1
Prenarer			0.5.50.50	
Firm's name GRANT THORNTON LLE	• _	Firm's name GRANT THORNTON LLF		
Firm's address ▶ 1000 WILSON BLVD, SUITE 1400, ARLINGTON, VA 22209 Phone no 703-847-7500		Firm's address ► 1000 WILSON BLVD, SUITE 1400, ARLINGTON, VA 22209 Phone	_{no} 703-847-7	500

Form **990-T** (2019)

Enter here and on page 1,

Part I, line 7, column (B).

Total dividends-received deductions included in column 8.

Enter here and on page 1, Part I, line 7, column (A)

Page 4

Schedule F-Interest, Ann	uities, Royaltie	s, and R	ents F	rom Contro	lled O	rganizat	i ons (se	e instructi	ons)		
		Ex	empt C	ontrolled Org	ganizatio	ons					
Name of controlled organization	2. Employer identification numb	ן ושכ		elated income instructions)		of specified ints made	5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5		
(1)											
(2)							1				
(3)											
(4)										-	
Nonexempt Controlled Organiz	zations	······								<u> </u>	
7. Taxable Income	8 Net unrelated in (loss) (see instruc			. Total of specific payments made		includ	rt of column ed in the co ation's gros	ntrolling		Deductions directly nnected with income in column 10	
(1)						<u>*</u>					
(2)											
(3)				***							
(4)											
Totals			 1(c)(7)), (9), or (17	▶ ') Orga	Enter Part	columns 5 a here and on , line 8, colu	page 1, mn (A)	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)	
1. Description of income	2. Amount o	f income		3. Deduc directly cor (attach sch	nected		4. Set-asides (attach schedule)			5. Total deductions and set-asides (col 3 plus col 4)	
(1)							,				
(2)										-	
(3)											
(4)											
Totals ▶ Schedule I – Exploited Exe	Enter here and Part I, line 9, o	column (A)	Other T	han Advert	isina Ir	ncome (s	eee instru	uctions)		Enter here and on page 1, Part I, line 9, column (B)	
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Exp dire connec produc unre	penses ectly ted with ction of elated s income	4. Net inconfrom unrelated or business 2 minus college if a gain, or cols 5 three	ne (loss) led trade (column lumn 3) ompute	5. Gros from ac is not i	5. Gross income from activity that is not unrelated business income		able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
/4)	 		_			· · · · -					
<u>(1)</u> <u>(2)</u>	 			+	_		<u> </u>	 		 	
(3)		-		+							
(4)	 			•	-						
	Enter here and on page 1, Part I, line 10, col (A)	page 1	re and on , Part I, col (B)					1		Enter here and on page 1, Part II, line 25	
Totals ▶ Schedule J-Advertising In	come (see insti	Luctions\									
Part I Income From Per			Consc	olidated Bas	sis		-				
	T	Ī				[T		T	
1. Name of periodical	2. Gross advertising income		rect ing costs	4. Adverting an or (los 2 minus co a gain, co cols 5 three	ss) (col ol 3) If mpute	5. Circulation 6. Readershij income costs			7. Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1)				1							
(2)	<u> </u>										
(3)				1							
(4)	1									1	
Totals (carry to Part II, line (5))					· · · · · · · · · · · · · · · · · · ·						

Form **990-T** (2019)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,			Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)						
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)		

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

Form **990-T** (2019)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning ______, 2019, and ending _____

► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Name of	the	organization
---------	-----	--------------

NATIONAL ACADEMY OF SCIENCES

Employer Identification number

53-0196932

Unrelated Business Activity Code (see instructions) ▶ 32

Describe the unrelated trade or business ▶ PRINTING & FULFILLMENT SERVICES

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 46,801.				~
b	Less returns and allowances c Balance	1c	46,801.		
2	Cost of goods sold (Schedule A, line 7)	2	72,003.		
3	Gross profit Subtract line 2 from line 1c	3	-25,202.		-25,202.
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797).	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			•
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule)	12			. ==
13	Total. Combine lines 3 through 12	13	-25,202.		-25,202.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	2,366.
16	Repairs and maintenance		
17	Bad debts	1	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	l .	696.
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	_
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	6,513.
28	Total deductions. Add lines 14 through 27		9,575.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-34,777.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-34,777.

