

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 01/01, 2020, and ending 12/31, 20 20

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

C Name of organization AMERICAN ACADEMY OF NEUROLOGY
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
201 Chicago Avenue
 City or town, state or province, country, and ZIP or foreign postal code
Minneapolis, MN, 55415

D Employer identification number
61-1532062

E Telephone number
612-928-6100

F Name and address of principal officer: Mary Post
201 Chicago Avenue, Minneapolis, MN 55415

G Gross receipts \$ 40,403,636

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) (6) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.aan.com

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 2007

M State of legal domicile: MN

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>The American Academy of Neurology (AAN) exists for the benefit of its members, to do the things collectively that would be nearly, if not completely, impossible to do individually. (Continued on Schedule O, Statement 2)</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	<u>19</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>16</u>
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	<u>215</u>
	6	Total number of volunteers (estimate if necessary)	6	<u>1,448</u>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>678,167</u>
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	<u>86,437</u>
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	<u>5,000</u>	<u>2,000</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>38,448,067</u>	<u>39,529,429</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>1,639,630</u>	<u>771,277</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>40,149,794</u>	<u>40,390,295</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>0</u>	<u>0</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u>0</u>	<u>0</u>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>22,399,812</u>	<u>24,421,670</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>0</u>	<u>0</u>
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>0</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>14,769,990</u>	<u>14,315,591</u>
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>37,169,802</u>	<u>38,737,261</u>
19	Revenue less expenses. Subtract line 18 from line 12	<u>2,979,992</u>	<u>1,653,034</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	<u>26,791,349</u>	<u>34,221,511</u>
	22	Net assets or fund balances. Subtract line 21 from line 20	<u>18,600,440</u>	<u>24,377,568</u>
		<u>8,190,909</u>	<u>9,843,943</u>	

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 _____ Date _____
Kevin Myren, Chief Financial Officer
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:
The Academy's mission is to promote the highest quality patient-centered neurologic care and enhance member career satisfaction.

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 \$ 0 including grants of \$ 0) (Revenue \$ 0)
MEMBERSHIP: This was another record year for AAN membership recruitment and retention. Neurologists and neuroscience professionals from around the world now make up more than 36,000 AAN members, and the Academy can claim to be home to nearly 93 percent of US neurologists. Successful year-over-year recruitment and retention of members is attributed to the AAN's ongoing commitment to grow the available resources for neurologists as well as the various members of a neurology care team no matter their practice setting, career stage, or geographic location. This success also underscores that members feel the AAN provided tremendous value throughout the disruptive COVID-19 pandemic. Neurologists prize their memberships with the AAN and the AAN applied 81 cents of every dollar to member benefits. The Advanced Practice Provider membership category saw continued record growth and interest, with 1,662 members in 2020. The category has grown significantly in recent years; in 2014, there were just 228 advanced practice provider members. The AAN had another strong year with 191 approved applications for new Fellow of the AAN status in 2020. Fellow status acknowledges exemplary work and achievements in the neurosciences, the clinical practice of neurology or academic/administrative neurology, in the AAN, and in the community. To assist members during
(Continued on Schedule O, Statement 3)

4b (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
PUBLICATIONS: The publication of scientific, scholarly, and practice-related content is a vital part of the AAN's activities, and essential to the careers of our members. The AAN's publications also provide an opportunity to generate revenue that helps keep membership dues low. Founded in 1951, Neurology(R) is the official scientific journal of the AAN, and subscriptions are a benefit of membership. As the leading clinical neurology journal worldwide, Neurology is directed to physicians concerned with diseases and conditions of the brain and nervous system. José G. Merino, MD, MPhil, FAHA, FAAN, was selected to become editor-in-chief in April 2020. Major accomplishments this year include achievement of gender parity in the core editorial team and the editorial board. Neurology experienced an increase in submissions from 5,362 in 2019 to 7,548 papers in 2020; Resident & Fellow submissions increased from 815 in 2019 to 1,133 in 2020. Much of the increases can be attributed to manuscripts related to neurologic manifestations of COVID-19. The journal launched a specialty site "COVID-19" to handle additional commentaries and blog entries detailing experiences of neurologists throughout the world during the pandemic. The Neurology(R) Podcast broadcast 17 Special Podcasts on COVID-19; the podcast program enjoyed more than 976,000 downloads during 2020. International
(Continued on Schedule O, Statement 4)

4c (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
TRAINING, TOOLS and RESOURCES: Academy members and staff fervently advocated in Washington, DC, for assistance for neurologists because of the pandemic. As relief rolled out from Congress, the Academy provided members with helpful webinars and resources to understand the Small Business Paycheck Protection Program, Economic Injury Disaster Loan Program, and other opportunities. As lockdowns lifted, members needed guidance to safely reopen their neurology practices, and the AAN published webinars and articles to help show the way to safely expand in-person visits and services. For many neurologists, telemedicine became a vital tool in connecting with their patients. Telehealth was new for many of our members, and AAN staff and member volunteers quickly developed a webinar on how to set up telemedicine in practice. The recorded webinar continues to provide value as it has been viewed more than 13,600 times. When members continued to have difficulties procuring essential personal protective equipment, the AAN helped connect them with a broker through Project N95 that provided access to highly discounted masks, shields, and gowns. Prior to the onset of pandemic lockdowns, the AAN held its 18th annual Neurology on the
(Continued on Schedule O, Statement 5)

