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Return of Organization Exempt From Income Tax

2009

Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

For the 2009 calendar year, or tax year beginning , 2009, and ending

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Please use IRS label or print or type. See specific instructions. THE AMERICAN GEOGRAPHICAL SOCIETY OF NEW YORK 120 WALL STREET #100 NEW YORK, NY 10005-3904 | D Employer identification number 13-1623890 |
| | | E Telephone number (212) 422-5456 |
| F Name and address of principal officer Same As C Above | | G Gross receipts \$ 745,465. |
| I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions) |
| J Website: www.amergeog.org | | H(c) Group exemption number |
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other | | L Year of formation 1852 M State of legal domicile NY |

Part I Summary

| | | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: <u>To link the business, professional and scholarly worlds in the creation and application of geographical knowledge and techniques to address economic, social and environmental problems.</u> | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets. | | |
| Revenue | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 24 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 24 |
| | 5 Total number of employees (Part V, line 2a) | 5 | 4 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 0 |
| | 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| | 7b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. |
| | | | |
| Expenses | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 267,740. | 113,831. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 406,069. | 545,038. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 47,901. | 68,213. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 838. | 452. |
| | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 722,548. | 727,534. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | | |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 270,860. | 275,079. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | | |
| | b Total fundraising expenses (Part IX, column (D), line 25) | 12,218. | |
| Net Assets or Fund Balances | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) | 391,624. | 440,292. |
| | 18 Total expenses (Part IX, column (A), lines 13-17 (must equal Part IX, column (A), line 25)) | 662,484. | 715,371. |
| | 19 Revenue less expenses Subtract line 18 from line 12 | 60,064. | 12,163. |
| | 20 Total assets (Part X, line 16) | Beginning of Year | End of Year |
| | 21 Total liabilities (Part X, line 26) | 921,075. | 1,088,500. |
| 22 Net assets or fund balances Subtract line 21 from line 20 | 473,496. | 463,476. | |
| | | 447,579. | 625,024. |

Part II Signature Block

| | | |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Sign Here | 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. | |
| | Signature of officer <i>John J. McCabe</i> John J. McCabe - Treasurer | Date 11/10/10 |

| | | | | |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------|
| Paid Preparer's Use Only | Preparer's signature <i>Carmin A. Principato</i> | Date 11/10/10 | Check if self-employed <input type="checkbox"/> | Preparer's identifying number (see instructions) N/A |
| | Firm's name (or yours if self-employed), address, and ZIP + 4 Carmine A. Principato, CPA, P.C. 812 N Wood Ave. Ste 304 Linden, NJ 07036 | | EIN <input type="checkbox"/> N/A Phone no <input type="checkbox"/> (908) 290-3279 | |

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

To link the business, professional and scholarly worlds in the creation and application of geographical knowledge and techniques to address economic, social and environmental problems.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 177,567. including grants of \$) (Revenue \$)

Publications program serves to increase geographical knowledge. "Geographical Review" is a scholarly and authoritative journal serving approximately 1,500 subscribers and is published quarterly. "FOCUS" is a magazine with geographical perspectives for the general public serving approximately 2,500 subscribers.

4b (Code:) (Expenses \$ 110,427. including grants of \$) (Revenue \$)

Contracted Projects: Coordinated field-based geographic data collection, research, and analysis in support of the Foreign Military Studies Office to document changing property ownership. Organized focus group workshops for major map producing organizations and GIS vendors, aimed at the promulgation of a proposed standard for cartographic symbolization of land mines, mine fields, and mine action activities.

4c (Code:) (Expenses \$ 67,533. including grants of \$) (Revenue \$)

Membership Program: provides approximately 800 members with an informational newsletter 3 times a year. In addition, members are invited to attend special events and ceremonies that increase geographical knowledge.

4d Other program services (Describe in Schedule O.)

See Schedule O

(Expenses \$ 173,544. including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 529,071.

