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DLN: 93493306010735

Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

 $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	or the	2014 ca		ng 01-01-2014 , and ending 12-31-20	014			
		applicable	C Name of organization  AMERICAN INSTITUTE OF PHYSICS	S INC		D Emplo	yer ide	ntification number
☐ Ad	dress c	hange	% CATHERINE G SWARTZ -			13-16	6705	3
∏ Na	me cha	ange	Doing business as					
In	ıtıal retu	ım		<del>_</del>		E Teleph	one num	ber
	turn/ter	mınated	Number and street (or P O box if ONE PHYSICS ELLIPSE	mail is not delivered to street address) Room,	/suite	· ·	209-3	
	nended plicatio	return n pending	COLLEGE PARK, MD 207403843	untry, and ZIP or foreign postal code		<b>G</b> Gross I	eceipts	\$ 94,275,088
			<b>F</b> Name and address of pr ROBERT G W BROWN	incipal officer		Is this a group subordinates?		for
			ONE PHYSICS ELLIPSE COLLEGE PARK, MD 2074	103843		Are all subord	nates	┌ Yes ┌ No
I Ta	ax-exer	npt status	501(c)(3)	(insert no )			a lıst	(see instructions)
J W	/ebsit	e:► W\	WW AIP ORG		H(c)	Group exempt	ion nui	mber ►
<b>K</b> For	m of or	rganızatıoı	n 🔽 Corporation 🗆 Trust 🗀 Associat	on Cother ►	<b>L</b> Yea	r of formation 19	931 <b>M</b>	State of legal domicile NY
Pa	irt I	Sun	nmary					
Governance		AIP'S N	1ISSION IS TO ADVANCE, PR	ion or most significant activities  OMOTE AND SERVE THE PHYSICAL  Ilscontinued its operations or dispose				
			,	ning body (Part VI, line 1a)			з	37
<b>40</b> ያሳ 40				of the governing body (Part VI, line 1			4	35
Ě				calendar year 2014 (Part V, line 2a)			5	329
Activities &				necessary)			6	250
Q.	7a	Total ur	nrelated business revenue from	Part VIII, column (C), line 12			7a	3,548,553
	Ь	Net unr	elated business taxable income	from Form 990-T, line 34			7b	
						Prior Year		Current Year
	8	Contr	ributions and grants (Part VIII,	line 1 h)		490,	601	456,777
Rayenue	9	Progr	am service revenue (Part VIII,	line 2g)		57,955,	799	59,001,026
9 3:	10	Inves	stment income (Part VIII, colum	nn (A), lines 3, 4, and 7d)		6,642,	460	6,209,658
ш	11		, , , , , , , , , , , , , , , , , , , ,	), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,615,	542	8,567,770
	12	12)	<u> </u>	1 (must equal Part VIII, column (A), l		73,704,		74,235,231
	13			t IX, column (A), lines 1-3)		416,	174	501,579
	14			s paid to or for members (Part IX, column (A), line 4)				
8	15	Salar 5-10		/ee benefits (Part IX, column (A), line:	s	31,010,	001	30,137,811
Expenses	16a			(, column (A), line 11e)	•		0	0
ਡੋ	Ь	Total f	undraising expenses (Part IX, column (	D), line 25) 🕨 420,798	-			
	17	Othe	r expenses (Part IX, column (A)	, lines 11a-11d, 11f-24e)		36,837,	022	40,535,317
	18	Total	expenses Add lines 13-17 (m	68,263,	197	71,174,707		
	19	Reve	nue less expenses Subtract line	e 18 from line 12	_	5,441,		3,060,524
Not Assets or Fund Balances						inning of Curre Year	nt	End of Year
25.E	20					193,473,		200,085,090
2 E	21				•	38,372,		42,189,508
	22		ssets or fund balances  Subtrac nature Block	t line 21 from line 20		155,100,	936	157,895,582
Unde my k	nowle arer h	alties of dge and as any k Sigr	perjury, I declare that I have expedience, it is true, correct, and continuously and continuously and the continuo	kamined this return, including accomp mplete Declaration of preparer (other				
		<u> </u>	e or print name and title					
_			Print/Type preparer's name WHITNEY E BLAIR	Preparer's signature WHITNEY E BLAIR	Date	Check If self-employed	PTIN P01226	
Pai		F	Firm's name F KPMG LLP	1	1	Firm's EIN 🕨	1	
	pare On		Firm's address ► 1676 International Dr	ive		Phone no (703	3) 286-8	000

McLean, VA 22102
May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

Part IV	Checklist of	Required	<b>Schedules</b>

			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 $A^{22}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
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	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[6]{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16	Yes	
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
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	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			i
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$ ?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
	Estantia number numeria da Barra de Constantia de Constant		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 228  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
Za	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	ı.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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)?	4a	Yes	
b	If "Yes," enter the name of the foreign country $\blacktriangleright$ CH			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N o
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt 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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	$\vdash$	165	
	more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No ——
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
_	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	16a		No
b	taxable entity during the year?	16a		INO
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed►MD, NY			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			

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

►CATHERINE G SWARTZ -ONE PHYSICS ELLIPSE

COLLEGE PARK, MD 207403843 (301)209-3100

Form 990 (2014)	
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# 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

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee

any hours for related organizations (Section 1999-MISC) organization (Words and a director/trustee) organizat	(A) Name and Title	for related organizations below		•	` `	organization and
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Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	▶	4,729,280	0	605,370

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►72

			Yes	NO
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	,		
	on the factor respectively for such marviaga.	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
Grant Thornton LLP, 33562 Treasury Center CHICAGO, IL 60694	Consulting	750,191
ORIGIN EDITORIAL LLC, PO BOX 861 PLYMOUTH, MA 02362	Editorial Operations	1,594,135
STEPTOE JOHNSON LLP, 1330 CONNECTICUT AVE NW WASHINGTON, DC 20036	LEGAL	665,834
BRYAN CAVE LLP, 1290 Avenue of the Americas NEW YORK, NY 101043300	LEGAL	189,533
KPMG LLP, 1801 K Street NW Suite 12000 WASHINGTON, DC 20036	AUDIT AND TAX	262,052
2 Total number of independent contractors (including but not limited to those listed above)	) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►11

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 #2	1a	Federated camp						
and Other Similar Amounts	Ь	Membership due						
A,	С	Fundraising eve	ents 1c					
lar	d	Related organiz	ations 1d					
įΈ	е	Government grants	(contributions) <b>1e</b>	114,972				
S	f	All other contributions similar amounts no	ns, gifts, grants, and <b>1f</b>	341,805	į	İ		
: ₩	g	Noncash contributio		i	i			
2		1a-1f \$			456 777			
and	h	Total. Add lines	1a-1f	· · · •	456,777			
<u>e</u>				Business Code				
E	2a	PUBLISHING CENTE		511120	57,965,803	54,749,713	3,216,090	
본	b	PHYSICS RESOURC	ES CENTER	900099	1,035,223	1,035,223		
ည် ခြ	c d							
3	e					+		
<u> </u>	f	All other progra	m service revenue					
Program Service Revenue								
	g 3		2a-2f		59,001,026			
			ome (including dividender ar amounts)		2,961,335		226,651	2,734,684
	4	Income from invest	tment of tax-exempt bond	proceeds <b>F</b>	0			
	5	Royalties	() 5		0			
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	c	expenses Rental income	0	0				
	d	or (loss)	me or (loss)		0			
	u	Net rental incor	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	23,288,180	(,				
	b	than inventory  Less cost or other basis and sales expenses	20,039,857					
	С	Gain or (loss)	3,248,323					
	d		s)		3,248,323		105,812	3,142,51
,	8a	Gross income frevents (not incl	uding 					
		of contributions See Part IV, line						
	ь	Less direct exp	a penses b					
	С	Net income or (	loss) from fundraising	events 🛌	0			
	9a	Gross income fr See Part IV, line	om gaming activities e 19 a					
	ь	Less direct exp	penses <b>b</b>					
	С	Net income or (	loss) from gamıng actı	vities	0			
	10a	Gross sales of i returns and allo	wances .					
		Less cost of go	a oods sold b looss) from sales of inve	entory	0			
		Miscellaneous		Business Code				
	11a	PASS THRU CO	STS/MBR	900099	7,276,625	7,276,625		
	b	EQUITY GAIN	ON ACP	900099	1,287,380	1,287,380		
	С	INVESTMENT MISCELLANEO	US INCOME	900099	3,765	3,765		
	d	All other revenu						
	e	Total. Add lines	11a-11d '	🕨	8,567,770			
J	12	Total revenue.	See Instructions	🗚	74,235,231	64,352,706	3,548,553	5,877,19