4d Other program services (Describe on Schedule O.)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses **0**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		✓
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?		✓
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	✓	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	✓	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		✓
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		✓
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		✓
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	✓	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		✓
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		✓
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		✓
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	✓	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	✓	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		✓
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	✓	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		✓
14a Did the organization maintain an office, employees, or agents outside of the United States?		✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	✓	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	✓	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I See instructions</i>		✓
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		✓
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		✓
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		✓

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>		✓
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>	✓	
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>		✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 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>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		✓
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>		✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c 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>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		✓
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
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>		✓
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		✓
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>	✓	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	✓	
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>		
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>		✓
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.	✓	

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		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 215		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	✓	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		✓

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<input checked="" type="checkbox"/>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
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?	<input checked="" type="checkbox"/>	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	<input checked="" type="checkbox"/>	
8b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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 on Schedule O		<input checked="" type="checkbox"/>

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
15b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
	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?	<input checked="" type="checkbox"/>	
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?	<input checked="" type="checkbox"/>	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► MN
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►

Kevin C Myren CPA, (612)928-6023
 201 Chicago Avenue, Minneapolis, MN 55415

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) 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			
Catherine M Rydell Chief Executive Officer Emeritus January-June	41.00 4.00			✓				571,525	0	31,721
Christine E Phelps Deputy Executive Director, AANI	13.00 35.00				✓			408,614	0	46,533
Mary E Post Chief Executive Officer March - December	54.00 4.00			✓				406,167	0	47,429
Bruce Levi Chief Legal and Strategy Officer	46.00 0.00				✓			397,043	0	46,533
Jason Kopinski Deputy Executive Director/Chief Operating Officer	29.00 14.00				✓			389,265	0	53,264
John Hutchins General Counsel	28.00 25.00				✓			294,418	0	49,347
Angela Babb Chief Communications and Membership Officer	48.00 5.00				✓			273,502	0	48,143
Timothy J Engel Chief Financial Officer January - August	26.00 11.00			✓				287,114	0	23,524
Deanna Ekholm Chief Human Resource Officer	49.00 0.00				✓			284,867	0	22,807
Derek Brandt Director Congressional Affairs	43.00 0.00					✓		191,811	0	33,323
Amy Kaloides Senior Director, Advocacy	44.00 1.00					✓		167,036	0	40,379
Kristine Fridgen Deputy Chief, CESC	2.00 44.00					✓		182,017	0	25,307
Daniel Spirn Senior Regulatory Counsel	42.00 0.00					✓		180,018	0	25,781
Christopher M Keran Senior Director, Member Insights	40.00 3.00					✓		160,783	0	39,740

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

(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			
James C Stevens MD FAAN President	15.00 15.00	✓		✓			191,908	0	0	
Christopher Becker Chief Business Innovation Officer	45.00 5.00				✓		164,479	0	13,894	
Orly Avitzur MD MBA FAAN President Elect	2.00 2.00	✓		✓			165,616	0	0	
Kevin C Myren Chief Financial Officer August - December	51.00 0.00			✓			90,877	0	9,832	
Ann H Tilton MD FAAN Vice President	1.50 1.50	✓		✓			30,000	0	0	
Gregory D Cascino MD FAAN Director	2.00 2.00	✓					5,965	0	0	
Charlene Gamaldo MD FAAN Director	1.00 1.00	✓					2,500	0	0	
Elaine C Jones MD FAAN Director	1.00 1.00	✓					1,146	0	0	
Ralph L Sacco MD FAAN Past President	1.50 1.50	✓		✓			0	0	0	
Janis Miyasaki MD MeD FAAN Treasurer	3.00 3.00	✓		✓			0	0	0	
Carlayne E Jackson MD FAAN Secretary	1.50 1.50	✓		✓			0	0	0	
Brenda Banwell MD FAAN Director	1.50 1.50	✓					0	0	0	
Sarah M Benish MD FAAN Director	1.00 1.00	✓					0	0	0	
James N Goldenberg MD FAAN Director	2.00 2.00	✓					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				
Nicholas E Johnson MD Director	2.00	✓						0	0	0	
Jonathan P Hosey MD FAAN Director	1.50 1.50	✓						0	0	0	
Shannon M Kilgore MD FAAN Director	1.50 1.50	✓						0	0	0	
Brett M Kissela MD MS FAAN Director	1.00 1.00	✓						0	0	0	
Brad C Klein MD MBA FAAN Director	2.00 0.00	✓						0	0	0	
Jose G Merino MD MPhil FAAN Director	1.00 1.00	✓						0	0	0	
Thomas R Vidic MD FAAN Director	1.50 1.50	✓						0	0	0	
1b Subtotal								4,846,671	0	557,557	
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)								4,846,671	0	557,557	

