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DLN: 93493289017487 OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

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

foundations)

Do not enter social security numbers on this form as it may be made public Department of the Treasury ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Internal Revenue Service A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

Number and street (or P O $\,$ box if mail is not delivered to street address) 2000 FLORIDA AVE NW

City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 20009

C Name of organization AMERICAN GEOPHYSICAL UNION

For Paperwork Reduction Act Notice, see the separate instructions.

Doing business as

B Check if applicable ☐ Address change

 \square Name change

 \square Amended return

☐ Application pending

☐ Initial return ☐eturn/terminated

ıax						
ept private		2016				
c						
<u>90</u>	•	Open to Public Inspection				
		mopection				
D Employer Id	entif	ication number				
52-0955532	:					
E Telephone nu	mber					
(202) 462-6	900					
<u> </u>						
G Gross receipt	s \$ 46	6,699,831				
group return	for					
nates?		□Yes 🗹 No				
subordinates }?		☐ Yes ☐No				
attach a list	see	instructions)				
xemption nun	ıber	>				
4070 14 6						
on 1972 M S	tate	of legal domicile DC				
ITY						
f its net asset		l 45				
	4	15 15				
	5	154				
_	6 21,000					
•	7a	577,633				
	7b 377,035					
Year		Current Year				
2,513,039		2,746,787				
28,420,384		31,038,449				
2,681,190		1,717,115				
495,953		311,933				
34,110,566		35,814,284				
556,124		569,933				
0		0				
14,606,384		14,791,237				
0		0				
20,455,749		21,560,014				
35,618,257		36,921,184				
-1,507,691		-1,106,900				
Current Year		End of Year				
102,638,088		104,914,603				
16,805,727	15,439,631					
85,832,361		89,474,972				
	05,111,511					

Form **990** (2016)

Cat No 11282Y

		F Name and address of principal CHRISTINE W MCENTEE 2000 FLORIDA AVE NW WASHINGTON, DC 20009 mpt status 501(c)(3) 501(c) () 1e: ► http://sites.agu.org/	officer nsert no)	Н(b)	Is this a group ret subordinates? Are all subordinat included? If "No," attach a li Group exemption	es ıst (see ıı	•
K Fo	rm of c	organization 🗹 Corporation 🗆 Trust 🗀 Assoc	lation ☐ Other ▶	L Year	of formation 1972	M State of	f legal domicile DC
P	art I	Summary					
Activities & Governance	1	Briefly describe the organization's mission or AGU SEEKS TO PROMOTE DISCOVERY IN EAL		NEFIT OF	HUMANITY		
9,05		Check this box ▶ ☐ if the organization disc Number of voting members of the governing		more tha	n 25% of its net as	ssets	1
ø	- 1	Number of independent voting members of				4	1
<u>ě</u>		Total number of individuals employed in cale				5	15
5		Total number of volunteers (estimate if nece	, , , , , , , , , , , , , , , , , , , ,			6	21,00
AC		Total unrelated business revenue from Part	, ,			7a	
	- 1	Net unrelated business taxable income from	, , , , , , , , , , , , , , , , , , , ,			7b	,
			· ·		Prior Year	- 	Current Year
_	8	Contributions and grants (Part VIII, line 1h)			2,513,0	39	2,746,78
Ę	9	Program service revenue (Part VIII, line 2g)			28,420,3	884	31,038,44
Ravenue	- 1	Investment income (Part VIII, column (A), I			2,681,1	_	1,717,11
α	- 1	Other revenue (Part VIII, column (A), lines	•		495,9	_	311,93
	- 1	Total revenue—add lines 8 through 11 (mus			34,110,5	66	35,814,28
		Grants and similar amounts paid (Part IX, co			556,1	.24	569,93
	- 1	Benefits paid to or for members (Part IX, co			·	0	
s	- 1	Salaries, other compensation, employee ber			14,606,3	884	14,791,23
Expenses	- 1	a Professional fundraising fees (Part IX, colun			<u> </u>	0	
Þ	1 .	Total fundraising expenses (Part IX, column (D), lir					
죄	- 1	Other expenses (Part IX, column (A), lines 1			20,455,7	49	21,560,01
	- 1	Total expenses Add lines 13–17 (must equa			35,618,2	_	36,921,18
		Revenue less expenses Subtract line 18 fro	, , , , , , ,		-1,507,6	_	-1,106,90
sets or		,		Beg	inning of Current Yo	ear	End of Year
a se	20	Total assets (Part X, line 16)			102,638,0	188	104,914,60
Net As Fund B	21	Total liabilities (Part X, line 26)			16,805,7	27	15,439,63
žĪ	22	Net assets or fund balances Subtract line 2	1 from line 20		85,832,3	861	89,474,97
Jnd		Signature Block halties of perjury, I declare that I have examile and belief, it is true, correct, and complete					
any	knowl	edge					
		***** Signature of officer			2017-10-16 Date		
Sig					Butto		
Her	е	CHRISTINE W MCENTEE CEO Type or print name and title					
		Print/Type preparer's name	Preparer's signature	Date		TIN	
Da:	id	Deborah G Kosnett	Deborah G Kosnett	Pare	Check L If P	00290720	
Pai Dra		Firm's name Tate and Tryon	<u> </u>		self-employed Firm's EIN ► 52-	1855942	
	epar	Firm's address > 2021 Street NW Suite	400		Phone no (202) 2		
US	e Or	Washington, DC 20036					
Чау	the IF	RS discuss this return with the preparer show	n above? (see instructions)			✓ Y€	es 🗆 No