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)? If 'Yes,' complete Schedule A | X | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | | X |
| 4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | | X |
| 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III | | |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | X | |
| 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV | | X |
| 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | X | |
| 11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | X | |
| • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI | | |
| • 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? If 'Yes,' complete Schedule D, Part VII | | |
| • 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? If 'Yes,' complete Schedule D, Part VIII | | |
| • 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? If 'Yes,' complete Schedule D, Part IX | | |
| • Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | | |
| • 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? If 'Yes,' complete Schedule D, Part X | | |
| 12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | X | |
| 12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional | Yes | No |
| | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I | | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II | | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III | | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I | | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | | X |
| 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | | X |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II | | X |
| 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and II | | X |
| 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J | | X |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25 | | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | | |
| 25a Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I | | X |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II | X | |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III | | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | | X |
| b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | | X |
| c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 | | X |
| 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 | | X |
| 36 Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | X | |

BAA

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

| | | Yes | No |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a | Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. | 5 | |
| 1b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 0 | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | X |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. | 4 | |
| 2b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to file this return. (see instructions) | X | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | X |
| 3b | If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in 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)? | | X |
| b | If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | X |
| 5b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | X |
| 5c | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | | |
| 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? | | X |
| 6b | If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 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? | | X |
| 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? | | X |
| d | If 'Yes,' indicate the number of Forms 8282 filed during the year. | 7d | |
| e | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | X |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| a | Did the organization make any taxable distributions under section 4966? | | X |
| b | Did the organization make any distribution to a donor, donor advisor, or related person? | | X |
| 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 other 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) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| b | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. | 12b | |

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

Section A. Governing Body and Management

| | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a Enter the number of voting members of the governing body | 24 | |
| 1b Enter the number of voting members that are independent | 24 | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? | | X |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | | X |
| 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | | X |
| 5 Did the organization become aware during the year of a material diversion of the organization's assets? | | X |
| 6 Does the organization have members or stockholders? | | X |
| 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | | X |
| 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a The governing body? | X | |
| b Each committee with authority to act on behalf of the governing body? | | X |
| 9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O | | X |

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

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

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed: NY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► AMERICAN GEOGRAPHICAL SOCIETY 120 WALL STREET NEW YORK NY 10005-3904 (212) 422-5456

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (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 | | | |
| WILLIAM P. DOYLE President Emeri | 1 | | | | | | | 0. | 0. | 0. |
| JOHN E. GOULD Chrmn/Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| JOHN J. MCCABE Treas/Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| ALEXANDER B. MURPHY VP/Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| JEROME E. DOBSON Pres/Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| MARIE D. PRICE Asst Secretary | 1 | X | | X | | | | 0. | 0. | 0. |
| JOHN W. FRAZIER Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| FREDERICK E NELSON Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| JOHN NOBLE WILFORD Sec/Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| DOUGLAS J SHERMAN Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| RICKIE SANDERS ouncilor | 1 | X | | | | | | 0. | 0. | 0. |
| CHRISTOPHER A DUNCAN Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| CLIFTON W. PANNELL Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| SUSAN W. HARDWICK Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| DAVID J. KEELING Councilor | 1 | X | | X | | | | 0. | 0. | 0. |
| H. GREGORY SMITH Councilor | 1 | X | | | | | | 0. | 0. | 0. |
| DEBORAH E. POPPER Councilor | 1 | X | | X | | | | 0. | 0. | 0. |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (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 |
|------------------------------------|-------------------------------|----------------------------------------|--|--|---|--|--|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| GILBERT HETHERWICK Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| PATRICK H. O'NEILL Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| DAVA SOBEL Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| ERWIN LEVOLD Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| PAUL L. CARTTAR Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| RICHARD A MARSTON Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| KAVITA K PANDIT Counselor | 1 | X | | | | | | 0. | 0. | 0. |
| MARY LYNNE BIRD Executive Direc | 35 | | | | X | | | 84,220. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Total | | | | | | | | 84,220. | 0. | 0. |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

| | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

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.