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 **▶** **55**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		✓
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>	✓	
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>		✓

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
American Academy of Neurology Institute, 201 Chicago Avenue, Minneapolis, MN 55405	Access facilities/equipment	1,663,454
Ideal Printers, 645 Olive Street, Saint Paul, MN 55130	Printing jobs	163,666
Curtis 1000, 5601 East River Rd, Fridley, MN 55432	Printing AANnews publication	164,167
Omni Shoreham Hotel, 2500 Calvert St NW, Washington, DC 20008	Hospitality Services	211,118
Medstar Georgetown University Hospital, 3800 Reservoir Rd NW 7PHC, Washington, DC 20007	Reimbursement for NJ Editor	174,000
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 ▶		13

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 0				
	c	Fundraising events	1c 0				
	d	Related organizations	1d 0				
	e	Government grants (contributions)	1e 0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 2,000				
	g	Noncash contributions included in lines 1a-1f	1g \$ 0				
	h	Total. Add lines 1a-1f ▶		2,000			
	Program Service Revenue			Business Code			
2a		<u>Publishing</u>	511120	16,402,287	15,724,120	678,167	
b		<u>Salaries and Benefits</u>	561000	10,621,551	10,621,551	0	
c		<u>Membership Dues</u>	900099	8,841,624	8,841,624	0	
d		<u>Reimbursement of Admin Expenses</u>	561000	3,398,572	3,398,572	0	
e		<u>Conferences</u>	541900	48,346	48,346	0	
f		All other program service revenue		217,049	217,049	0	
g		Total. Add lines 2a-2f ▶		39,529,429			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		771,277	771,277	0	
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	
	5	Royalties ▶		0	0	0	
	6a	Gross rents	(i) Real	13,341	0		
			(ii) Personal				
			6b	Less: rental expenses	13,341	0	
			6c	Rental income or (loss)	0	0	
	d	Net rental income or (loss) ▶		0	0	0	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	0	0		
			(ii) Other				
			7b	Less: cost or other basis and sales expenses	0	0	
			7c	Gain or (loss)	0	0	
	d	Net gain or (loss) ▶		0	0	0	
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	8a 0				
	b	Less: direct expenses	8b 0				
	c	Net income or (loss) from fundraising events ▶		0	0	0	
	9a	Gross income from gaming activities. See Part IV, line 19	9a 0				
	b	Less: direct expenses	9b 0				
c	Net income or (loss) from gaming activities ▶		0	0	0		
10a	Gross sales of inventory, less returns and allowances	10a 0					
		b	Less: cost of goods sold	10b 0			
		c	Net income or (loss) from sales of inventory ▶		0	0	0
Miscellaneous Revenue			Business Code				
	11a	-----					
	b	-----					
	c	-----					
	d	All other revenue		87,589	87,589	0	
e	Total. Add lines 11a-11d ▶		87,589				
12	Total revenue. See instructions ▶		40,390,295	39,710,128	678,167	0	

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	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	18,643,508			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,753,414			
9	Other employee benefits	2,738,913			
10	Payroll taxes	1,285,835			
11	Fees for services (nonemployees):				
a	Management	0			
b	Legal	95,961			
c	Accounting	0			
d	Lobbying	48,000			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	2,466,333			
12	Advertising and promotion	749,998			
13	Office expenses	575,012			
14	Information technology	1,335,110			
15	Royalties	0			
16	Occupancy	1,814,655			
17	Travel	464,880			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	337,121			
20	Interest	11,648			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	342,330			
23	Insurance	144,760			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	<u>Subscriptions, memberships, contributions</u>	4,379,640			
b	<u>Honoraria and Stipends</u>	1,457,913			
c	<u>Income Tax</u>	49,117			
d	<u>All other expenses</u>	43,113			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	38,737,261	0	0	0
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 X

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest-bearing	3,054,914	1	10,536,229	
	2 Savings and temporary cash investments	10,152,251	2	10,876,397	
	3 Pledges and grants receivable, net	0	3	0	
	4 Accounts receivable, net	4,077,390	4	2,309,523	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	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)	0	6	0	
	7 Notes and loans receivable, net	0	7	0	
	8 Inventories for sale or use	0	8	0	
	9 Prepaid expenses and deferred charges	443,471	9	327,874	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,651,499			
	b Less: accumulated depreciation	10b 977,102	904,373	10c	674,397
	11 Investments—publicly traded securities	8,158,950	11	9,497,091	
	12 Investments—other securities. See Part IV, line 11	0	12	0	
	13 Investments—program-related. See Part IV, line 11	0	13	0	
	14 Intangible assets	0	14	0	
	15 Other assets. See Part IV, line 11	0	15	0	
16 Total assets. Add lines 1 through 15 (must equal line 33)	26,791,349	16	34,221,511		
Liabilities	17 Accounts payable and accrued expenses	4,871,980	17	4,215,044	
	18 Grants payable	0	18	0	
	19 Deferred revenue	12,832,638	19	19,473,131	
	20 Tax-exempt bond liabilities	0	20	0	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0	
	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	0	22	0	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0	
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0	
	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	895,822	25	689,393	
	26 Total liabilities. Add lines 17 through 25	18,600,440	26	24,377,568	
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	8,190,909	27	9,843,943	
	28 Net assets with donor restrictions	0	28	0	
	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	8,190,909	32	9,843,943		
33 Total liabilities and net assets/fund balances	26,791,349	33	34,221,511		