Form	990 (2016)					Page 2
Par	t IIII State	ment of Program Se	rvice Accomplis	hments		
	Check	if Schedule O contains a r	esponse or note to	any line in this Part III		🗹
1		e the organization's miss		·		
HUM	ANITY AGU GAL	E AMERICAN GEOPHYSIC LVANIZES A COMMUNITY DWER TO ENSURE A SUS	OF EARTH AND SPA	TO PROMOTE DISCOVE CE SCIENTISTS THAT CO	RY IN EARTH AND SPACE SCI OLLABORATIVELY ADVANCES	ENCE FOR THE BENEFIT OF AND COMMUNICATES
2	-	zation undertake any sigi	nıfıcant program ser	• •	ich were not listed on	
	•	the these new services or				L res E No
3	•	zation cease conducting,		changes in how it condu	cts any program	
3	_	zation cease conducting,	-			. □Yes ☑No
	If "Yes," descr	be these changes on Sch	edule O			
4	Section 501(c)		zations are required	to report the amount of	argest program services, as n grants and allocations to oth	
4a	(Code) (Expenses \$	13,223,738	ıncludıng grants of \$	123,120) (Revenue \$	13,641,426)
	See Additional D	Pata				
4b	(Code) (Expenses \$	8,557,901	ıncludıng grants of \$	155,163) (Revenue \$)
	See Additional D	ata				
4c	(Code) (Expenses \$	6,138,967	ıncludıng grants of \$) (Revenue \$	17,229,370)
	See Additional D	eata				
	See Additiona	l Data Table				
4d	Other program	n services (Describe in Sc	hedule O)			
	(Expenses \$	5,480,651	including grants of	\$ 291,65	50) (Revenue \$	173,543)
4e	Total progra	m service expenses 🕨	33,401,2	57		

Yes

Yes

1

2

3

4

5

6

7

8

9

10

11a

11b

11c

11d

11e

11f

12a

13

14a

14h

15

16

17

18

19

Yes

Yes

Yes

Yes

Yes

Page 3

No

No

No

No

Nο

Nο

No

Νo

Nο

No

No

No

No

Nο

Nο

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Checklist of Required Schedules 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . 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 💆 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?

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?

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? 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 🛸 . . .