| (A) Name and business address | (B) Description of Services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------|----------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------|
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | 1a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 113,831. | | | | |
| | g Noncash contribns included in lns 1a-1f. | \$ | | | | |
| h Total. Add lines 1a-1f | | | 113,831. | | | |
| PROGRAM SERVICE REVENUE | | Business Code | | | | |
| | 2a PUBLICATIONS PROGRAM | 541900 | 375,720. | 375,720. | | |
| | b CONTRACTED PROJECTS | 541900 | 103,871. | 103,871. | | |
| | c PERMISSIONS & ROYALTIES | 541900 | 36,503. | 36,503. | | |
| | d Membership Dues & Assessments | 541900 | 20,544. | 20,544. | | |
| | e EDUCATIONAL TRAVEL PROG | 541900 | 8,400. | 8,400. | | |
| | f All other program service revenue | | | | | |
| g Total. Add lines 2a-2f | | | 545,038. | | | |
| OTHER REVENUE | 3 Investment income (including dividends, interest and other similar amounts) | | 52,682. | | | 52,682. |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | 6a Gross Rents | (i) Real (ii) Personal | | | | |
| | b Less rental expenses | | | | | |
| | c Rental income or (loss) | | | | | |
| | d Net rental income or (loss) | | | | | |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities (ii) Other | | | | |
| | b Less cost or other basis and sales expenses | | | | | |
| | c Gain or (loss) | | | | | |
| | d Net gain or (loss) | | 15,531. | 15,531. | | |
| | 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | a | | | | |
| | b Less direct expenses | b | | | | |
| | c Net income or (loss) from fundraising events | | | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 | a | | | | |
| | b Less direct expenses | b | | | | |
| | c Net income or (loss) from gaming activities | | | | | |
| 10a Gross sales of inventory, less returns and allowances | a | | | | | |
| b Less cost of goods sold | b | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11a Miscellaneous income | 541900 | 452. | 452. | | | |
| b | | | | | | |
| c | | | | | | |
| d All other revenue | | | | | | |
| e Total. Add lines 11a-11d | | | 452. | | | |
| 12 Total revenue. See instructions | | | 727,534. | 561,021. | 0. | 52,682. |

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) but are not required to complete columns (B), (C), and (D).

| <i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i> | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 84,220. | 49,261. | 32,029. | 2,930. |
| 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. | 0. | 0. | 0. |
| 7 Other salaries and wages | 137,793. | 80,596. | 52,403. | 4,794. |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 33,976. | 19,873. | 12,921. | 1,182. |
| 10 Payroll taxes | 19,090. | 11,166. | 7,260. | 664. |
| 11 Fees for services (non-employees) | | | | |
| a Management | | | | |
| b Legal | 550. | 550. | | |
| c Accounting | 18,300. | | 18,300. | |
| d Lobbying | | | | |
| e Prof fundraising svcs. See Part IV, ln 17 | | | | |
| f Investment management fees | | | | |
| g Other | | | | |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 4,335. | 3,381. | 954. | |
| 14 Information technology | 5,097. | 3,914. | 1,183. | |
| 15 Royalties | | | | |
| 16 Occupancy | 83,806. | 65,760. | 18,046. | |
| 17 Travel | 77,409. | 73,551. | 3,858. | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | 15,128. | 11,619. | 3,509. | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | | | | |
| 23 Insurance | 21,648. | 16,625. | 5,023. | |
| 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) | | | | |
| a <u>Printing and Publications</u> | 69,661. | 66,783. | 230. | 2,648. |
| b <u>Postage and Shipping</u> | 41,110. | 36,906. | 4,204. | |
| c <u>OUTSIDE SERVICE</u> | 40,914. | 40,803. | 111. | |
| d <u>MISCELLANEOUS</u> | 35,871. | 31,096. | 4,775. | |
| e <u>EQUIPMENT RENTAL</u> | 22,380. | 17,187. | 5,193. | |
| f All other expenses | 4,083. | | 4,083. | |
| 25 Total functional expenses Add lines 1 through 24f | 715,371. | 529,071. | 174,082. | 12,218. |
| 26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

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Form 990 (2009)

Part X Balance Sheet

| | | (A) Beginning of year | | (B) End of year |
|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------|
| ASSETS | 1 Cash – non-interest-bearing | 82,521. | 1 | 90,335. |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | 39,300. | 3 | 41,204. |
| | 4 Accounts receivable, net | 2,480. | 4 | |
| | 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | | 9 | |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 44,521. | | |
| | b Less accumulated depreciation | 10b 41,021. | 10c 3,500. | 3,500. |
| | 11 Investments – publicly-traded securities | | 11 | |
| | 12 Investments – other securities. See Part IV, line 11 | 783,637. | 12 | 943,824. |
| | 13 Investments – program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 9,637. | 15 | 9,637. |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 921,075. | 16 | 1,088,500. | |
| LIABILITIES | 17 Accounts payable and accrued expenses | 213,241. | 17 | 369,496. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 207,695. | 19 | 54,940. |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | 12,000. | 22 | 12,000. |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities. Complete Part X of Schedule D | 40,560. | 25 | 27,040. |
| | 26 Total liabilities. Add lines 17 through 25 | 473,496. | 26 | 463,476. |
| | NET ASSETS OR FUND BALANCES | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34. | | |
| 27 Unrestricted net assets | | -814,454. | 27 | -724,914. |
| 28 Temporarily restricted net assets | | | 28 | 15,000. |
| 29 Permanently restricted net assets | | 1,262,033. | 29 | 1,334,938. |
| Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| 30 Capital stock or trust principal, or current funds | | | 30 | |
| 31 Paid-in or capital surplus, or land, building, and equipment fund | | | 31 | |
| 32 Retained earnings, endowment, accumulated income, or other funds | | | 32 | |
| 33 Total net assets or fund balances. | | 447,579. | 33 | 625,024. |
| 34 Total liabilities and net assets/fund balances. | | 921,075. | 34 | 1,088,500. |

BAA

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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?

b Were the organization's financial statements audited by an independent accountant?