For Paperwork Reduction Act Notice, see Instructions.

Schedule M (Form 990-T) 2019

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

_ , 2019, and ending For calendar year 2019 or other tax year beginning

▶ Go to www.irs.gov/Form9907 for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name of the o	rganization
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NATIONAL ACADEMY OF SCIENCES

Employer identification number 53-0196932

Unrelated Business Activity Code (see instructions) ▶ 54 Describe the unrelated trade or business ► ADVERTISING

Part I Unrelated Trade or Business Income				(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances	Balance >	1c]
2	Cost of goods sold (Schedule A, line 7)		2			1
3	Gross profit Subtract line 2 from line 1c		3			
4a	Capital gain net income (attach Schedule D)		4a			
ь	Net gain (loss) (Form 4797, Part II, line 17) (attach Form	4797)	4b			
С	Capital loss deduction for trusts		4c			
5	Income (loss) from a partnership or an S corporatio	n (attach				
	statement)		5			
6	Rent income (Schedule C)		6			
7	Unrelated debt-financed income (Schedule E)		7			
8	Interest, annuities, royalties, and rents from a contro					
	organization (Schedule F)		8			
9	Investment income of a section 501(c)(7), (9), or (1					
	organization (Schedule G)	·	9			
10	Exploited exempt activity income (Schedule I)		10			
11	Advertising income (Schedule J) . ATCH .4		11	4,940.	1,200.	3,740.
12	Other income (See instructions, attach schedule) .		12			
13	Total. Combine lines 3 through 12		13	4,940.	1,200.	3,740.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages		2,366.
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	696.
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21Ь	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	I	
27	Other deductions (attach schedule)	27	6,513.
28	Total deductions. Add lines 14 through 27	28	9,575.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-5,835.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)		
31	Unrelated business taxable income Subtract line 30 from line 29	31	-5,835.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2019

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

ALTERNATIVE INVESTMENT INCOME

-347,361.

INCOME (LOSS) FROM PARTNERSHIPS (UBTI)

-347,361.

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

6,513.

PART II - LINE 27 - OTHER DEDUCTIONS

6,513.

ATTACHMENT :

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

6,513.

PART II - LINE 27 - OTHER DEDUCTIONS

6,513.

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SCHEDULE M - SCHEDULE J ADVERTISING INCOME REPORTED ON A SEPARATE BASIS

7 EXCESS READERSHIP COSTS	
6 READERSHIP COSTS	
5 CIRCULATION INCOME	
4 ADVERTISING GAIN OR LOSS	3,740.
3 DIRECT ADVERTISING COSTS	1,200
2 GROSS ADVERTISING INCOME	4,940.
1 NAME OF PERIODICAL	TRANSPORTATION RESEARCH BOARD

NATIONAL ACADEMY OF SCIENCES

\mathtt{ATTA}	CHMENT	5

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

6,513.

PART II - LINE 27 - OTHER DEDUCTIONS

UNRELATED TRADE OR BUSINESS: PARTNERSHIP INVESTMENT FROM K-1S FORM 990-T - NET OPERATING LOSS ARISING IN TAX YEARS BEGINNING AFTER JANUARY 1, 2018

TY ENDING	TAXABLE INCOME BEFORE NOL	NOL INCURRED	NOL UTILIZED	NOL CARRYFORWARD
12/31/2018	-	(127,438)	_	(127,438)
12/31/2019	-	(62,057)	-	(62,057)
	NOL CARRYFORWA	RD AVAILABLE AS	OF 12/31/2019	(189, 495)

ATTACHMENT	7	

UNRELATED TRADE OR BUSINESS: PRINTING & FULFILLMENT SERVICES FORM 990-T - NET OPERATING LOSS ARISING IN TAX YEARS BEGINNING AFTER JANUARY 1, 2018