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

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 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 V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 🛸

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

12a Did the organization obtain separate, independent audited financial statements for the tax year? b Was the organization included in consolidated, independent audited financial statements for the tax year?

business, investment, and program service activities outside the United States, or aggregate foreign investments

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional ঙ 뉰

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

No No

Yes

Yes

29

Yes

Yes

Yes

Yes

20a

20b

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

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34

35a

35h

36

37

Yes

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Part IV Checklist of Required Schedules (continued)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

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

Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

No

Page 4

No

Nο

No

Nο

Nο

Nο

Nο

No

Nο

Νo

Nο

Nο

No

Nο

Nο

Nο

Nο

No

Nο

	990 (2016)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V	•		<u> </u>
15	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 212		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and	10	162	
Za	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		.,	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	Yes Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30	res	
Ta	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 ►CA , UK 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
Ĭ	1. Too, to line ou of ob, and the organization me form occor is a first of the occor.	5 c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	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		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
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		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	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?			
٦.	Null the energy organization make any tayable distributions under costion 40662	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	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)			
) -	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

OHIH	550 (2010)			Page				
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes				
	Check if Schedule O contains a response or note to any line in this Part VI			✓				
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 15							
	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	b Enter the number of voting members included in line 1a, above, who are independent 1b							
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		No				
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, stockholders, or other persons who had the power to elect or appoint one or more							
b	members of the governing body?	7a 7b	Yes	No				
_	persons other than the governing body?							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes Yes					
b Each committee with authority to act on behalf of the governing body?								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
Se	<mark>ction B. Policies</mark> (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)					
			Yes	No				
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No				
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						
l1a	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							
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	12c	Yes					
12	Schedule O how this was done	13						
L3	, ,		Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
L5	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					
b	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)							
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt							
	status with respect to such arrangements?	16b						
Se	ction C. Disclosure							
L 7	List the States with which a copy of this Form 990 is required to be filed▶							
L8	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							
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)							
L9	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 MICHAEL ANDREWS 2000 FLORIDA AVE NW WASHINGTON, DC 20009 (202) 462-6900							
		F	orm QQ	0 (2016				

compensated employees, and former such persons

(A)

Name and Title

(F)

Estimated

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
year ● Lıst all	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount ation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
• List all o	of the organization's current key employees, if any See instructions for definition of "key employee "
who receive	organization's five current highest compensated employees (other than an officer, director, trustee or key employee) In reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the In and any related organizations
• List all o	of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

organiza List 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

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

(B)

Average

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wany hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensat employee Individual trustee or director Officer Former organizations MISC) related Institutional Trustee below dotted organizations employee line) See Additional Data Table

730 11th Street NW Washington DC, DC 20001

compensation from the organization ▶ 29

Page **8**

Form 990 (2016)													Page 8	
Part VII Section A. Officers, Direc	tors, Trustees	, Key l	Empl	loye	ees,	and	High	nest Co	mpensate	ed Employees (cont	inued)		
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, i in of tor/t	t che unle: ficer	and a	son	Rep comp fro organi	Reportable Repor mpensation comper from the from re anization (W- organizat		from related organizations (W-		(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/103	99-MISC)	2/1099-MISC		relat organiza	ed	
See Additional Data Table														
											+			
											+			
											4			
											\top			
											+			
							-				+			
											4			
1b Sub-Total	art VII, Sectio					•		ı			Ė			
d Total (add lines 1b and 1c)			<u></u>			>		3	,112,886		0		457,294	
2 Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rec	eived mo	ore than \$1	00,000				
or reportable compensation from the	organization P													
3 Did the organization list any former line 1a? If "Yes," complete Schedule.			ee, k		mple	oyee,	or hi	ghest co	mpensated	employee on	3	Yes	No No	
For any individual listed on line 1a, is organization and related organization individual	s greater than \$	150,00	0 <i>If</i>							n the	_	V		
5 Did any person listed on line 1a recei									ation or indi	vidual for	4	Yes		
services rendered to the organization	·	ete Sch	eauie	3 10	or su	ісп реі	son	• •			5		No	
Section B. Independent Contract		dd	d			oto vo	+1+	**********	d	#100 000 of som				
1 Complete this table for your five high from the organization Report compe											npens	sation		
Name	(A) and business addre								Dosc	(B) ription of services		(C Comper		
HICKOK COLE ARCHITECTS	and business duare	.33								iovation Services			,363,913	
.023 31st STREET NW														
Vashington DC, DC 20007 PROJECTION PRESENTATION									AV Services			1	,321,070	
PO Box 890472									AV Services			1	,521,070	
Charlotte, NC 282890472									Docorator S	orvicos		1	011 091	
Freeman									Decorator S	ei vices		1	,011,981	
PO Box 650036 Dallas, TX 752650036														
VIRTUAL LOGIC GROUP				-	_				IS infrastruc upgrades/m	ture resources aı	T		671,915	
4362 Huntley Ct Woodbridge, VA 22192									'					
INTERFACE ENGINEERING									Building Rer	iovation Services			585,197	
									1					