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

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 in Schedule O and describe any steps taken to undergo such audits.

| | Yes | No |
|----|-----|----|
| | | |
| 2a | | X |
| 2b | X | |
| 2c | | X |
| | | |
| 3a | | X |
| 3b | | |

BAA

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK**

Employer identification number
13-1623890

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

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

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

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

| | Yes | No |
|-----------|-----|----|
| 11g (i) | | |
| 11g (ii) | | |
| 11g (iii) | | |

h Provide the following information about the supported organizations

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

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

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.) | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. | | | | | | |
| 4 Total. Add lines 1-through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4 | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|
| 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2008 Schedule A, Part II, line 14 | 15 | % |
| 16a 33-1/3 support test— 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/> | | |
| b 33-1/3 support test— 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/> | | |
| 17a 10%-facts-and-circumstances test— 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/> | | |
| b 10%-facts-and-circumstances test— 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/> | | |

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Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

| Calendar year (or fiscal yr beginning in) ▶ | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|------------|
| 1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.) | 123,659. | 107,875. | 121,614. | 292,504. | 132,471. | 778,123. |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose | 344,776. | 447,634. | 478,860. | 402,748. | 524,814. | 2,198,832. |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | 0. |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 6 Total. Add lines 1 through 5 | 468,435. | 555,509. | 600,474. | 695,252. | 657,285. | 2,976,955. |
| 7a Amounts included on lines 1, 2, 3 received from disqualified persons | 22,930. | 22,773. | 33,029. | 19,886. | 26,103. | 124,721. |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year | 4,739. | 0. | 0. | 162,076. | 0. | 166,815. |
| c Add lines 7a and 7b | 27,669. | 22,773. | 33,029. | 181,962. | 26,103. | 291,536. |
| 8 Public support (Subtract line 7c from line 6) | | | | | | 2,685,419. |

Section B. Total Support

| Calendar year (or fiscal yr beginning in) ▶ | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|------------|
| 9 Amounts from line 6 | 468,435. | 555,509. | 600,474. | 695,252. | 657,285. | 2,976,955. |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 57,676. | 60,481. | 66,145. | 59,333. | 52,682. | 296,317. |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | 0. |
| c Add lines 10a and 10b | 57,676. | 60,481. | 66,145. | 59,333. | 52,682. | 296,317. |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | 0. |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | 0. |
| 13 Total support. (Add lines 9, 10c, 11, and 12) | | | | | | 3,273,272. |

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

Section C. Computation of Public Support Percentage

| | | |
|-------------------------------------------------------------------------------------------|----|--------|
| 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) | 15 | 82.0 % |
| 16 Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | 79.5 % |

Section D. Computation of Investment Income Percentage

| | | |
|------------------------------------------------------------------------------------------------|----|--------|
| 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) | 17 | 9.1 % |
| 18 Investment income percentage from 2008 Schedule A, Part III, line 17 | 18 | 10.2 % |

19a 33-1/3 support tests— 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☒

b 33-1/3 support tests— 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

[illegible]

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

- **Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**
► **Attach to Form 990. ► See separate instructions**

OMB No 1545-0047

2009

**Open to Public
Inspection**

Employer identification number

THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK

13-1623890

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

| | (a) Donor advised funds | (b) Funds and other accounts |
|--------------------------------------------|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

| | |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of certified historic structure |
| <input type="checkbox"/> Preservation of open space | |

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

| | Held at the End of the Year |
|--------------------------------------------------------------------------------------|-----------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06 | 2d |

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

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1 a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. See Part XIV

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☒ Public exhibition

d ☐ Loan or exchange programs

b ☒ Scholarly research

e ☐ Other

c ☒ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV See Part XIV

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 organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

| | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 1,262,033. | 1,430,841. | | | |
| b Contributions | 1,904. | 32,398. | | | |
| c Net Investment earnings, gains, and losses | 71,001. | -201,206. | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 1,334,938. | 1,262,033. | | | |