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	40,390,295
2	Total expenses (must equal Part IX, column (A), line 25)	2	38,737,261
3	Revenue less expenses. Subtract line 2 from line 1	3	1,653,034
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,190,909
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	9,843,943

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		✓
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	✓	
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?		✓
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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

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

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

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

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

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

Name of organization AMERICAN ACADEMY OF NEUROLOGY	Employer identification number 61-1532062
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (See instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (See instructions) ▶ \$ 0
- 3 Volunteer hours for political campaign activities (See instructions) ▶ 0

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

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

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 0
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ 0
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ 0
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) BrainPAC	201 Chicago Avenue Minneapolis, MN, 55415	27-0644272	0	33,165
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization: AMERICAN ACADEMY OF NEUROLOGY; Employer identification number: 61-1532062

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 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Form for Part II Conservation Easements, including questions 1-9 and a table for lines 2a-2d regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2b.

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 make 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 program
 - 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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 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 on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a** Board designated or quasi-endowment _____ %
- b** Permanent endowment _____ %
- 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)		
3a(ii)		
3b		

b If "Yes" on line 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	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	0	0	0
d Equipment	0	1,651,499	977,102	674,397
e Other	0	0	0	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				674,397

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) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered “Yes” on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered “Yes” 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	0
(2) Lease Payable ST	23,456
(3) Lease Payable LT	23,977
(4) Deferred Compensation	641,960
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	689,393

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

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row labels (2a-2d, 4a-4b), and final totals (1, 2e, 3, 4c, 5).

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row labels (2a-2d, 4a-4b), and final totals (1, 2e, 3, 4c, 5).

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.

Schedule D, Part X, Line 2 - The Organization follows the provisions of FASB ASC 740-10-25, which requires that a tax position be recognized or derecognized based on a "more likely not" threshold. This applies to position taken or expected to be taken in a tax return. The Organization does not believe its financial statements include any uncertain tax positions. The Organization returns are subject to review and examination by Federal authorities. The tax return for 2017 through 2019 are open to examination by Federal authorities.

Series of horizontal dashed lines for providing supplemental information.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ACADEMY OF NEUROLOGY

Employer identification number

61-1532062

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) <i>Sch F, Stmt 1</i>					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			35,797

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Sub-Saharan Africa	Unrestricted education	11,257	Check	0		
(2)			Central America and Caribbean	In 2013 AAN partner	24,540	Check	0		
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities . . . ▶ 0

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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(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.

Schedule F, Part I, Line 2 - There is a committee formed specifically for the distribution and use of these funds. No reporting from recipients required in an effort to reduce administrative burden on grant recipient.

(This area contains horizontal lines for supplemental information.)

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region	Sub-Saharan Africa	0	0	11,257
Activities	Grantmaking			
Services	Unrestricted educational grant and contribution towards expenses for European Academy of Neurology teaching course in Sub-Saharan Africa Kampala, Uganda 23-26 September 2020.			
Region	Central America and the Caribbean	0	0	24,540
Activities	Grantmaking			
Services	In 2013 AAN partnered with the St. Luke Foundation to provide an opportunity for AAN members to become involved in the growing field of global neurologic care. This grant funds trips for AAN fellow, active, resident and student members. In addition, it provides funding for neurologic care including medications and imaging studies for our neediest patients.			
Total:		0	0	35,797