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part		Statement of	Bouonus										Page 9
Part	VЦ	Check if Schedule		n rocno	nce or ne	ate to any	line in t	hic Dart VII	т				
		CHECK II SCHEUUI	e O contains	a respo	orise of The	ote to any	(A) revenue	Rela exe fun	B) ted or empt ction	(C) Unrelati busine reveni	ted ess	(D) Revenue excluded from tax under sections
	1	a Federated campaign	ns	1a					rev	enue			512-514
nts Ints		b Membership dues		1b	1	,924,758							
ira! 10u		c Fundraising events		1c									
S. C		d Related organization		1d									
gite Bar		e Government grants (co		10 1e		221,930							
<u>ي</u> ج		f All other contributions,	•	<u> </u>									
tio: S S		and similar amounts no above		1 f		600,099							
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution in lines 1a-1f \$	ons included										
Cor	l	h Total. Add lines 1a-1	f			>	2	.,746,787					
	<u> </u>	Totali ida iiles 1a 1			<u> </u>	Business		.,746,767					
Program Service Revenue	28	PUBLICATIONS			t		900099	17,2	23,480	16,691	,965	531,5	15
Ę.	Ŀ	MEETINGS					900099	13,6	641,426	13,595	,308	46,1	18
Ce	c	SOCIETY ACTIVITIES					900099	:	.73,543	173	,543		
er v	c	ı ————		_	-								
E S	e	•		_	-								
gra	f	All other program se	rvice revenue		L								
ď	g	Total.Add lines 2a-2f			>	31,0	038,449						
		Investment income (ir			nterest, a	and other		4 705 22					4 705 224
		sımılar amounts) .					-	1,795,22	1				1,795,221
		Income from investme Royalties		-		_	 	5,89	0	5,890			
	3	Royaldes	(ı) Rea		(II) Pe	ersonal	1	5,05	-				
	6a	Gross rents	(1) 1100		(,								
			3	06,125									
		b Less rental expenses		0									
	•	Rental income or	3	06,125									
		(loss) d Net rental income or	- (lasa)				4	306,12	5				306,125
	•	Net rental income of	(i) Securit	ies l	(11)	Other		300,12	1				300,123
	7a	Gross amount from sales of assets other than inventory	, ,	07,359	, ,								
	١	b Less cost or other basis and	10,8	85,465									
		sales expenses C Gain or (loss)	-	78,106									
	•	d Net gain or (loss) .		•		>	1	-78,10	6				-78,106
Other Revenue	82	Gross income from fu (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of									
3ev	ı	b Less direct expenses		ь			1						
er F		c Net income or (loss)		L	ents .	· •	_						
Œ.	98	Gross income from g		es									
		See Part IV, line 19		а									
	ı	Less direct expenses	s	ь									
		c Net income or (loss)		activiti	ies	•							
	10	a Gross sales of invent returns and allowanc		a									
	ı	Less cost of goods s	sold	Ь		82	!						
	•	Net income or (loss)	from sales of	invent	ory .	. •		-8	2				-82
		Miscellaneous	Revenue		Busine	ss Code							
	11	La											
	١	b											
	•	c										T	
		d All other revenue .											
	•	e Total. Add lines 11a	-11d			>			<u></u>				
	12	2 Total revenue. See	Instructions			. •		35,814,28	4	30,466,706		577,633	2 023 158
							1	_5,517,20	1	_ 5, .55,700		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,023,158 Form 990 (2016)