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ %

b Permanent endowment ▶ 100.00 %

c Term endowment ▶ %

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

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

| | Yes | No |
|--------|-----|----|
| 3a(i) | X | |
| 3a(ii) | | X |
| 3b | | |

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

See Part XIV

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated Depreciation | (d) Book Value |
|---------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | 3,500. | | | 3,500. |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | 41,021. | 41,021. | 0. |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) | | | | 3,500. |

BAA

Schedule D (Form 990) 2009

Part VII Investments—Other Securities 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 |
|----------------------------------------------------------------------------|----------------|-------------------------------------------------------------|
| Financial derivatives | | |
| Closely-held equity interests | | |
| Other <u>See attached schedule</u> | 943,824. | End of Year Market Value |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) ▶ | 943,824. | |

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|----------------------------------------------------------------------------|----------------|-------------------------------------------------------------|
| | | |
| | | |
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| | | |
| | | |
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| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990, Part X, Col (B) line 13.) ▶ | | |

Part IX Other Assets (See Form 990, Part X, line 15) N/A

| (a) Description | (b) Book value |
|----------------------------------------------------------------------------|----------------|
| | |
| | |
| | |
| | |
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| | |
| | |
| | |
| | |
| | |
| Total. (Column (b) must equal Form 990, Part X, col (B), line 15) ▶ | |

Part X Other Liabilities (See Form 990, Part X, line 25)

| (a) Description of Liability | (b) Amount |
|----------------------------------------------------------------------------|------------|
| Federal Income Taxes | |
| DEFERRED RENT OBLIGATION | 27,040. |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ | 27,040. |

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

| | | |
|----|------------------------------------------------------------------------------------------|----------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 727,534. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 715,371. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 12,163. |
| 4 | Net unrealized gains (losses) on investments | 165,281. |
| 5 | Donated services and use of facilities | |
| 6 | Investment expenses | |
| 7 | Prior period adjustments | |
| 8 | Other (Describe in Part XIV) | |
| 9 | Total adjustments (net). Add lines 4 through 8 | 165,281. |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 177,444. |

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | |
|---|---------------------------------------------------------------------------------|----|----------|
| 1 | Total revenue, gains, and other support per audited financial statements. | 1 | 888,732. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | 2a | 165,281. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIV) | 2d | |
| e | Add lines 2a through 2d | 2e | 165,281. |
| 3 | Subtract line 2e from line 1 | 3 | 723,451. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investments expenses not included on Form 990, Part VIII, line 7b | 4a | 4,083. |
| b | Other (Describe in Part XIV) | 4b | |
| c | Add lines 4a and 4b | 4c | 4,083. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 727,534. |

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | |
|---|----------------------------------------------------------------------------------|----|----------|
| 1 | Total expenses and losses per audited financial statements | 1 | 711,288. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIV) | 2d | |
| e | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 711,288. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investments expenses not included on Form 990, Part VIII, line 7b | 4a | 4,083. |
| b | Other (Describe in Part XIV) | 4b | |
| c | Add lines 4a and 4b | 4c | 4,083. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 715,371. |

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part III, Line 1a - F/S Footnote For Art, Treasures, Etc.

The archives of the American Geographical Society contain material dating back to 1851, the year of the society's founding. While the archives, which are held on the society's premises, are primarily a comprehensive institutional record, with documents related to the wide range of the society's activities, they hold other treasures as well.

Part XIV Supplemental Information (continued)**Part III, Line 4 - Description Of Organization's Collections And How Furthers Exempt Purpose**

The archives of the American Geographical Society contain material dating back to 1851, the year of the society's founding. While the archives, which are held on the society's premises, are primarily a comprehensive institutional record, with documents related to the wide range of the society's activities, they hold other treasures as well.

These include, among other things, a stunning array of diaries and notebooks from noteworthy explorers. Included in this company are Hudson Stuck's journal of his Mt. Denali ascent; Gerald McKiernan's diary of five years of travel in southern Africa, 1874-1879; the Fanning Collection, which comprises the notebooks and correspondence having to do with Edmund Fanning's exploration in the South Seas, 1799-1840; and John F. Steward's diary of the second Powell Colorado River Expedition.