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

AMERICAN ACADEMY OF NEUROLOGY

Employer identification number

61-1532062

Part I Questions Regarding Compensation

	Yes	No
<p>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.</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </p>		
<p>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</p>	1b	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	2	
<p>3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>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:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	4a	<input checked="" type="checkbox"/>
<p>b Participate in or receive payment from a supplemental nonqualified retirement plan?</p>	4b	<input checked="" type="checkbox"/>
<p>c Participate in or receive payment from an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>	4c	<input checked="" type="checkbox"/>
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p>		
<p>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:</p>		
<p>a The organization?</p>	5a	
<p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>	5b	
<p>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:</p>		
<p>a The organization?</p>	6a	
<p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>	6b	
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>	7	
<p>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</p>	8	
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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	Catherine M Rydell, Chief Executive Officer Emeritus	(i) 263,659	123,184	184,683	27,682	4,040	603,248	69,725
	(ii)	0	0	0	0	0	0	0
2	Mary E Post, Chief Executive Officer	(i) 340,479	0	65,688	29,925	17,504	453,596	0
	(ii)	0	0	0	0	0	0	0
3	Christine E Phelps, Deputy Executive Director, AANI	(i) 332,413	58,454	17,747	29,925	16,608	455,147	28,152
	(ii)	0	0	0	0	0	0	0
4	Bruce Levi, Chief Legal and Strategy Officer	(i) 339,564	51,823	5,656	29,925	16,608	443,576	29,098
	(ii)	0	0	0	0	0	0	0
5	Jason Kopinski, Deputy Executive Director/Chief Operating Officer	(i) 314,617	57,831	16,817	29,925	23,339	442,529	27,529
	(ii)	0	0	0	0	0	0	0
6	John Hutchins, General Counsel	(i) 218,479	67,724	8,215	24,433	24,914	343,765	17,724
	(ii)	0	0	0	0	0	0	0
7	Angela Babb, Chief Communications and Membership Officer	(i) 221,468	42,142	9,892	24,604	23,539	321,645	19,415
	(ii)	0	0	0	0	0	0	0
8	Timothy J Engel, Chief Financial Officer	(i) 173,022	52,653	61,439	18,138	5,386	310,638	22,351
	(ii)	0	0	0	0	0	0	0
9	Deanna Ekholm, Chief Human Resource Officer	(i) 217,259	66,410	1,198	22,807	0	307,674	16,410
	(ii)	0	0	0	0	0	0	0
10	Derek Brandt, Director Congressional Affairs	(i) 174,434	10,316	7,062	19,072	14,251	225,135	10,316
	(ii)	0	0	0	0	0	0	0
11	Amy Kaloides, Senior Director, Advocacy	(i) 152,435	8,747	5,854	15,766	24,613	207,415	8,747
	(ii)	0	0	0	0	0	0	0
12	Kristine Fridgen, Deputy Chief, CESC	(i) 163,186	12,320	6,510	17,544	7,763	207,323	9,820
	(ii)	0	0	0	0	0	0	0
13	Daniel Spirn, Senior Regulatory Counsel	(i) 166,275	9,845	3,898	17,501	8,279	205,798	9,845
	(ii)	0	0	0	0	0	0	0
14	Christopher M Keran, Senior Director, Member Insights	(i) 145,576	9,125	6,083	16,201	23,539	200,524	9,125
	(ii)	0	0	0	0	0	0	0
15	James C Stevens MD FAAN, President	(i) 191,908	0	0	0	0	191,908	0
	(ii)	0	0	0	0	0	0	0
16	Christopher Becker, Chief Business Innovation Officer	(i) 74,182	35,432	54,865	8,116	5,778	178,373	20,281
	(ii)	0	0	0	0	0	0	0

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

▶ Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

AMERICAN ACADEMY OF NEUROLOGY

Employer identification number

61 1532062

Part II Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II)

(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				
Kevin C Myren, Chief Financial Officer August - December	(i)	90,308	0	569	7,067	2,765	100,709
	(ii)	0	0	0	0	0	0
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
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	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

AMERICAN ACADEMY OF NEUROLOGY

Employer identification number

61-1532062

Form 990, Part III, Line 4d - BrainPAC: Advocating for the profession of neurology and preserving access to care by patients is a core activity of the Academy. The Academy's political action committee, BrainPAC, is an effective tool to advance this mission by enabling access to get our message to lawmakers. It also helps level the playing field with other physician specialties that have PACs and compete for attention. Voluntary contributions by US members and staff are key to a successful PAC.

Form 990, Part VI, Section A, Line 2 - Filers CEO, CFO, and the Deputy Executive Director of the corporation's subsidiary, American Academy of Neurology Institute (AANI), are co-employed by both entities. Fifteen Directors of the corporation were also Board members of AANI in the tax year. Accordingly, the individuals in the enumerated posts each had a business relationship with the overlapped Directors.

Form 990, Part VI, Section A, Line 6 - The Academy's membership includes individuals who meet the requirements of the following membership classes: Senior, Student, Intern, Resident/Fellow, Business Administrators, Advance Practice Providers, Researchers, International and US Physician. Members and applicants must demonstrate ethical and professional conduct. Please see www.aan.com for details on each membership class.

Form 990, Part VI, Section A, Line 7a - All classes of membership vote for the election of one or more members of the governing body, who must be fellows or honorary or senior members whose prior classification was fellow. Eligible voting members select members of the governing body periodically as variances arise or otherwise.

Form 990, Part VI, Section A, Line 7b - The Academy's members having voting rights and accordingly have rights to elect members of the Board (and approve certain officers). Amendments to the Articles of Incorporation and Bylaws must be brought before the members to effect adoption.

Form 990, Part VI, Section B, Line 11b - The CFO performed extensive review of the draft 990 as initially prepared by AAN's staff accountant and reviewed by the Controller. The draft was reviewed by the Academy's exempt organization's tax professional. The form was then presented to the Audit Committee by the CFO and other members of the management team for the Committee's comments. The finalized 990 is brought to the Board of Directors for discussion during a regularly schedule meeting. At that time, a complete overview of the final 990 form is to be provided by the CFO and general Counsel. The form 990 is filed after this process.