IV. line 22

and 16

Statement of Functional Expenses

2 Grants and other assistance to domestic individuals. See Part

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401

e Professional fundraising services See Part IV, line 17

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)

(k) and 403(b) employer contributions) .

domestic governments See Part IV, line 21

4 Benefits paid to or for members

section 4958(c)(3)(B) . 7 Other salaries and wages

9 Other employee benefits .

d Lobbying

12 Advertising and promotion .

13 Office expenses .

15 Royalties

16 Occupancy

20 Interest . .

23 Insurance .

21 Payments to affiliates . .

expenses on Schedule O)

c ALLOCATED OVERHEAD

e All other expenses

a HONORARIA/CONTRIBUTIONS

b PRODUCTION/PUBLICATIONS

d OUTSOURCING & LOGISTICS

17 Travel .

14 Information technology

11 Fees for services (non-employees) a Management . . .

f Investment management fees .

10 Payroll taxes .

b Legal .

c Accounting

key employees .

ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)								
Check if Schedule O contains a response or note to any line in this Part IX								
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses				
Grants and other assistance to domestic organizations and	37,592	37,592						

378,354

153,987

2,556,825

9,383,458

1,310,545

813,009

46,851

156,275

119,682

351,901

70,515

4,475,552

1,309,173

1,029,410

6,151

840,073

1.564.452

6,677,439

1,032,033

1.250.359

939,053

670,647

541,676

211,702

36,921,184

109,179

157,891

727,400

378,354

153,987

1,501,295

5,721,166

421,522

91,169

511,422

22

34,350

1,899,937

21,174

920,179

219,533

1.013.261

6,172,003

71,910

11,441

1,207,122

931,940

540,176

211,702

33,401,257

11,323,979

6,021

1,010,516

3,490,371

1,215,752

283,749

46,829

121,925

119,682

351,901

47,421

369,949

795,345

840,073

495.743

206,659

157,891

960.123

97,738

9.551

4,515

1,500

1,568,815

-11,576,015

130

2,223,733

293,734

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses
	27.500	07.500	

✓

45,014

171,921

12,144

3,624

17,838

351,882

1,920

19,045

14,532

55.448

298,777

33,686

2,598

922,683

1,951,112

Form 990 (2016)

	✓



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Liabilities 22

Fund Balances

Assets or 30

Net

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part IX .			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			416	1	499
	2	Savings and temporary cash investments .		[5,899,199	2	5,524,349
	3	Pledges and grants receivable, net			9,545	3	30,710
	4	Accounts receivable, net			2,011,122	4	2,347,334
	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensations of Schedule L. Loans and other receivables from other disqualitiection 4958(f)(1)), persons described in section	ited em fied per	ployees Complete Part csons (as defined under		5	
ssets	7	contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L Notes and loans receivable, net			6 7		
SS	8	Inventories for sale or use				8	
4	9	Prepaid expenses and deferred charges			551,050	9	410,543
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	25,360,993			
	ь	Less accumulated depreciation	10b	16,534,526	7,239,018	10 c	8,826,467
	11	Investments—publicly traded securities .			45,857,780	11	47,568,124
	12	Investments—other securities See Part IV, line	11 .		39,836,633	12	39,084,923
	13	Investments—program-related See Part IV, line	e 11 .			13	