Not surprisingly, the society's archives contain a wealth of polar exploration materials. A small sampling includes notebooks, diaries, and original manuscripts of Sir Hubert Wilkins; the log of Lincoln Ellsworth's Graf Zeppelin flight to the Arctic in 1931, and many other items from his Arctic travels; Arctic memorabilia of Robert E. Peary; diaries of the Arctic explorer Vilhjalmar Stefanson; and correspondence regarding the scientific results of the challenger Expedition of 1872-1876.

In addition, the archive houses a fine selection of artifacts such as the Explorer & Fliers Globe; a flag carried by Richard E. Byrd on his November, 1929 flight to the South Pole; and correspondence from the likes of David Livingstone, John Wesley Powell, Lawrence of Arabia, and the Roosevelts.

The society maintains these archives for the use of scholars. They are welcome to work in the archives by appointment.

Part XIV Supplemental Information (continued)**Part V, Line 4 - Intended Uses Of Endowment Fund**

Income and appreciation are for general unrestricted use, awards and medals program,
library and archives program and publications program.

Part XIV. Supplemental Information *(continued)*

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK**

Employer identification number
13-1623890

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

| 1 | (a) Name of disqualified person | (b) Description of transaction | (c) Corrected? | |
|---|---------------------------------|--------------------------------|----------------|----|
| | | | Yes | No |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

| (a) Name of interested person and purpose | (b) Loan to or from the organization? | | (c) Original principal amount | (d) Balance due | (e) In default? | | (f) Approved by board or committee? | | (g) Written agreement? | |
|-------------------------------------------|---------------------------------------|------|-------------------------------|-----------------|-----------------|----|-------------------------------------|----|------------------------|----|
| | To | From | | | Yes | No | Yes | No | Yes | No |
| Charles Brush | X | | 10,000. | 10,000. | | X | X | | X | |
| Working capital | | | | | | | | | | |
| Richard Nolte | X | | 10,000. | 2,000. | | X | X | | X | |
| Working capital | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total | | | | ▶ \$ 12,000. | | | | | | |

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount and type of assistance |
|-------------------------------|-----------------------------------------------------------------|-----------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction \$ | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|-----------------------------------------------------------------|------------------------------|--------------------------------|-----------------------------------------|----|
| | | | | Yes | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK**

Employer identification number
13-1623890

Form 990, Part III, Line 4d - Other Program Services Description

Library and archives program assists with the maintenance and preservation of one of the largest geographical research libraries. In addition, preservation and maintenance of the AGS archives. These archives are made available to the general public for research purposes. (Expenses \$49,817)

Awards and medals program encourages and recognizes scholarship and research in geography. The program increases public awareness of certain achievements. (Expenses \$38,063)

Educational travel program serves individuals who desire an enhanced experience when visiting different places around the world. An eminent geographer contributes his expertise of a selected location, thereby increasing the geographical knowledge of the travelers. (Expenses \$36,584)

Service to Business and Education program provides career information to students and educators, assistance with improving geography education in grades K-12, presentations to the business community designed to provide awareness of geographical perspectives and research services. (Expenses \$34,289)

Other Programs (Expenses \$8,507)

Exploration program establishes grants to individuals and institutions for geographic exploratory projects: terrestrial, ocean, Aquaterra, atmospheres, inner earth, and planetary. (Expenses \$6,284)

Name of the organization THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK

Employer identification number
13-1623890

Form 990, Part VI, Line 11 - Form 990 Review Process

The Organization's Treasurer, Executive Director and Controller each reviews Form
990 prior to filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Councilors affirm annually.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Documents made available upon request