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)

Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   2,046,654   1,391,725   634,462   20,46     9	Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizat	ions must comp	lete column (A )	
Total elements   Total elements   Total elements   Projection service		Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>		<u> </u>
domestic governments See Part IV, line 21   99,442   99		• •		Program service	Management and	Fundraising
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.   25,239   25,239	1		98,442	98,442		
Benefits paid to or for members	2		377,898	377,898		
Benefits paid to or for members   0	3	governments, and foreign individuals See Part IV, lines 15	25,239	25,239		
Compensation of current officers, directors, trustees, and key employees   4,669,283   2,886,025   1,783,288	4					
Compensation not included above, to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(3)(8) 12,66,671 12,268,710 5,765,400 226,568 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,046,656 1,391,725 634,462 20,46 19 Other employee benefits 3,414,556 2,201,397 1,038,512 34,14 10 Payroll taxes 1,746,649 1,187,721 541,461 17,46 11 Fees for services (non-employees) 1,746,649 1,187,721 541,461 17,46 11 Fees for services (non-employees) 1,035,627	5	Compensation of current officers, directors, trustees, and	4,669,283	2,886,025	1,783,258	
7 Other salaries and wages   18,260,671   12,268,710   5,765,400   226,56   8   Penson plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   2,046,654   1,391,725   634,462   20,46   9 Other employee benefits   3,414,594   2,271,897   1,038,512   34,14   17,46   11   Fees for services (non-employees)   1,746,649   1,187,721   541,461   17,46   11   Fees for services (non-employees)   2,221,338   1,643,386   675,649   2,32   1,035,627   1,035	6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons	0			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   2,046,654   1,391,725   634,627   20,06   9 Other employee benefits   3,444,554   2,221,897   1,058,512   34,14   10 Payroll taxes   1,746,649   1,187,721   541,461   17,46   11 Fees for services (non-employees)   2,121,398   1,643,386   675,649   2,72   12 Legal   1,035,627   1,035,627   1,035,627   12 Legal   1,035,627   1,035,627   1,035,627   13 Legal   1,035,627   1,035,627   1,035,627   14 Lobying   126,408   15,000   108,408   108,408   15 Professional fundraising services See Part IV, line 17   0   108,410   108,410   16 Professional fundraising services See Part IV, line 17   0   108,410   108,410   108,410   17 Investment management fees   1,035,627   1,035,627   1,035,627   18 Payments of texpenses on Schedule O)   277,341   270,901   6,440   1,034,000   1	7		18,260,671	12,268,710	5,765,400	226,561
10   Payroll taxes   1,746,649   1,187,721   541,461   17,46   17,46   1,187,721   541,461   17,46   1,187,721   541,461   17,46   1,187,721   541,461   17,46   1,187,721   1,187,721   1,188,188   1,643,386   675,649   2,32   1,035,627   1,035,428   1,035,	8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,046,654	1,391,725	634,462	20,467
### Amangement	9	Other employee benefits	3,414,554	2,321,897	1,058,512	34,145
### Amangement	10	Payroll taxes	1,746,649	1,187,721	541,461	17,467
Description	11	Fees for services (non-employees)				
c         Accounting         3,188         365,285           d         Lobbying         126,408         18,000         108,408           e         Professional fundraising services See Part IV, line 17         0         1           f         Investment management fees         108,410         108,410           g         Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)         277,341         270,901         6,440           12         Advertising and promotion         2,114,366         2,087,235         6,000         21,13           13         Office expenses         612,485         226,002         360,499         25,98           14         Information technology         3,566,796         1,604,389         1,951,889         10,51           15         Royalties         0         0         0         0         0         0           16         Occupancy         6,299,774         34,226         6,265,548         1 <t< th=""><th>а</th><th>Management</th><th>2,321,358</th><th>1,643,386</th><th>675,649</th><th>2,323</th></t<>	а	Management	2,321,358	1,643,386	675,649	2,323
Lobbying   126,408   18,000   108,408   18,000   108,408	b	Legal	1,035,627		1,035,627	
e Professional fundraising services See Part IV, line 17 f Investment management fees	c	Accounting	388,473	3,188	385,285	
Total Formation of the Company of	d	Lobbying	126,408	18,000	108,408	
## Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O	e	Professional fundraising services See Part IV, line 17	0			
amount, list line 11g expenses on Schedule O ) 277,341 270,901 6,440 21,11	f	Investment management fees	108,410		108,410	
13 Office expenses	g		277,341	270,901	6,440	
14	12	Advertising and promotion	2,114,366	2,087,235	6,000	21,131
15         Royalties         0            16         Occupancy          6,299,774         34,226         6,265,548           17         Travel          1,106,799         941,128         160,069         5,60           18         Payments of travel or entertainment expenses for any federal, state, or local public officials          0	13	Office expenses	612,485	226,002	360,499	25,984
16         Occupancy         6,299,774         34,226         6,265,548           17         Travel         1,106,799         941,128         160,069         5,60           18         Payments of travel or entertainment expenses for any federal, state, or local public officials         0         0         30,354         30,354         13,76           20         Interest         30,354         30,354         30,354         30,354         20,30,354         30,354         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557         20,30,557	14	Information technology	3,566,796	1,604,389	1,951,889	10,518
17       Travel	15	Royalties	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	16	Occupancy	6,299,774	34,226	6,265,548	
State, or local public officials   0     1,234,226   894,597   325,861   13,76	17	Travel	1,106,799	941,128	160,069	5,602
20 Interest	18		0			
Payments to affiliates	19	Conferences, conventions, and meetings	1,234,226	894,597	325,861	13,768
Depreciation, depletion, and amortization	20	Interest	30,354		30,354	
Insurance	21	Payments to affiliates	0			
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)  a MEMBER SOCIETY PASS THRU  7,276,625  b EDIT MANAGEMENT  4,592,324  c PUBLISHING PRODUCTION  3,227,122  3,224,640  1,982  50  d PUBLISHING PRINTING  2,926,498  2,893,069  9,036  24,39  e All other expenses  Add lines 1 through 24e  71,174,707  47,735,728  23,018,181  420,79  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	22	Depreciation, depletion, and amortization	1,314,819	642,690	672,129	
miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)  a MEMBER SOCIETY PASS THRU  7,276,625  b EDIT MANAGEMENT  4,592,324  c PUBLISHING PRODUCTION  3,227,122  3,224,640  1,982  50  d PUBLISHING PRINTING  2,926,498  2,893,069  9,036  24,39  e All other expenses  1,744,955  825,671  901,345  17,93  25  Total functional expenses. Add lines 1 through 24e  71,174,707  47,735,728  23,018,181  420,79  26  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	23	Insurance	230,557		230,557	
b EDIT MANAGEMENT 4,592,324 4,592,324 c PUBLISHING PRODUCTION 3,227,122 3,224,640 1,982 50 d PUBLISHING PRINTING 2,926,498 2,893,069 9,036 24,39. e All other expenses 1,744,955 825,671 901,345 17,93 25 Total functional expenses. Add lines 1 through 24e 71,174,707 47,735,728 23,018,181 420,79 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	24	miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
c PUBLISHING PRODUCTION 3,227,122 3,224,640 1,982 50 d PUBLISHING PRINTING 2,926,498 2,893,069 9,036 24,39 e All other expenses 1,744,955 825,671 901,345 17,93  25 Total functional expenses. Add lines 1 through 24e 71,174,707 47,735,728 23,018,181 420,79  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	а	MEMBER SOCIETY PASS THRU	7,276,625	7,276,625		
d PUBLISHING PRINTING 2,926,498 2,893,069 9,036 24,39 e All other expenses 1,744,955 825,671 901,345 17,93  25 Total functional expenses. Add lines 1 through 24e 71,174,707 47,735,728 23,018,181 420,79  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	b	EDIT MANAGEMENT	4,592,324	4,592,324		
All other expenses 1,744,955 825,671 901,345 17,93  Total functional expenses. Add lines 1 through 24e 71,174,707 47,735,728 23,018,181 420,79  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	c	PUBLISHING PRODUCTION	3,227,122	3,224,640	1,982	500
Total functional expenses. Add lines 1 through 24e  71,174,707 47,735,728 23,018,181 420,79  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	d	PUBLISHING PRINTING	2,926,498	2,893,069	9,036	24,393
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check	e	All other expenses	1,744,955	825,671	901,345	17,939
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check	25	Total functional expenses. Add lines 1 through 24e	71,174,707	47,735,728	23,018,181	420,798
Form <b>990</b> (2014	26	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in	n this F	Part	х			
						(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			•	23,132,945	1	29,852,949
	2	Savings and temporary cash investments				6,507,561	2	5,221,842
	3	Pledges and grants receivable, net			•	58,172	3	144,720
	4	Accounts receivable, net				4,618,141	4	4,903,394
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F Schedule L	art II	of		374	5	0
ts	6	Loans and other receivables from other disqualified persons ( section $4958(f)(1)$ ), persons described in section $4958(c)(3)$ employers and sponsoring organizations of section $501(c)(9)$ beneficiary organizations (see instructions) Complete Part II	)(B), a volun	nd o	ontributing employees'	0	6	0
Assets	_	Nahar and lang was walle mak				0	7	0
¥.	7	Notes and loans receivable, net				0		0
	8	Inventories for sale or use				991,783	8	819,848
	9	Prepaid expenses and deferred charges		I	•	991,763	9	019,040
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		10,921,021			
	ь	Less accumulated depreciation	10b		3,677,683	2,596,831	10c	7,243,338
	11	Investments—publicly traded securities	•			112,429,594	11	108,797,634
	12	Investments—other securities See Part IV, line 11				32,787,980	12	31,433,442
	13	Investments—program-related See Part IV, line 11				68,104	13	98,104
	14	Intangible assets				0	14	0
	15	Other assets See Part IV, line 11				10,282,438	15	11,569,819
	16	Total assets. Add lines 1 through 15 (must equal line 34) .				193,473,923	16	200,085,090
	17	Accounts payable and accrued expenses				5,887,125	17	7,654,559
	18	Grants payable				0	18	0
	19	Deferred revenue				18,887,438	19	20,916,527
	20	Tax-exempt bond liabilities				0	20	0
	21	Escrow or custodial account liability Complete Part IV of Sch				0	21	0
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	tors, t					
æ		persons Complete Part II of Schedule L				0	22	0
	23	Secured mortgages and notes payable to unrelated third parti	es .			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties				0	24	0
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P D	art X d			13,598,424	25	13,618,422
	26	Total liabilities. Add lines 17 through 25				38,372,987	26	42,189,508
-s é		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▼ an	nd co	omplete			
ant	27	Unrestricted net assets				138,623,774	27	141,192,727
<u>ක</u>	28	Temporarily restricted net assets				5,858,633	28	6,008,111
Ξ	29	Permanently restricted net assets			•	10,618,529	29	10,694,744
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here 🕨	· _	and			
9	30	Capital stock or trust principal, or current funds					30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other	funds				32	
Net	33	Total net assets or fund balances				155,100,936	33	157,895,582
_	34	Total liabilities and net assets/fund balances	<u>.</u> .		•	193,473,923	34	200,085,090
-								Form <b>990</b> (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				<del>.</del>
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		74,2	235,231
2	Total expenses (must equal Part IX, column (A), line 25)	2		71,1	174,707
3	Revenue less expenses Subtract line 2 from line 1	3		3,0	060,524
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			.00,936
5	Net unrealized gains (losses) on investments	5			.58,363
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- 1	.07,515
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		157,8	395,582
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	l			
За	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?	<u></u>	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:** 