Page **11**

1.121.654

6,388,360

1,289,295

4,025,000

3.736.976

15,439,631

81.645.897

7,098,527

89,474,972

104.914.603 Form **990** (2016)

730.548

104.914.603

14

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22 23

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30

31 32

33

34

1.233.325

6.059.570

2,273,908

4,505,000

3.967.249

16,805,727

78,478,298

6,731,023

85,832,361

102,638,088

623.040

102,638,088

Yes

Nο

Form 990 (2016)

2c

3a

3b

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Additional Data

Software ID:

Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Form 990 (2016)

Form 990, Part III, Line 4a:

MEETINGS - AGU has a diverse meeting portfolio that offers meetings of various sizes and formats. Most meeting participants present a poster and/or a talk on their latest scientific findings contributing to advancing Earth and Space science. Individuals must pay a registration fee to participate. The abstract submissions covering their presentations are published as part of the scientific program for each meeting and available via AGU's website The AGU Fall Meeting is recognized as the leading meeting in the Earth and space sciences community with programming focused on inter- and multiple disciplinary sciences and policy and societal issues. It is the largest meeting in this field attracting more than 23,000 participants at the December 2016 meeting. The meeting generates hundreds of press and media stories about Earth and science sciences. in prominent sources through distribution on the television, news print and through other electronic outlets. The 2016 Ocean Sciences Meeting was held 21-26 February 2016, with more than 5,000 attendees at the Ernest N Morial Convention Center, located at 900 Convention Center Blvd , New Orleans, LA 70130 Cosponsored by AGU,

ASLO, and TOS, the Ocean Sciences Meeting will consist of a diverse program covering topics in all areas of the ocean sciences discipline The Chapman Conferences are small topical conferences that focus on current and emerging science issues. Five Chapman conferences were held in 2016 in four different countries with attendance ranging between 70 120 participants

Form 990, Part III, Line 4b:

Marketing COMMUNICATIONS AND Engagement - Marketing, communications and engagement programs seek to 1) build and maintain AGU's reputation as a leader, collaborator and sought after partner within and outside of the Earth and space science community, 2) promote AGU and its programs, initiatives and services to current and

potential members, as well as to the broader Earth and space science community, and 3) educate the public, at all levels and across all sectors, on the importance and impact of the Earth and space sciences, particularly as it relates to societal well-being. Major accomplishments in these areas during the 2016 fiscal year include expanding

Eos org, a news website dedicated to providing trustworthy news and perspectives about the Earth and space sciences and their impact, as well as a bi-weekly news magazine, reframing and relaunching the Sharing Science program, which seeks to educate and empower scientists to share their knowledge with the public

Form 990, Part III, Line 4c:

AGU PUBLISHES MORE THAN 50.000 PAGE EOUIVALENTS ANNUALLY

JOURNALS WITH OTHER SOCIETIES THESE PUBLICATIONS COVER THE EARTH SCIENCES, PLANETARY SCIENCES, SOLAR-TERRESTRIAL AND SPACE PHYSICS, AND THE ENVRONMENTAL SCIENCES OVERALL, AGU JOURNALS PUBLISHED NEARLY 6,000 PEER-REVIEWED PAPERS IN 2016 REPRESENTING NEW RESEARCH IN THE EARTH AND SPACE SCIENCES COVERAGE OF THE PAPERS HELPS MAKE THESE SCIENTIFIC STUDIES AVAILABLE TO THE PUBLIC. AND MANY OF THE PAPERS ARE USED IN IMPORTANT

ASSESSMENTS ALL AGU JOURNALS AND BOOKS ARE DISTRIBUTED ELECTRONICALLY VIA THE INTERNET, SOME STILL HAVE A MINOR PRINT COMPONENT ONE OR MORE OF THE PUBLICATIONS REACH EACH OF AGU'S MORE THAN 60.000 MEMBERS. AGU PUBLICATIONS REACH MANY SCIENTISTS AND STUDENTS BEYOND THE AGU. MEMBERHSIP. AS WELL AS OTHER MEMBERS OF THE PUBLIC. THROUGH MORE THAN 1.300 LIBRARIES WORLDWIDE. THREE OF THE JOURNALS ARE FULLY OPEN-ACCESS.