Name of the organization THE AMERICAN GEOGRAPHICAL SOCIETY
OF NEW YORK

Employer identification number
13-1623890

American Geographical Society
 EIN: 13-1623890
 December 31, 2009
 Statement A

| | | | | | | December 31, 2009 | | |
|------------|--------------------------------|----------|----------|---------|------------|-------------------|------------|----------------|
| No. of | | Date | Date | Cost | | Market Value | | Unrealized |
| Share/Unit | Security Description | Acquired | Sold/Mat | Unit | Total | Unit | Total | Appreciation |
| | | | | | | | | (Depreciation) |
| 500 00 | Citigroup Capital 6% | 03/05/03 | | 25 364 | 12,682 16 | 18 270 | 9,135 00 | (3,547 16) |
| 500 00 | Citigroup Capital 6% | 11/19/03 | | 25 475 | 12,737 41 | 18 270 | 9,135 00 | (3,602 41) |
| 500 00 | Citigroup Capital 7 25% | 08/15/07 | | 25 000 | 12,500 00 | 20 400 | 10,200 00 | (2,300 00) |
| 1000 00 | Ford Motor Credit 7 3/8% | 06/21/02 | | 25 258 | 25,258 32 | 20 800 | 20,800 00 | (4,458 32) |
| 50000 00 | Ford Motor Credit 7 875% | 11/20/06 | | 1 032 | 51,576 81 | 1 015 | 50,755 35 | (821 46) |
| 500 00 | GE 6 10% | 11/15/02 | | 25 000 | 12,500 00 | 23 980 | 11,990 00 | (510 00) |
| 500 00 | GE 6 10% | 01/31/03 | | 26 171 | 13,085 71 | 23 980 | 11,990 00 | (1,095 71) |
| 25000 00 | GMAC Smartnotes semi 6 750% | 12/01/04 | | 100 884 | 25,220 92 | 94 985 | 23,746 25 | (1,474 67) |
| 50000 00 | GMAC Smartnotes semi 8 000% | 07/26/05 | | 100 013 | 50,006 50 | 99 348 | 49,674 00 | (332 50) |
| 500 00 | JPM Chase 6 875% | 11/30/09 | | 25 168 | 12,584 12 | 25 250 | 12,625 00 | 40 88 |
| 500 00 | MBNA Capital 8 125% | 08/19/02 | | 25 038 | 12,519 07 | 24 443 | 12,221 50 | (297 57) |
| 400 00 | MS CAP Trust 6 45% | 05/23/07 | | 25 126 | 10,050 53 | 21 450 | 8,580 00 | (1,470 53) |
| 500 00 | BAC CAP Trust 5 875% | 05/05/03 | | 25 000 | 12,500 00 | 19 021 | 9,510 50 | (2,989 50) |
| 250 00 | Bank of America Corp | 02/01/07 | | 52 156 | 13,039 04 | 15 060 | 3,765 00 | (9,274 04) |
| 100 00 | BP Plc | 07/31/03 | | 42 405 | 4,240 50 | 57 970 | 5,797 00 | 1,556 50 |
| 300 00 | Coca Cola Co | 09/19/07 | | 56 527 | 16,958 05 | 57 000 | 17,100 00 | 141 95 |
| 400 00 | Dow Chemical | 03/22/04 | | 39 975 | 15,990 13 | 27 630 | 11,052 00 | (4,938 13) |
| 800 00 | Ferrellgas Partners LP | 10/05/04 | | 22 198 | 17,758 06 | 21 130 | 16,904 00 | (854 06) |
| 200 00 | Ferrellgas Partners LP | 11/04/04 | | 21 501 | 4,300 23 | 21 130 | 4,226 00 | (74 23) |
| 400 00 | Genl Electric Co | 06/20/01 | | 50 099 | 20,039 55 | 15 130 | 6,052 00 | (13,987 55) |
| 200 00 | Genl Electric Co | 10/12/01 | | 38 585 | 7,716 97 | 15 130 | 3,026 00 | (4,690 97) |
| 150 00 | Ishares Dow | 11/06/06 | | 69 459 | 10,418 81 | 43 910 | 6,586 50 | (3,832 31) |
| 300 00 | Johnson & Johnson | 03/05/03 | | 53 637 | 16,091 03 | 64 410 | 19,323 00 | 3,231 97 |
| 400 00 | JPM Chase Manhattan Corp New | 07/25/90 | | 6 575 | 2,630 19 | 41 670 | 16,668 00 | 14,037 81 |
| 400 00 | Microsoft Corp | 09/07/04 | | 27 664 | 11,065 44 | 30 480 | 12,192 00 | 1,126 56 |
| 394 00 | Wyeth (American Home Products) | 01/01/80 | | 5 715 | 2,251 73 | 18 190 | 7,166 86 | 4,915 13 |
| 100 00 | Chevrontexaco Corp | 08/29/08 | | 83 489 | 8,348 89 | 76 990 | 7,699 00 | (649 89) |
| 195 00 | Citigroup Capital 6% | 08/13/03 | | 25 256 | 4,924 87 | 18 270 | 3,562 65 | (1,362 22) |
| 90 00 | BAC CAP Trust 5 875% | 08/05/03 | | 24 572 | 2,211 44 | 19 021 | 1,711 88 | (499 56) |
| 45 00 | BAC CAP Trust 5 875% | 08/05/03 | | 24 600 | 1,107 00 | 19 021 | 855 94 | (251 06) |
| 150 00 | Bank of America Corp | 02/01/07 | | 52 150 | 7,822 45 | 15 060 | 2,259 00 | (5,563 45) |
| 100 00 | Coca Cola Co | 09/19/07 | | 56 695 | 5,669 50 | 57 000 | 5,700 00 | 30 50 |
| 150 00 | Genl Electric Co | 01/29/02 | | 39 019 | 5,852 86 | 15 130 | 2,269 50 | (3,583 36) |
| 100 00 | JPM Chase Manhattan Corp New | 02/21/89 | | 10 621 | 1,062 08 | 41 670 | 4,167 00 | 3,104 92 |
| 200 00 | Microsoft Corp | 07/31/03 | | 26 999 | 5,399 77 | 30 480 | 6,096 00 | 696 23 |
| 100 00 | Procter & Gamble | 04/11/96 | | 20 710 | 2 070 99 | 60 630 | 6 063 00 | 3 992 01 |
| 300 00 | BAC CAP Trust 5 875% | 06/04/03 | | 25 882 | 7 764 58 | 19 021 | 5 706 27 | (2 058 31) |
| 95 00 | Bank of America Corp | 02/01/07 | | 52 219 | 4 960 81 | 15 060 | 1 430 70 | (3 530 11) |
| 200 00 | Citigroup | 06/02/03 | | 41 951 | 8 390 23 | 3 310 | 662 00 | (7 728 23) |
| 300 00 | Citigroup Capital 7 25% | 08/15/07 | | 25 000 | 7 500 00 | 20 400 | 6 120 00 | (1 380 00) |
| 400 00 | Ford Motor Credit 7 3/8% | 06/02/03 | | 25 356 | 10 142 23 | 20 800 | 8 320 00 | (1 822 23) |
| 250 00 | Genl Electric | 06/02/03 | | 28 889 | 7 222 16 | 15 130 | 3 782 50 | (3 439 66) |
| 150 00 | J&J | 06/04/03 | | 54 569 | 8 185 42 | 64 410 | 9 661 50 | 1 476 08 |
| 1229 52 | Scudder Growth & Income Fund | N / A | | 20 328 | 24 993 71 | 14 470 | 17 791 18 | (7 202 53) |
| | Hundington Trust | N / A | | | 225 000 00 | | 479 744 86 | 254 744 86 |
| | | | | | 754 350 27 | | 943 823 94 | 189 473 67 |