**EIN:** 13-1667053

Name: AMERICAN INSTITUTE OF PHYSICS INC

Form 990, Part VII - Compensation Compensated Employees, and Inde	n of Officers, ependent Cor	Direct ntracto	ors, ors	Tru	ste	es, ŀ	(ey	Employees, High	hest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more tl perso and a	tion ( han o n is b	ne b oth ctor,	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-14130)	2/1099-M13C)	related organizations
(1) Judy Dubno	2 0	×						0	0	0
DIRECTOR (1) Charles Carter	0 0									
DIRECTOR	0 0	X						0	0	0
(2) Dian Seidel	2 0	.,								
DIRECTOR	0 0	Х						0	0	0
(3) Faith Morrison	2 0	×						0	0	0
DIRECTOR	0 0								_	
(4) Homer Neal	2 0	x						0	0	О
DIRECTOR (5) Marcia Isakson	0 0									
DIRECTOR	0 0	Х						0	0	0
(6) Steve Iona	2 0	<u> </u>								
DIRECTOR	0 0	X						0	0	0
(7) Mary Mogge	2 0	×						0	0	0
DIRECTOR	0 0								_	
(8) Jonathan Malay	2 0	x						0	0	0
DIRECTOR  (9) Keith Seitter	0 0									
DIRECTOR	0 0	Х						0	0	0
(10) H Joe Witte	2 0	<u> </u>								
DIRECTOR	0 0	X						0	0	0
(11) Louis J Lanzerotti	20 0	X		x				60,000	0	0
Chairman (12) H Frederick Dylla	0 0									
Executive Dir	3 0	X		х				574,865	0	46,087
(13) Judith Flippen-Anderson	25 0									
SECRETARY	0 0	X		X				70,314	0	0
(14) Samuel Aronson	2 0	×						0	0	0
DIRECTOR	0 0	^						Ů		Ů
(15) Malcolm Beasley	2 0	X						0	0	0
DIRECTOR (16) G Fritz Benedict	0 0									
DIRECTOR	0 0	X						0	0	0
(17) J Daniel Bourland	2 0							_	_	_
DIRECTOR	0 0	X						0	0	0
(18) Bruce Curran	2 0	×						0	0	0
DIRECTOR	0 0							Ů		, and the second
(19) Beth Cunningham	2 0	x						0	0	О
DIRECTOR (20) Robert Doering	5 0									
DIRECTOR	0 0	×						0	0	0
(21) Michael Duncan	2 0							_	-	
DIRECTOR	0 0	X						0	0	0
(22) David Ernst	2 0	x						0	0	0
DIRECTOR (23) Janet Fender	0 0		_	_			_			
		×						0	0	o
DIRECTOR (24) Paul Kelley	2 0									
DIRECTOR	0 0	X						0	0	0
	•	•		•	•		•	•		•