AND ALL OTHER AGU JOURNAL CONTENT IS FREELY AVAILABLE AFTER 24 MONTHS FULL-TEXT DOWNLOADS AVERAGED ABOUT 1,000,000 PAPERS PER MONTH

WORLDWIDE IN 2016 PUBLICATIONS ARE AVAILABLE IN OVER 150 COUNTRIES, AND ARE AVAILABLE FOR FREE IN DEVELOPING NATIONS THROUGH RESEARCH4LIFE

PUBLICATIONS - AGU PUBLISHES 20 JOURNALS REPRESENTING PEER-REVIEWED RESEARCH PAPERS AS WELL AS NUMBEROUS BOOKS, AND CO-PUBLISHES TWO OTHER

(Code 291.650) (Revenue \$ (Expenses \$ 4.558.808 including grants of \$ SCIENCE - The AGU Science Department is responsible for AGU talent pool and professional education programs providing support to AGU

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

members through all career stages, and for serving as focal point for scientific program-related activities which cut across AGU disciplinesincluding areas such as scientific ethics programs, honors and recognition programs for AGU members, and for AGU scientific initiatives such as the Thriving Earth Exchange Program

(Code (Expenses \$ including grants of \$) (Revenue \$ 921,843

173,543) SOCIETY ACTIVITIES AND MEMBERSHIP SERVICES

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensatemployee Former Individual trustee or director Institutional MISC) organizations MISC) related below dotted organizations employee line)

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Margaret Leinen	8 00	X		x		0	
President						3	
Eric A Davidson	5 00	V		V		0	
President-Elect		^		_		0	

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Carol Finn

Louise Pellerin

Susan Webb

John Bates

Director

Director

Director

Director

Director

Carlos Dengo

Rana A Fine

General Secretary

International Secretary

Robin Elizabeth Bell

Catherine Constable

Immediate Past President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent, Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related any hours and a director/trustee) organizations organization

(F)

Estimated

compensation

from the

0

0

0

89,468

60,212

18,970

15,792

43,906

700,436

362,433

171,084

148,741

250,635

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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37 50

37 50

37 50

37 50

37 50

Director

CHRISTINE W MCENTEE

Chief Executive Officer

Chief Operating Officer

Chief Financial Officer (until 7/16)

Michael S Andrews

Director of Finance

MARK HERNICK

Royce B Hanson

Director, Publications

FRANK KRAUSE

	formulated							(144 3 /4 000	Organizacions	ITOTIL CITE
	for related organizations below dotted line)		Institutional Trustee	⊕ ⊕	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Josh Greenberg	5 00	Х						0	0	0
Director		^						0	0	Ĭ
Seth Kahan	5 00	.,								

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		Ū.	Star व		เลย			
Josh Greenberg	5 00	x				0	0	
Director							,	
Seth Kahan	5 00	x				0	0	
Director		_ ^					ŭ	

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Josh Greenberg	5 00	×			0	0	
Director		^			5	3	
Seth Kahan	5 00	×			0	0	
Director		,			3	,	
Kelly Klima	5 00	_			0	0	
Director		_ ^				U	

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Director		,					
Kelly Klima	5 00	×			0	0	0
Director		,				5	Ĭ
Cathryn A Manduca	5 00	V			0	0	0
Director		^					Ĭ
Soroosh Sorooshian	5 00						

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Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation week (list person is both an officer from the from related and a director/trustee) organization organizations

(F)