Form 990, Part VI, Section B, Line 12c - The Academy operates with a conflict of interest policy covers individuals serving as officers, directors, committee members, teachers, authors, consultants as well as any other capacity with leadership responsibility as an "official" of the organization. Covered individuals are required to complete a relationship disclosure statement annually, or more frequently if changes in personal circumstances occur. The statements are reviewed and actions determined in line with the organization's hierarchy based on the individuals position and the the recommendation of General Counsel. Conflicts are handled on an individual basis. Actions taken reflect the severity of the actual/potential conflict ranging from "no action required", to an on-going monitoring with appropriate disclosures of such facts, or required withdrawal of the individual from the conflicting relationship. Conflict of interest proceedings are documented in meeting minutes or as otherwise appropriate.

Form 990, Part VI, Section B, Line 15 - The Academy's Board utilizes a Compensation Committee to set the compensation for the CEO; that Committee employs the procedures inquired here and last set of compensation set in 2020. The CEO is charged with setting compensation for the employed Officers and Key Employees and in doing so, compensation surveys are utilized. The Committee reviews comprehensive market studies every 2-3 years and will make market adjustments accordingly. Annual salary adjustments are made as performance warrants. The last market adjustment was made in 2020.

Form 990, Part VI, Section C, Line 19 - The Academy makes its governing documents, conflict of interest policy, and financial statements available to anyone on its website.

Reasonable Cause Explanations

Explanation

Form 8860 Application for Extension was filed and accepted by IRS on March 22, 2021. Filing Due November 15, 2021.

Activity Or Mission Description

Description

No matter what stage our members are in their career, or what their role is within the field of neurology, our commitment to be indispensable to our members' professional lives is evident in what we do throughout the year. We knew 2020 would bring significant change to the AAN: For the first time in 21 years, we were going to have a new chief executive officer with the April retirement of Catherine M. Rydell, CAE. To succeed her, the Board of Directors chose Mary E. Post, MBA, CAE, who had formerly worked at the AAN for 16 years in a variety of positions, culminating as deputy executive director. We also were searching for a successor for our Chief Financial Officer Tim Engel, CPA, who was scheduled to retire after 14 years with the AAN. Kevin C. Myren, CPA, was ultimately hired for the position.

First Program Service Accomplishments Description

Description

the pandemic, the Neurology Career Center at Careers.AAN.com shared a listing of employers in need of temporary, short-term physician resources to help neurologists displaced due to clinic closures or other issues. Additionally, without a physical Annual Meeting in 2020, there was no event for employers and job seekers to connect in person. The Neurology Career Center staff brainstormed a possible online solution and surveyed AAN members regarding their preferences. As a result, a new event was created within the existing Neurology Career Center software by incorporating an existing events page with Zoom breakout rooms. The new Virtual Career Fair is now a recurring Neurology Career Center event averaging 927 job views and 77 applications per event. In 2020, AAN.com saw a 37-percent growth in visitors and a 23-percent increase in sessions. Organic search remains the primary driver of traffic to the site, accounting for 58 percent of total visitors. Mobile use of AAN.com continues to rise, increasing by 47 percent in 2020. Press & Media, Online Learning, and Guidelines were the most popular areas of the site. The strength of SynapseSM Online Communities continues to grow. There were more than 21,000 AAN members belonging to one or more of the 60 Synapse open or private communities. Synapse provides a platform for AAN section members to openly share special interest and subspecialty-related information and resources with colleagues. The AAN remains dedicated to serving the needs of our members around the globe. Members outside of the United States make up 22 percent of total membership and represent 144 countries.