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent Cor					, -	,			
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more th person and a	ion (d nan o n is b	ne bo	ox, u an of	nless ficer	ï	( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(26) Angela Keyser	2 0	x						0	0	0
DIRECTOR (1) Kate Kırby	0 0							-	-	
DIRECTOR	3 0	x						0	0	0
(2) Rudolf Ludeke	2 0									
DIRECTOR	0 0	X						0	0	0
(3) Kevin Marvel	2 0	x						0	0	0
DIRECTOR	0 0							_	-	
(4) Elizabeth Rogan	2 0	х						0	0	0
DIRECTOR (5) Joseph Serene	2 0									
DIRECTOR	5 0	X						0	0	0
(6) Neal Shinn	2 0	х						0	0	0
DIRECTOR (7) Scott Sommerfeldt	2 0	.,								
DIRECTOR	0 0	Х						0	0	0
(8) Gene Sprouse	2 0	x						0	0	0
DIRECTOR  (9) Gay Stewart	0 0									
DIRECTOR	0 0	х						0	0	0
(10) Hervey Peter Stockman	2 0							_	_	
DIRECTOR	0 0	Х						0	0	0
(11) Michael Turner	2 0	×						0	0	0
DIRECTOR (12) Catherine O'Riordan	0 0 40 0									
Vice President	0 0			Х				233,242	0	25,996
(13) Catherine G Swartz	40 0			х				225,353	0	51,072
CF0	5 0							223,333		31,072
(14) Theresa Braun	40 0			х				222,217	0	32,050
Vice President (15) Adriana Acosta	40 0									
Head of Global Sales	0 0				Х			288,485	0	21,602
(16) Mark Cassar	40 0				х			172,312	0	45,784
Publisher	0 0 40 0									
(17) Randolph Nanna					х			196,432	0	36,563
Publisher Magazine Publish  (18) Roy Levenson	40 0									
CFO	0 0				Х			265,133	0	32,939
(19) Lısa McLaughlın	40 0				х			219,100	0	32,193
C00	0 0									
(20) John HaynesCEO AIP Publishing LLC	40 0				х			515,885	0	36,760
(21) Wendy Marriott	40 0				х			187,041	0	47,141
Head of Π Operations (22) Evan Owens	0 0 40 0									
CIO	0 0				Х		<u> </u>	292,181	0	23,488
(23) Jason Wilde	40 0				х			158,697	0	7,012
Chief Publishing Officer (24) Larry Belmont	0 0 40 0									·
Dir of Business Development	0 0					Х		238,943	0	34,479

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

0 0

Software Architect

(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne booth a	ox, u an of trus	inless ficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke, emplojea	Highest compensated	Former	2,1033 (1100)	2,2033 11200,	related organizations
(51) Joel LaCalamita  Dir of Infrastructure & Commun	40 0					х		238,334	0	44,092
(1) Chris McMahon  Dir Content Management	40 0					х		225,889	0	35,718
(2) Charles Mınder Section Manager	40 0					х		170,889	0	38,455
(3) Hu Wang	40 0					х		173,968	0	13,939

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As Filed Data -

DLN: 93493306010735

## OMB No 1545-0047

# SCHEDULE A Public C

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

## **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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

Open to Public Inspection

		ne organization ISTITUTE OF PHYSICS INC					Employer identifica	ation number
TITLIX.	ICAN IN	STITUTE OF THISICS INC					13-1667053	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this p	part.) See instruction	ons.
The	rganı	zation is not a private fo	oundation bec	auseıtıs (Forlines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n <b>section 170(</b> l	b)(1)(A)(i).	
2	Γ	A school described in	section 170(b	<b>)(1)(A)(ii).</b> (Attach S	chedule E )			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in <b>sec</b>	tion 170(b)(1)	)(A)(iii).	
4	Γ	A medical research or hospital's name, city,		erated in conjunction v	vith a hospital d	lescribed in <b>se</b> c	ction 170(b)(1)(A)(iii	i). Enter the
5	$\vdash$	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unıt d	escribed in
		section 170(b)(1)(A)(	( <b>iv).</b> (Complet	e Part II)				
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in <b>se</b>	ection 170(b)(1	1)(A)(v).	
7	Γ	An organization that n described in <b>section 1</b>	•	•		om a governme	ental unit or from the o	general public
8	Γ	A community trust des	scribed in <b>sec</b> l	tion 170(b)(1)(A)(vi)	(Complete Par	tII)		
9	<u>~</u>	An organization that n	ormally receiv	ves (1) more than 33	1/3% of its supp	ort from contri	butions, membership	fees, and gross
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses
		acquired by the organi	zatıon after Ju	une 30, 1975 See <b>sec</b>	tion 509(a)(2).	(Complete Pa	rt III)	
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ety See <b>sectio</b> i	n 509(a)(4).	
11	Γ	An organization organ one or more publicly s	upported orga	nızatıons described in	section 509(a	)(1) or section	509(a)(2) See <b>sectio</b>	on <b>509(a)(3).</b> Check
а	$\vdash$	the box in lines 11a th <b>Type I.</b> A supporting o						
u	'	supported organization organization You mus	n(s) the power	to regularly appoint o	r elect a majori			
b	$\sqcap$	Type II. A supporting				with its suppo	rted organization(s), l	by having control or
		management of the su			same persons t	hat control or r	manage the supported	organization(s) You
_	_	must complete Part I\	•					
C	ı	Type III functionally i supported organization	_		•			grated with, its
d	Г	Type III non-function						janization(s) that is
		not functionally integr					ement and an attentiv	eness requirement
	_	(see instructions) You	•	•	•			
е	ı	Check this box if the or integrated, or Type III					s a Type I, Type II, T	ype III functionally
f		Enter the number of su		•				
g		Provide the following i						
_		_						
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
	1	organization		organization (described on lines 1-9 above or IRC section (see	listed in your docume		monetary support (see instructions)	other support (see instructions)
				instructions))	Yes	No		

Sch	edule A (Form 990 or 990-EZ) 2014						Page <b>2</b>
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> 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	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts 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 VI )						
11	<b>Total support</b> Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto				<del></del>	<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		<del> </del>	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	<b>33 1/3% support test—2014.</b> If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and <b>stop here.</b> The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	<b>-2014.</b> If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	<b>▶</b> ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		<b>▶</b> ┌
18	<b>Private foundation.</b> If the organization instructions	on ala not check	cabox on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• <b>▶</b> □

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	757,520	1,003,190	3,771,663	490,601	456,77	6,479,751
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	60,815,235	59,434,250	58,729,889	57,955,799	59,001,026	295,936,199
3	Gross receipts from activities that are not an unrelated trade or business under section 513						O
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						C
5	The value of services or facilities furnished by a governmental unit to the organization without charge						O
6	Total. Add lines 1 through 5	61,572,755	60,437,440	62,501,552	58,446,400	59,457,803	302,415,950
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			3,000,000			3,000,000
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the						C
_	year Add lines 7a and 7b			3,000,000			3,000,000
8	<b>Public support</b> (Subtract line 7c from line 6)			, ,			299,415,950
	ction B. Total Support	1	T		Т		T
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	<b>(e)</b> 2014	(f) Total
9	Amounts from line 6	61,572,755	60,437,440	62,501,552	58,446,400	59,457,803	302,415,950
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,109,586	4,177,709	4,754,933	4,576,181	2,961,335	20,579,744
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						C
C	Add lines 10a and 10b	4,109,586	4,177,709	4,754,933	4,576,181	2,961,335	20,579,744
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 VI)	8,752,563	8,988,638	8,626,176	8,615,542	8,567,770	43,550,689
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)	74,434,904	73,603,787	75,882,661	71,638,123	70,986,908	, ,
14	First five years. If the Form 990 is	for the organizati	on's first, second	, third, fourth, or 1	fifth tax year as a	section 501(c	)(3) organization, ►
Se	check this box and stop here ction C. Computation of Pul	blic Support P	ercentage				<u> </u>
15	Public support percentage for 201			13, column (f))		15	81 686 %
16	Public support percentage from 20	13 Schedule A, P	art III, line 15			16	82 864 %
Se	ction D. Computation of Inv						
17	Investment income percentage for				n (f))	17	5 615 %
18	Investment income percentage fro					18	5 586 %
19a	33 1/3% support tests-2014. If the	ne organization dic	I not check the bo	x on line 14, and	line 15 is more t	than 33 1/3% <mark>,</mark> a	nd line 17 is not

►V

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V  $\,)$ 

Section A. All Supporting Organizations
---

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^2$ If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see  The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