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545 1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension- check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

| | | |
|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------|
| Type or print File by the due date for filing your return. See instructions | Name of Exempt Organization | Employer identification number |
| | THE AMERICAN GEOGRAPHICAL SOCIETY OF NEW YORK | 13-1623890 |
| | Number, street, and room or suite number. If a P.O. box, see instructions 120 WALL STREET #100 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10005-3904 | |

Check type of return to be filed (file a separate application for each return)

- | | | |
|----------------------------------------------|----------------------------------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► AMERICAN GEOGRAPHICAL SOCIETY

Telephone No ► (212) 422-5456 FAX No ► (212) 422-5480

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 10, to file the exempt organization return for the organization named above.
- The extension is for the organization's return for
- ☒ calendar year 20 09 or
 - ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

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

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

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.Form **8868** (Rev. 4-2009)

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

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

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

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

| | | |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------------------------|
| Type or print | Name of Exempt Organization | Employer identification number |
| | THE AMERICAN GEOGRAPHICAL SOCIETY OF NEW YORK | 13-1623890 |
| File by the extended due date for filing the return See instructions | Number, street, and room or suite number If a P O box, see instructions | For IRS use only |
| | Carmine A. Principato, CPA, P.C. 812 N Wood Ave. Ste 304 | |
| | City, town or post office, state, and ZIP code For a foreign address, see instructions | |
| | Linden, NJ 07036 | |

Check type of return to be filed (File a separate application for each return).

- | | | | |
|-----------------------------------------------------|----------------------------------------------------------------------|--------------------------------------|------------------------------------|
| <input checked="checked" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

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

- The books are in care of ► AMERICAN GEOGRAPHICAL SOCIETY
 Telephone No. ► (212) 422-5456 FAX No. ► (212) 422-5480
 • If the organization does not have an office or place of business in the United States, check this box ☐
 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 11/15 , 20 10
5 For calendar year 2009 , or other tax year beginning , 20 , and ending , 20 .
6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
7 State in detail why you need the extension The organization is waiting for additional information
which is necessary to file a complete and accurate return.

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

Signature and Verification

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

Signature

Title ▶

Date ►