Second Program Service Accomplishments Description**Description**

editions of the publication include those in Argentina, Japan, India, China, Spain, and Brazil. The journal's impact factor increased to 8.770 in 2020. Neurology(R) Clinical Practice submissions increased from 753 in 2019 to 1,348 in 2020. The feature "Practice Current-An Interactive Exchange on Controversial Topics" continues to be popular, garnering responses from more than 60 countries for each of the worldwide surveys; a companion feature, "Practice Buzz," was launched in 2020 and surveys readers about contemporary issues such as work/life balance during the pandemic and diversity, equity, and inclusion. Neurology(R) Genetics, a free open access journal, continued to publish new papers, which are searchable in PubMed. The journal received its first impact factor in 2020, 3.509. Submissions increased from 156 in 2019 to 264 in 2020. Neurology(R) Neuroimmunology and Neuroinflammation, a free open access journal, continued to publish new papers, and is indexed in MEDLINE, with NLM Medical Subject Headings (MeSH) within a few weeks of publication. The journal's impact factor increased to 7.724 in 2020. Submissions increased from 462 in 2019 to 837 in 2020. Continuum: Lifelong Learning in Neurology(R), published six times a year on core subspecialty topics in neurology, has served an important role in the AAN's publications portfolio by educating practicing neurologists since 1993. Continuum was relied upon more than ever by members in 2020. Paid member circulation for Continuum(R) grew to 8,226-an increase of 3.1 percent over 2019. Total circulation, which includes nonmembers and Junior members, was 13,067, a 3.2 percent increase over the same time last year. The number of unique users completing Continuum(R) CME grew by 10 percent, and the number of tests taken increased by 14 percent. Twitter followers jumped 227 percent, from 987 to 3,230, and Facebook followers increased nearly 10 percent, from 7,794 to 8,589. Neurology Today(R), the AAN's official news source published biweekly, reported widely and broadly on the impact of COVID-19 on the field of neurology and neurologic patients in 2020, offering more than 100 articles online and in print on clinical, professionalism, wellness, and societal-impact topics related to the pandemic. Among the most popular articles were "The Spread of COVID-19: Questions Raised, Some Answered by Neuroinfectious Disease Experts" and "COVID-19: Neurologists in Italy to Colleagues in US: Look for Poorly Defined Neurologic Conditions in Patients with the Coronavirus." Coverage of COVID-19 resulted in a more than three-time uptick in the traffic to the publication website and an online landing page devoted to COVID-19 coverage. Social media followers grew, as well, with more than 47,000 followers on Facebook and nearly 14,000 on Twitter. AANnews(R), the official monthly member magazine of the Academy, is mailed to more than 28,000 US members and is posted online in the "About the AAN" area of AAN.com for international and US members to easily access. While promoting Academy events and resources in 2020, the magazine kept members informed of regulatory changes, federal legislation and advocacy opportunities, nominations of the new Board of Directors, and success stories of neurology advocates and AAN Leadership Program graduates. Brain & Life(R) magazine, published six times a year, is free to patients with neurologic disorders, their caregivers, and anyone interested in brain health. In 2020, Brain & Life mailed to more than 313,000 individuals with more than 180,000 copies sent to AAN member offices for waiting room distribution in 2020. BrainandLife.org, the companion website to the publication, saw a 118-percent increase in traffic, with more than 2.26 million sessions in 2020. Digital subscribers to the website also grew by 108 percent to 43,229. Social followers across Facebook, Twitter, and Instagram grew 19 percent to 120,136. Brain & Life en Español mails as a supplement to print issues four times a year and has a print run of 100,000 copies per issue. The number of individuals specifically opting in to receive Spanish issues with their English copies grew to 11,023 in December 2020, up 49 percent since December 2019.