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

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

#### Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493306010735

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

**Political Campaign and Lobbying Activities** 

► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III		T	
	me of the organization ERICAN INSTITUTE OF PHYSICS INC			Employer ider	ntification number
				13-1667053	
Par	t I-A Complete if the or	ganization is exempt under	section 501(	c) or is a section 527	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polıtı	ıcal campaıgn act	ivities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
Par	t I=B Complete if the or	ganization is exempt under	section 501(	c)(3).	
1		e tax incurred by the organization un			 \$
2	·	e tax incurred by organization manag			\$
3		ection 4955 tax, did it file Form 473			☐ Yes ☐ No
4a	Was a correction made?	,	·		☐ Yes ☐ No
Ь	If "Yes," describe in Part IV				
Par		ganization is exempt under	section 501(	c), except section 50	)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem <sub>l</sub>	pt function activities 🕨	\$
2		organization's funds contributed to o	ther organizations	s for section 527	
	exempt function activities			▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	.0-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	ne amount paid fro directly delivered	om the filing organization's to a separate political orga	funds Also enter the anization, such as a ition in Part IV
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ЮТ				
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(;	a)	(b)		
activ		Yes	No	A	mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	Yes				
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		1		
c	Media advertisements?		No	1		
d	Mailings to members, legislators, or the public?	Yes				
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			19	92,475
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes				
i	O ther activities?		No			
j	Total Add lines 1c through 1i				19	92,475
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		•			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c	)(5),	or se	ctio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		[	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	till-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1  Also, complete this part for any additional information	p lıst),	Part I	I-A, lıı	nes 1	and
	Return Reference Explanation					
L	II-B - Description of Lobbying AIPs lobbying efforts focus on science and technology funding and progr	am dir	ection	for the	Nati	onal
Acti		partm	ent of E	nergy	, Nat	

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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#### DLN: 93493306010735

OMB No 1545-0047

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## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

Information about Schedule D (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

ERICAN INSTITUTE OF PHYSICS INC			noyer identii id	acion numbe	-1
Ouranizations Maintaining Dancy Ad			1667053		L C . L l
organizations Maintaining Donor Adorganization answered "Yes" to Form 99		liar Funds	or Account	<b>s.</b> Comple	te ir ti
organization answered Tes to Form 55	(a) Donor advised funds		(b) Funds and	l other accou	ınts
Total number at end of year			(-,		
Aggregate value of contributions to (during year)					
Aggregate value of grants from (during year)					
Aggregate value at end of year					
,		<u> </u>			
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o			sed	☐ Yes	ΓN
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bene conferring impermissible private benefit?				☐ Yes	ΓN
t III Conservation Easements. Complete	ıf the organization answered "	Yes" to Forn	n 990. Part I	V. line 7.	
Purpose(s) of conservation easements held by the or  Preservation of land for public use (e.g., recreation)  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization held	n or education)  Preservatio	on of a certifie	ically importai d historic stru n of a conserv	cture	
easement on the last day of the tax year			T		
<del>-</del>			Held at th	e End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easements		2b			
Number of conservation easements on a certified his	toric structure included in (a)	2c			
Number of conservation easements included in (c) achistoric structure listed in the National Register	equired after 8/17/06, and not on a	2d			
Number of conservation easements modified, transfer	rred, released, extinguished, or ter	rmınated by th	ne organization	n during	
the tax year 🗕					
Number of states where property subject to conserva	ition easement is located 🌬				
Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspectio	on, handling of	violations, an	nd <b>┌ Yes</b>	
Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conservation	n easements o	luring the year	r	
<b>*</b>					
A mount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation eas	ements durin	g the year		
<b>▶</b> \$					
Does each conservation easement reported on line 2 and section $170(h)(4)(B)(II)^{9}$	(d) above satisfy the requirements	of section 17	70(h)(4)(B)(ı)	┌ Yes	$\Gamma$
In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's fil	•		•	
Organizations Maintaining Collection		ures, or Ot	her Similar	Assets.	
Complete if the organization answered "					
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	ets held for public exhibition, educ	ation, or rese	arch in furthe		
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	116 (ASC 958), to report in its relets held for public exhibition, educ	venue statem	ent and balan		lıc
(i) Revenue included in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) Assets included in Form 990, Part X			<b>F</b> \$		
If the organization received or held works of art, histofollowing amounts required to be reported under SFAS				ride the	

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	Histo	rical Tı	reasu	res, or O	ther	Similar Ass	ets (continued
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, chec	_		_		ignificant use	of its
а	Public exhibition		d [	Loan	or excl	nange progra	ams		
b	Scholarly research		е Г	Othe	r				
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and explair	n how th	ey furthe	er the o	rganızatıon	's exe	mpt purpose ır	ı
5	During the year, did the organization solicit								
Day	assets to be sold to raise funds rather than to the transfer to be sold to raise funds rather than to the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold to raise funds rather than the transfer to be sold	· · · · · · · · · · · · · · · · · · ·						<u> </u>	Yes No
Fell	Part IV, line 9, or reported an ar					i aliswelet	י ו נ	5 (0101111)	<del>7</del> 0,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other ass	ets no		Yes No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing	g table		_			
						-		Am	ount
c	Beginning balance					<u> </u>	1c		
d	Additions during the year					-	1d		
e	Distributions during the year					<u> </u>	1e		
f	Ending balance					_	1f	_	
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow	orcusto	odial accour	nt liab	ılıty?	¯Yes
ь	If "Yes," explain the arrangement in Part XI								<u> l</u>
Pa	rt V Endowment Funds. Complete								/-\r h
1a	Beginning of year balance	(a)Current year 26,624,446	<b>(b)</b> Prio	r year 4,131,169		o years back 18,659,786		ree years back 19,432,716	(e)Four years bac 17,514,7
ь	Contributions	76,215		9,828		3,118,587		24,619	63,2
c	Net investment earnings, gains, and losses	·		-,		-,,		,	
_		969,441		2,786,632		2,616,234		-536,268	2,141,2
d	Grants or scholarships								
e	Other expenditures for facilities and programs	441,450		303,182		263,438		261,281	286,4
f	Administrative expenses	27.000.550						40.550.705	
g	End of year balance	27,228,652		6,624,447		24,131,169		18,659,786	19,432,7
2	Provide the estimated percentage of the cur	•	e (line 1	g, colum	nn (a)) h	neld as			
а	Board designated or quasi-endowment 🕨	44 000 %							
b	Permanent endowment ► 40 000 %								
C	Temporarily restricted endowment ► 16 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%							
3a	Are there endowment funds not in the posse	ssion of the organizat	ion tha	t are hel	d and a	dmınıstered	for th	ne	
	organization by  (i) unrelated organizations							3a(i	Yes No
	(ii) related organizations						•		
ь	If "Yes" to 3a(II), are the related organization		on Sch	edule R?	٠.٠.		٠. ٠	3b	<del></del>
4	Describe in Part XIII the intended uses of the	ne organization's endo	owment	funds					
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		ne orga	anızatıo	n ansv	vered 'Yes'	' to F	orm 990, Pa	rt IV, line
	Description of property			(a) Cost or asıs (ınves		( <b>b)</b> Cost or of basis (othe		(c) Accumulated depreciation	(d) Book value
1a	Land								1
Ь	Buildings								
	Leasehold improvements		.			4,778,	590	425,732	2 4,352,85
d I	Equipment		. [			4,881,	436	2,905,042	2 1,976,39
	Other					1,260,	995	346,909	9 914,08
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part X,	column	(B), line	10(c).)			•	7,243,33
								Schedule D	(Form 990) 20

See Form 990, Part X, line 12.  (a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other		
(A) OPPORTUNISTIC INVESTMENTS	31,433,442	F F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	31,433,442	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
		, Part IV, line 11d See Form 990, Part X, line 15
(1) INVESTMENT IN ACP	ription	<b>(b)</b> Book value 11,569,819
(1) 110 2011 210 110 110		11,505,615
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	11,569,819
		► 11,569,819 D Form 990, Part IV, line 11e or 11f. See
		, ,
Form 990, Part X, line 25.		
Form 990, Part X, line 25.  1 (a) Description of liability	(b) Book value	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	0	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	0	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL	10,337,305	
Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes  ACCRUED POSTRETIREMENT MEDICAL  DUE TO MEMBER SOCIETIES	10,337,305	