TY ENDING	TAXABLE INCOME BEFORE NOL	NOL INCURRED	NOL UTILIZED	NOL CARRYFORWARD
12/31/2018	_	(44,516)	-	(44,516)
12/31/2019	-	(34,777)	-	(34,777)
	NOL CARRYFORWA	RD AVAILABLE AS	OF 12/31/2019	(79,293)

ATTACHMENT	8	

UNRELATED TRADE OR BUSINESS: ADVERTISING

FORM 990-T - NET OPERATING LOSS ARISING IN TAX YEARS BEGINNING AFTER JANUARY 1, 2018

TY ENDING	TAXABLE INCOME BEFORE NOL	NOL INCURRED	NOL UTILIZED	NOL CARRYFORWARD
12/31/2019	-	(5,835)	-	(5,835)
	NOL CARRYFORWA	RD AVAILABLE AS	OF 12/31/2019	(5,835)

CHARITABLE CONTRIBUTIONS CARRYFORWARD

FORM 990-T - PART III, LINE 34

TY ENDING	CHARITABLE CONTRIBUTIONS MADE	CHARITABLE CONTRIBUTIONS USED	CARRYFORWARD AVAILABLE FOR NEXT YEAR	REVENUE STREAM UTILIZING CARRYFORWARD	PERIOD UTILIZED
12/31/2018	15,158,604	(4,395)	15,154,209	ADVERTISING (54)	2018
12/31/2019	26,611,611	-	26,611,611	-	-
CARRYFORWAR	RD TO YEAR ENDED	12/31/2020	41,765,820		

SCHEDULE D (Form 1120)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

OMB No 1545-0123

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for Instructions and the latest information.

2019

Employer identification number 53-0196932 NATIONAL ACADEMY OF SCIENCES Yes X No Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses (See instructions.) (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (e) Subtract column (e) from the lines below or loss from Form(s) **Proceeds** Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (g) whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). Howe if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 78,814. 78,814. Short-term capital gain from installment sales from Form 6252, line 26 or 37 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 Unused capital loss carryover (attach computation) 6 78,814. 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h Part | Long-Term Capital Gains and Losses (See instructions. See instructions for how to figure the amounts to enter on (a) Adjustments to gain (h) Gain or (loss) (e) the lines below. or loss from Form(s) Subtract column (e) from **Proceeds** Cost This form may be easier to complete if you round off cents to 8949, Part II, line 2, column (d) and combine (sales price) (or other basis) whole dollars column (g) the result with column (g) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) Howe if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 136,316. 136,316. Enter gain from Form 4797, line 7 or 9 11 80,469. Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 Capital gain distributions (see instructions) 14 15 216,785. Net long-term capital gain or (loss) Combine lines 8a through 14 in column h Part III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 78,814. 16 216,785. 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. 295,599. Note: If losses exceed gains, see Capital Losses in the instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2019

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachmen

Social security number or taxpayer identification number Name(s) shown on return NATIONAL ACADEMY OF SCIENCES

53-0196932

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

[(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above
(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) (c) Date acquired Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below			(h) Gain or (loss). Subtract column (e)	
	(Mo , day, yr)	ate acquired	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
INDIR. INVEST. IN PARTNERSHIPS			78,814.				78,814
			=				
							1
						,	

						,	
2 Totals. Add the amounts in columns negative amounts) Enter each total	here and inc	lude on your					
Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C ab	•	•	78,814				78,814.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2019)

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side Social security number or taxpayer identification number NATIONAL ACADEMY OF SCIENCES 53-0196932

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions	not reported t	o you on Fon	m 1099-B				
Description of property Description of property Date acquired disp	Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e)	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
	(Mo , day, yr)	(see instructions)	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment		
INDIR. INVEST. IN PARTNERSHIPS			136,316.				136,316
				:			
2 Totals Add the amounts in columns negative amounts) Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Bo	I here and incli is checked), line	ude on your 9 (if Box E	136,316.				136,316

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2019)