Third Program Service Accomplishments Description**Description**

Hill event on February 24 in Washington, DC. Representing 48 states, 211 members participated in nearly 300 congressional visits. Advocates focused on reducing the regulatory burden of prior authorization; reducing Medicare Part D price caps to improve medication access by patients; and increasing research funding. Two other in-person advocacy events continued through online meetings. Neurology off the Hill took place over the August recess, when members of Congress were back in their home states and districts and virtually met with constituent neurologists. The second annual AAN Legislative Summit also was held virtually, instead of in Washington, DC, in September with 95 members from 47 states meeting with their Senate offices via video or conference call to urge Congress to support the implementation of the new payment structure for E/M services as proposed in the 2021 Medicare Physician Fee Schedule, as well as continuation of relaxed telehealth regulations following the end of the public health emergency. Despite the difficulties imposed by the pandemic, the AAN had a strong year advancing its legislative priorities in Washington, DC. Over the year, we sent 11 extensive AAN letters and joined 40 coalition sign-on letters to Congress, the US vice president, Centers for Medicare & Medicaid Services, and private payers. The Academy's efforts were supported by more than 2,800 US members who engaged with their lawmakers. AAN President James C. Stevens, MD, FAAN, coauthored an op-ed in MedPage Today titled "Medicare Is Doing the Right Thing on E/M Payment-But We're Not Across the Goal Line Yet." Some other accomplishments include: Reimbursement A new coding and payment structure is set to be implemented for Evaluation and Management (E/M) services on January 1, 2021, which will simplify existing documentation requirements and provide a substantial increase in reimbursement for neurologists. The Centers for Medicare & Medicaid Services (CMS) projects the overall positive impact of the new E/M structure after budget neutrality adjustments to result in a six-percent increase in reimbursement for neurologists overall, although the impacts will vary across the specialty. This positive outcome is a product of a multi-year advocacy effort that reversed a previous proposal that was projected to be highly detrimental to neurology and other cognitive specialties. We estimate the overall impact of the AAN's advocacy on this issue as resulting in an additional \$150 million annually in Medicare payments to neurologists for E/M services. Telehealth The AAN has strongly advocated for additional flexibilities related to promoting telehealth access for telehealth services. During the COVID-19 public health emergency (PHE), there have been significant advocacy wins including coverage and payment parity for medically necessary telehealth services, including telephone services. In the Medicare Physician Fee Schedule final rule, CMS is implementing several permanent flexibilities that we support associated with providing telehealth services, including additional services being added to the Medicare telehealth list, new coding and payment for an extended virtual check-in service, and modifications to direct supervision requirements. Responding to COVID-19 Immediately in response to the COVID-19 PHE, the AAN strongly advocated for improved access to personal protective equipment, financial support for practices struggling in the wake of the PHE, improved access to telehealth services, and a reduction in regulatory burdens. In addition to the telehealth changes mentioned above, there have also been numerous changes made by the Department of Health and Human Services and CMS to reduce regulatory burdens throughout the PHE, including the delay of the Appropriate Use Criteria program, modifications to the Quality Payment Program, and the relaxation of certain prior authorization requirements. The AAN also supported the allocation of funding through the provider relief fund and other financial assistance programs. Reducing Administrative Burdens The Trump administration permanently implemented changes to the Anti-kickback Statute and Stark Law to promote value-based care and improve access to Alternative Payment Models. The AAN previously submitted comments that were highly supportive of these changes. In line with AAN recommendations, CMS proposed several permanent changes to prior authorization requirements for Medicaid and CHIP managed care plans, state Medicaid and CHIP fee-for-service programs, and Qualified Health Plans (QHP) issuers on the Federally Facilitated Exchanges (FHEs). The AAN submitted comments in support of these changes and will urge the agency to extend them to Medicare Advantage and Medicare Part D plans. The AAN's award-winning patient and caregiver magazine, Brain & Life(R), and its companion website, BrainandLife.org, centralize all AAN patient education content in one location. A Spanish version, Brain & Life(R) en Español, published quarterly in 2020. Brain & Life won two Awards for Excellence in the category Interviews and Profiles, for the October/November 2019, article, "Actor Dash Mihok on How Tourette Syndrome Shaped His Career," and for Feature Writing for the August/September 2019 article, "Why MS Patients May Benefit from Aggressive Early Treatment." Midway through 2020, the AAN released a compelling compilation of heartfelt video messages from numerous celebrities who have graced the covers of Brain & Life, including musician Peter Dinklage and actors Emilia Clarke and Blair Underwood. Themselves touched by neurologic disorders, these stars inspired viewers with how they were coping with the crisis and meeting each day with strength and courage to persevere. The number of individual digital subscribers to Brain & Life more than doubled to 43,229 compared to 21,185 in 2019. With each issue of Brain & Life estimated to reach 1.6 million readers, and each quarterly copy of Brain & Life en Español shared by more than 100,000 readers, it should not be surprising that the award-winning patient magazine and its companion online website BrainandLife.org became the centerpiece of the Patient-Public Strategy Task Force recommendations that were accepted by the Board of Directors in September.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ACADEMY OF NEUROLOGY

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

61-1532062

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)					
(2)					
(3)					
(4)					
(5)					
(6)					

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) American Academy of Neurology Institute (41-0726167) 201 Chicago Avenue, Minneapolis, MN 55415	Promote and administer charitable	MN	501 (C)(3)	Line 7	American Academy of	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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	
(1)-----												
(2)-----												
(3)-----												
(4)-----												
(5)-----												
(6)-----												
(7)-----												

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
(1)-----									
(2)-----									
(3)-----									
(4)-----									
(5)-----									
(6)-----									
(7)-----									

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

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

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

	Yes	No
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)		✓

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
See Schedule R, Part VII, Statement 1			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Description of Covered Relationships and Transaction Thresholds

		Amt. involved
Name	American Academy of Neurology Institute	8,625,000
Transaction type	d	
Method of determining amt. involved	Loan guaranteed (new facility), AAN is required to co-sign (amount shown is balance as of December 31,2020)	
Name	American Academy of Neurology Institute	1,663,454
Transaction type	k	
Method of determining amt. involved	Lease related to leased facilities/equipment - FMV via independent determination as set out in resource allocation agreement.	
Name	American Academy of Neurology Institute	8,075,834
Transaction type	o	
Method of determining amt. involved	Sharing of employees. Amount is based on the fair market value.	
Name	American Academy of Neurology Institute	2,842,963
Transaction type	q	
Method of determining amt. involved	Finance, HR, IT, Marketing FMV recovered per resource allocation agreement	

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2020, or tax year beginning 01/01, 2020, and ending 12/31, 20 20

2020

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, and 8868

▶ Go to www.irs.gov/Form8453EO for the latest information.

Name of exempt organization or person subject to tax

Taxpayer identification number

AMERICAN ACADEMY OF NEUROLOGY

61-1532062

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	40,390,295
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here ▶ <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here ▶ <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	

Part II Declaration of Officer or Person Subject to Tax

8 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization or I am the person subject to tax with respect to (name of organization) AMERICAN ACADEMY OF NEUROLOGY, (EIN) 61-1532062 and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here ▶ Kevin C. Myren | 7/9/2021 ▶ Kevin Myren, Chief Financial Officer
 Signature of officer or person subject to tax Date Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature ▶ <u>Kevin C. Myren</u>	Date <u>7/9/2021</u>	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN
					Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.