Part X		evenue per Audited Financial State ered 'Yes' to Form 990, Part IV, line 12a		ts With Revenue p	er Re	eturn Complete ıf
1 T		r support per audited financial statements .			1	
<b>2</b> A	mounts included on line 1 but	t not on Form 990, Part VIII, line 12				
	let unrealized gains (losses) o	•	2a			
		icilities	2b			
<b>c</b> R	lecoveries of prior year grants		2c			
<b>d</b> 0	ther (Describe in Part XIII )		2d			
<b>e</b> A	dd lines <b>2a</b> through <b>2d</b> .				2e	
<b>3</b> S	Subtract line <b>2e</b> from line <b>1</b> .				3	
<b>4</b> A	mounts included on Form 990	O, Part VIII, line 12, but not on line 1				,
a Ir	nvestment expenses not inclu	uded on Form 990, Part VIII, line 7b .	4a			
<b>b</b> 0	ther (Describe in Part XIII )		4b			
<b>c</b> A	dd lines <b>4a</b> and <b>4b</b>				4c	
<b>5</b> T	otal revenue Add lines <b>3</b> and	4c. (This must equal Form 990, Part I, line 1.	2).		5	
Part XI		cpenses per Audited Financial State		nts With Expenses	per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line 1			I	т
		audited financial statements			1	
		t not on Form 990, Part IX, line 25		I		
		cilities	2a			
	· -		2b			
			2c		_	
			2d		1 _	
					2e	
			•		3	
		), Part IX, line 25, but not on line 1:		I		
	·	ided on Form 990, Part VIII, line 7b	4a		-	
		[	4b		1 _	
					4c	
	otal expenses Add lines 3 an  Supplemental Info	d <b>4c.</b> (This must equal Form 990, Part I, line	18)		5	
Provide	the descriptions required for line 4, Part X, line 2, Part XI, tion	Part II, lines 3, 5, and 9, Part III, lines 1a an lines 2d and 4b, and Part XII, lines 2d and 4l				e any additional
	Return Reference MENTAL INFORMATION	Explanation  PART V - THE ENDOWMENT FUNDS ARE F				
		STUDENTS AND SPECIAL PROGRAMS WIT PART X - AIP PUBLISHING LLC IS A SING RESPECT TO AIP AND AS SUCH, IT IS DIS AIP GLOBAL IS A FOR PROFIT CORPORATHE INTERNAL REVENUE CODE TAX POSSBASED ON A "MORE-LIKELY THAN-NOT" PROVISIONS ARE MEASURED AT THE LALIKELY OF BEING REALIZED CHANGES IN REFLECTED IN THE PERIOD IN WHICH A POSITIONS TAKEN OR EXPECTED TO BE ANNUALLY REVIEWS ITS TAX POSITIONS STATEMENTS AIP'S ACCOUNTING POLICIS TO RECOGNIZE TAX POSITIONS IF IT WOULD NOT BE SUSTAINED UPON EXAM THERE ARE ANY UNRECOGNIZED TAX BE RECORDED	THIN LE ME SREG, TION SITIO THRE RGES N REC CHAN TAKE S AND THAT CY FO IS MO	THE PHYSICS RESOUTEMBER LIMITED LIABLE ARDED FOR FEDERAL SUBJECT TO FEDERAL SUBJECT TO FEDERAL SHOLD RECOGNIZED TAMOUNT THAT IS COGNITION OR MEASUMENT OF A TAX RETURN HAS DETERMINED THE REQUIRE RECOGNIT REVALUATING UNCLOSE LIKELY THAN-NOT THE LIKELY THE LIKELY THAN-NOT THE LIKELY THE LIKELY THAN-NOT THE LIKELY	RCES ILITY INCO LINCO OR DO INCO GREAT UREM CURS MAN HAT T ION I ERTAI DOES	CENTER AT AIP COMPANY WITH ME TAX PURPOSES OME TAXES UNDER PERECOGNIZED OME TAX ER THAN 50% ENT ARE THIS APPLIES TO AGEMENT THERE ARE NO N THE FINANCIAL N TAX POSITIONS AT THE POSITION NOT BELIEVE
-						

Jenedale 2 (1 31111 33 3) 23 13	1 age 5	
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493306010735

**Statement of Activities Outside the United States** 

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE F

(Form 990)

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

Open to Public

► Attach to Form 990.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

AMERICAN INSTITUTE OF PHYSICS	INC				
AMERICAN INSTITUTE OF THISICS	, 1140			13-1667053	
Part I General Information "Yes" to Form 990, Par			e United States. Co	omplete if the organiza	ation answered
1 For grantmakers. Does the d			s to substantiate the a	ımount of its grants	
and other assistance, the gra	ıntees' eligibili	ty for the gran	ts or assistance, and	the selection criteria	
used to award the grants or a	ıssıstance?				▼ Yes    No
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pı	ocedures for monitorii	ng the use of its grant	s and other
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed )	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
		contractors in region	to recipients located in the region)		
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
<b>3a</b> Sub-total	1	2			4,492,439
b Total from continuation sheets to Part I					
c Totale (add lines 3a and 3h)	1	2			1 102 130

				eived more than \$5,0		•			
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	( <b>d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(	1)								
(	2)								
(	3)								
(	4)								
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2014

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients		(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) RESEARCH	Mıddle East and North Afrıca	1	254	Check			
(2) RESEARCH	Europe (Including Iceland and Greenland)	8	,				
(3) RESEARCH	North America	4	4,269	Check			
(4) Research	South America	2	3,800	Check	1		
(5)			 			1	
(6)	+				†		
(7)			 				
(8)							
(9)			1		1		
(10)			1		1		
(11)					1		
( 12)			1		1		
( 13)			<u> </u>		1		
( 14)			<u> </u>		1		
( 15)					1		
( 16)					1		
( 17)			1		1		
( 18)		1			1		
						Sched	ule F (Form 990) 2014

## Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	V	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	<b>∀</b>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	<b>অ</b>	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5** 

#### Part V Supplemental Information

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

#### 990 Schedule F, Supplemental Information

Return Reference	Explanation
	GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US AIP has established and fol lows documented policies and procedures to monitor, evaluate and review all types of grant s, awards and assistance on a regular basis

# 990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3F	METHOD OF ACCOUNTING THE ACCOUNTING METHOD USED FOR THE EXPENDITURES SHOWN IS THE ACCRUAL BASIS

#### **Additional Data**

Software ID: Software Version:

**EIN:** 13-1667053

Name: AMERICAN INSTITUTE OF PHYSICS INC

## Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmakıng		16,916
Middle East and North Africa			Grantmakıng		254
North America			Grantmakıng		4,269

Form 990 Schedule F	Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
South America			Grantmakıng		3,800					
East Asia and the Pacific	1	2	Program Services	Liaison Office	139,200					
Central America and the Caribbean			Investments		4,328,000					

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Schedule I

(Form 990)

Department of the Treasury

AMEDICAN INSTITUTE OF DHYSICS INC

Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493306010735

Open to Public **Inspection** 

**Employer identification number** 

	13-1	1667053
P	rt I General Information on Grants and Assistance	
1	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Part II Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GEORGE WASHINGTON UNIVERSITY PO BOX 85 WASHINGTON, DC 20055	53-0196584	501(C)(3)	37,826				INTERN HOUSING
(2) HARRY RANSON CENTER PO BOX 7219 AUSTIN,TX 78713	74-6000203	501(C)(3)	5,178				Preserve Documents
(3) New York University PO Box 5166 New York, NY 10087	13-5562308	501(C)(3)	12,900				Preserve Documents

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3
3	Enter total number of other organizations listed in the line 1 table	0

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) TRAVEL AND MEETING EXPENSES	154	41,035			
(2) SCHOLARSHIPS AND AWARDS FOR SPS MEMBERS	41	41,350			
(3) A WARDS FOR A CHIEVEMENTS IN PHYSICS	4	25,000			
(4) SCIENCE WRITING AWARDS	6	12,000	742	FMV	ENGRAVED CHAIR
(5) CONGRESSIONAL & US STATE Department	5	247,980			
(6) Inverviews and preserve documents	13	9,745	46		T-Shirts

Part IV Supplemental II	<b>aformation.</b> Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
Part I, Line 2 - Procedures for	AIP has established and follows documented policies and procedures to monitor, evaluate and review all types of grants, awards, and assistance on a
Monitoring Use of Grants Funds in	regular basis
US	

Schedule I (Form 990) 2014

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DLN: 93493306010735

OMB No 1545-0047

Schedule J

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization AMERICAN INSTITUTE OF PHYSICS INC

(Form 990)

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

13-1667053

Pa	rt I Questions Regarding Compensation	า	·			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	$\sqcap$	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
			meetor, regarding the reams encored in the 14		res	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all thused by a related organization to establish compens	at apply				
	∇ Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	nt?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-be	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		No
	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of		• • • • • • • • • • • • • • • • • • • •	7		No
8	Were any amounts reported in Form 990, Part VII, p			<u> </u>		·••
-	subject to the initial contract exception described in					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of	<b>(F)</b> Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

tibe complete this part for any addition	nai mornacion
Return Reference	Explanation
Part I, Line 1a	Relevant Information Regarding Compensation Benefits DUE TO A MEDICAL CONDITION, FIRST CLASS TRAVEL WAS MADE AVAILABLE TO ONE EMPLOYEE
PART I, LINE 3	METHODS USED BY ORGANIZATION TO ESTABLISH CEO/EXEC DIRECTOR COMPENSATION ON AN ANNUAL BASIS AIP RETAINS A COMPENSATION CONSULTING FIRM TO REVIEW THE CURRENT COMPENSATION OF THE CEO, WHICH INCLUDES DETAILED COMPARISONS WITH COMPARABLY SIZED NOT-FOR-PROFIT ORGANIZATIONS AS WELL AS SELECTED PEER SCIENTIFIC AND ENGINEERING ORGANIZATIONS THIS INFORMATION IS REVIEWED BY THE SECRETARY OF THE BOARD AND THE CHAIR OF THE GOVERNING BOARD OF AIP THE CHAIR THEN DISCUSSES IT WITH THE EXECUTIVE COMMITTEE OF THE GOVERNING BOARD WHO MAKES THE FINAL DECISION OF THE COMPENSATION FOR THE CEO COMPENSATION FOR THE CEO IS DISCUSSED AND DOCUMENTED DURING THE EXECUTIVE SESSION OF AIP'S BOARD MEETINGS
PART I, LINE 4 - RECEIVED SEVERANCE, SUPPLEMENTAL NQ RETIREMENT, EQUITY	BASED COMPENSATION PART I, LINE 4A Severance Payment The following individuals received a severance payment during the year Adriana Acosta \$117,775 Evan Owens \$108,050 Larry Belmont \$71,250 Joel LaCalamita \$80,050 Chris McMahon \$74,750 Charles Minder \$46,806 Hu Wang \$47,269
Part I, Line 4B	Supplemental non-qualified retirement plan The following individual participated in section 457(F) supplemental, non-qualified retirement plan H Frederick Dylla The following amounts were deferred during the year H Frederick Dylla \$25,000 The following 457(F) amounts became vested in or paid out during the year H Frederick Dylla \$53,994

Schedule J (Form 990) 2014

Software ID: Software Version:

**EIN:** 13-1667053

Name: AMERICAN INSTITUTE OF PHYSICS INC

## Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	( <b>B)</b> Brea ( <b>i)</b> Base Compensation		f W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
H Frederick Dylla,     Executive Dir	(I) 4 (II)	95,123 0	0	79,742 0	26,000 0	20,087 0	620,952	0
1 Catherine O'Riordan, Vice President	(I) (II)	32,762 0	0	480 0	23,330 0	2,666 0	259,238 0	0 0
2 Catherine G Swartz, CFO	(I) (II)	24,873 0	0	480 0	23,220 0	27,852 0	276,425 0	0
3 Theresa Braun, Vice President	(I) (II)	20,737 0	1,000	480 0	21,710 0	10,340 0	254,267 0	0
4 Adriana Acosta, Head of Global Sales	(ı) (ıı)	76,672 0	62,014	149,799 0	17,123 0	4,479 0	310,087 0	0 0
5 Mark Cassar, Publisher	(I) (II)	58,123 0	14,189 0	0 0	18,019 0	27,765 0	218,096 0	0 0
<b>6</b> Randolph Nanna, Publisher Magazine Publish	(I) (II)	90,952 0	5,000 0	480 0	19,640 0	16,923 0	232,995 0	0
<b>7</b> Roy Levenson, CFO	(I) 2 (II)	46,196 0	18,000	937 0	17,422 0	15,517 0	298,072 0	0
8 Lisa McLaughlin, COO	(I) 2 (II)	04,591 0	14,189 0	320 0	22,002 0	10,191 0	251,293 0	0
<b>9</b> John Haynes, CEO AIP Publishing LLC	(I) (II)	10,810 0	79,000 0	26,075 0	26,000 0	10,760 0	552,645 0	0 0
10 Wendy Marriott, Head of IT Operations	(I) (II)	75,561 0	11,000	480 0	19,320 0	27,821 0	234,182	0
11 Evan Owens, CIO	(1) (11)	58,471 0	14,189 0	119,521 0	19,021 0	4,467 0	315,669 0	0 0
<b>12</b> Jason Wilde, Chief Publishing Officer	(ı) (ıı)	89,697 0	0	69,000 0	0 0	7,012 0	165,709 0	0 0
13 Larry Belmont, Dir of Business Development	(I) (II)	17,996 0	1,500 0	119,447 0	17,082 0	17,397 0	273,422 0	0
14 Joel LaCalamıta, Dir of Infrastructure & Commun	(I) (II)	28,310 0	3,000	107,024 0	16,566 0	27,526 0	282,426 0	0
15 Chris McMahon, Dir Content Management	(I) (II)	23,295 0	1,000	101,594 0	15,492 0	20,226 0	261,607 0	0
<b>16</b> Charles Minder, Section Manager	(I) (II)	01,400 0	1,500 0	67,989 0	13,117 0	25,338 0	209,344 0	0
<b>17</b> Hu Wang, Software Architect	(1) (11)	04,646 0	1,500 0	67,822 0	12,612	1,327 0	187,907 0	0

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**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493306010735

OMB No 1545-0047

2014

Open to Public Inspection

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization AMERICAN INSTITUTE OF PHYSICS INC	Employer identification number
	13-1667053

Return Reference	Explanation	
	Form 990, Part III, Line 4A	PROGRAM SERVICE ACCOMPLISHMENTS AP Publishing LLC (APP) is a single member limited liability company owned by The American Institute of Physics (APP). AIPP is a scholarity publish er in the physical and related sciences, providing the global science community with a com prehensive colliciton of otted, peer-review ed scientific papers and other information. Acc essed by researchers at nearly 4,000 institutions worldwide, APP's portfolo of 17 journal of happing from the provided of 17 journal of happing perfects which are provided in a perfect provided in the provided provided in the provided in a perfect provided in the provided in a perfect provided in the provided in a perfect provided in the

Return Reference	Explanation	
	Form 990, Part III, Line 4A	APPLIED SCIENTISTS, WITH RESEARCH MANAGERS AND LEADERS FROM INDUSTRY, ACADEMIA, AND GOVER NMENT, WITH THE GOAL OF ADVANCING THE CONTRIBUTIONS OF PHYSICS AND PHYSICISTS TO ECONOMIC GROWTH IPF MEETINGS FEATURE INVITED SPEAKER SESSIONS THAT COMPLEMENT AIP MEMBER SOCIETY M EETINGS EXPERTS DISCUSS NEW APPLICATIONS OF PHYSICS, PRODUCT DEVELOPMENTS, AND OTHER OPPORTUNITIES FOR SCIENCE IN TODAY'S ECONOMIC ENVIRONMENT THE IPF OFFERS PARTICIPANTS OPPORTUNITIES TO LEARN ABOUT INNOVATIONS IN THE FIELD, TO INTERFACE WITH THE PEOPLE DRIVING THEM, AND TO STRATEGIZE ABOUT DIRECTIONS FOR FUTURE ECONOMIC AND SCIENTIFIC PROGRESS

Return Reference	Explanation
VI, Line 4	Significant Changes to Organizational Documents AIPS CONSTITUTION AND BY LAWS WERE AMENDED TO EFFECTUATE THE RESTRUCTURING OF AIPS BOARD, TO COMPLY WITH APPLICABLE NEW YORK LAWS, TO CLARIFY AMBIGUOUS LANGUAGE, AND TO MODERNIZE AND STREAMLINE THE DOCUMENTS THE AMENDMENTS WERE APPROVED BY AIPS BOARD AND AIPS MEMBERS IN NOVEMBER 2014

Return Reference	Explanation
Form 990, Part VI, Line 6	Explanation of Classes of Members or Shareholder AIP IS A NON-STOCK, NON-PROFIT MEMBERSHIP CORPORATION

Return Reference	Explanation
Form 990, Part VI, Line 7a	How Members or Shareholders Elect Governing Body THE BOARD OF DIRECTORS IS COMPOSED OF THE FOLLOWING INDIVIDUALS -ONE (1) INDIVIDUAL ELECTED OR APPOINTED BY EACH MEMBER (A "MEMBER SOCIETY DIRECTOR") -NOT LESS THAN TWO (2) AND NOT MORE THAN FOUR (4) INDIVIDUALS, AS THE BOARD OF DIRECTORS SHALL DETERMINE, ELECTED BY THE BOARD OF DIRECTORS (THE "AT-LARGE DIRECTORS") -THE CHAIR OF THE BOARD OF DIRECTORS, THE CORPORATE SECRETARY, AND THE CHIEF EXECUTIVE OFFICERS, EX-OFFICIO (THE "EX-OFFICIO DIRECTORS")

Return Reference	Explanation
. ,	Form 990 Review Process THE FORM 990 IS PREPARED AND REVIEWED BY THE ORGANIZATION'S INDEPENDENT ACCOUNTING FIRM WITH ASSISTANCE FROM AIP'S SENIOR MANAGEMENT THE FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE AND THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING

Return Reference	Explanation
Form 990, Part VI, Line 12c	Explanation of Monitoring and Enforcement of Conflicts EACH YEAR A CONFLICT OF INTEREST FORM IS COMPLETED BY ALL REQUIRED INDIVIDUALS THE CHAIR OF THE AUDIT COMMITTEE REVIEWS AND EVALUATES IF THERE IS ANY CONFLICT OF INTEREST AND ITS IMPACT TO THE ORGANIZATION

Return Reference	Explanation
Form 990, Part VI, Line 15a	Compensation Review & Approval Process - CEO ON AN ANUUAL BASIS, AIP RETAINS A COMPENSATION CONSULTING FIRM TO REVIEW THE CURRENT COMPENSATION OF THE CEO, WHICH INCLUDES DETAILED COMPARISONS WITH COMPARABLY SIZED NOT-FOR-PROFIT ORGANIZATIONS AS WELL AS SELECTED PEER SCIENTIFIC AND ENGINEERING ORGANIZATIONS THIS INFORMATION IS REVIEWED BY THE SECRETARY OF THE BOARD AND THE CHAIR OF THE GOVERNING BOARD OF AIP THE CHAIR THEN DISCUSSES IT WITH THE EXECUTIVE COMMITTEE OF THE GOVERNING BOARD WHO MAKES THE FINAL DECISION OF THE COMPENSATION FOR THE CEO COMPENSATION FOR THE CEO IS DISCUSSED AND DOCUMENTED DURING THE EXECUTIVE SESSION OF AIP'S BOARD MEETINGS

Return Reference	Explanation
Form 990, Part VI, Line 15b	Compensation Review & Approval Process - Officers & Key Employees BIANNUALLY, AIP RETAINS A COMPENSATION CONSULTING FIRM TO REVIEW THE CURRENT COMPENSATION OF THE OPERATING OFFICERS THE REPORT INCLUDES DETAILED COMPARISONS WITH COMPARABLY SIZED NOT-FOR-PROFIT ORGANIZATIONS AND SELECTED PEER SCIENTIFIC AND ENGINEERING ORGANIZATIONS THIS INFORMATION IS REVIEWED BY THE VP OF HUMAN RESOURCES AND THE CEO THE CEO MAKES THE RECOMMENDATION TO THE COMPENSATION COMMITTEE FOR APPROVAL PERIODICALLY THIS PROCESS IS DONE FOR KEY EMPLOYEES AND IS REVIEWED AND APPROVED BY THE MANAGEMENT COMMITTEE THE DELIBERATIONS ARE DOCUMENTED IN THE MINUTES

Return Reference	Explanation
· ·	Other Organization Documents Publicly Available THE AIP WEBSITE HAS A GOVERNANCE SECTION THAT INCLUDES THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ALSO, ON THE WEBSITE ARE ANNUAL REPORTS THAT INCLUDE FINANCIAL HIGHLIGHTS FOR AIP

Return Reference	Explanation	
Form 990, Part XI, Line 9	Other Changes In Net Assets Or Fund Balances FASB Adoption Post Retirement Plan	\$ -107,515

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2014

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

# **Related Organizations and Unrelated Partnerships**

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization AMERICAN INSTITUTE OF PHYSICS INC **Employer identification number** 

13-1667053

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.												
(a) Name, address, and EIN (If applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity							

(1) AIP PUBLISHING LLC PUBLISHING 53,115,000 AIP NY 54,489,000 1305 WALT WHITMAN ROADSTE 300 MELVILLE, NY 11747 13-1667053

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(g) Section 512(b) (13) controlled entity?	
						Yes	No
(1) AMERICAN CENTER FOR PHYSICS ONE PHYSICS ELLIPSE	BUILDING	MD	501(C)(3)	11B	NO		No
COLLEGE PARK, MD 20740 52-1712905							

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

	•	•	5	•								
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	(h Disprop allocati	rtionate ions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agıng	<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	
(1) NEW CRYSTALLOGRAPHY JOURNAL LLC  1305 WALT WHITMAN ROAD SUITE 300 MELVILLE, NY 11747 90-0988084	PUBLISHING	DE	NA		0	9,220		No		Yes		50 000 %

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i) Section (b)(i) contro entil	n 512 13) olled
								Yes	No
(1) AIP GLOBAL INC	INTERNATIONAL	DE	AIP	C CORP	24,277	60,988	100 000 %	Yes	
ONE PHYSICS ELLIPSE COLLEGE PARK, MD 20740 27-0602778									

chedule R (Form 990) 2014		Pa	age <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or	36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	<b>1</b> c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	_
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	1
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	1
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
• Sharing of paid employees with related organization(s)	10	Yes	T
	<u> </u>	1	+-

р	Reimbursement p	oaid to	related	organization(s)	forexpenses

**q** Reimbursement paid by related organization(s) for expenses

- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction
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	, ,	· ·	
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AIP GLOBAL INC	Р	165,459	COST

1p Yes

No

No No Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

4											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	,)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	te Code V-U	BI Genera	.al or′	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount i	ın manag	₄ging '	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partn	.ier?	1 '
1	1	foreign	unrelated,	organizations?		'	1	of Schedu	ie .		1 '
1	1	country)	excluded from	(		'	1	K-1			1 '
1		1	tax under	í		'	1	(Form 106	,5)		1
1	1	1	sections 512-	(		'	1	,	´		1
1	1	1	514)		$\overline{}$	'		$\overline{}$		-	
1	1	1	1 ' '	Yes No		'	Yes N	No	Yes	No	1
1	<del>                                     </del>		1	$\overline{}$	+	+		+		<del></del>	4
1			<u> </u>			'					

# Part VII Supplemental Information

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

Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	NAME, ADDRESS & EIN OF RELATED ORGANIZATION New Crystallography Journal, LLC 1305 Walt Whitman Road, Suite 300 Melville, NY 11747 EIN 90-0988084
Schedule R, Part IV, LIne 1, Column D	For the calendar year 2014, AIP Publishing LLC, a disregarded entity with respect to AIP, owned 100% of AIP Global

Schedule R (Form 990) 2014