Estimated

amount of other

compensation

53,276

25,048

31,367

17,309

19,790

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	any hours	and	a dı	ecto	r/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	<u> </u>	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Dana Rehm Director, MCE	37 50				x			243,055	0	29,414
CAMALA KOVALICK Director, Information Systems	37 50				×			171,196	0	24,104
Lauren Parr Director, Meetings	37 50				х			187,513	0	28,638

CAMALA KOVALICK			х		171,196	. 0	
Director, Information Systems			^		1/1,130		
Lauren Parr	37 50		х		187,513	0	
Director, Meetings			^		107,515	١	
BILLY WILLIAMS	37 50						

37 50

37 50

37 50

37 50

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Director, Science

Alexandra Shultz

Rajul Pandya

Patricia Yaya

Program Director

Director, Public Affairs

Director, Human Resources

HARRY FURUKAWA

Director, Product Development

			X		1/1,196		1
Director, Information Systems					1,1,130	Ç	
Lauren Parr	37 50		х		187,513	0	
Director, Meetings							
BILLY WILLIAMS	37 50			х	199.966	0	

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194,053

169,073

164,146

150,555

efile	e GRA	APHIC prii	nt - DO NOT PROCES	S As Filed Data -			DLN: 9	3493289017487
SCI	IED	ULE A	Public	Charity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047
(For	m 990			organization is a sect	ion 501(c)(3) d	organization o		2016
990E	(Z)			4947(a)(1) nonexe ▶ Attach to Form				2010
		the Treasury	► Information ab	out Schedule A (Form			uctions is at	Open to Public Inspection
lame	e of th	ue Service ne organiza		<u>www.irs.g</u>	<u>00/10/11/990</u> .		Employer identific	<u> </u>
MERI	CAN GE	OPHYSICAL U	NION				52-0955532	
Pai			for Public Charity St				See instructions.	
	rganız		a private foundation becau	•	•	,		
1		•	onvention of churches, or			. , , ,	(A)(I).	
2			scribed in section 170(b		,			
3			or a cooperative hospital s	-				
4		name, city,	esearch organization oper and state		-			·
5	Ш		ation operated for the ben (iv). (Complete Part II)	efit of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 1/0
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(۸)(v).	
7			ation that normally receive (0(b)(1)(A)(vi). (Comple		s support from a	governmental (unit or from the gener	al public described in
8		A communi	ty trust described in sect i	ion 170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization rant college of agriculture					ege or university or a
LO	✓	from activit	ation that normally receive ties related to its exempt in income and unrelated but see section 509(a)(2).	functions—subject to cer siness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
l 1	П		ation organized and opera		r public safety S	ee section 509	(a)(4).	
l 2		more public	ation organized and opera ly supported organization through 12d that describ	is described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
а	П		supporting organization of			•		giving the supported
	_		n(s) the power to regularl Part IV, Sections A and		ority of the direct	ors or trustees	of the supporting orga	nization You must
b		Type II. A manageme	supporting organization s nt of the supporting organ	upervised or controlled in nization vested in the sar				
С			plete Part IV, Sections . unctionally integrated.		n operated in cor	nection with a	nd functionally integra	ted with its
	Ш		organization(s) (see instru					ited with, its
d		functionally	on-functionally integra integrated The organiza i) You must complete F	tion generally must satis	fy a distribution i	requirement and		
e			box if the organization red	•	-		/pe I, Type II, Type II	I functionally
f			or Type III non-functiona		organization			
g			of supported organization ing information about the		5)			
		f supported of		(iii) Type of	(iv	v)	(v)	(vi)
				organization (described on lines 1- 10 above (see instructions))	Is the organiz your governir		Amount of monetary support (see instructions)	Amount of other support (see instructions)
					Yes	No	-	
Γotal								

Sch	edule A (Form 990 or 990-EZ) 2016						Page 2
P	art III Support Schedule for (Complete only if you che III. If the organization fa	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or	if the organization	on failed to quali	
	ection A. Public Support	no to quanty un	441 1110 10313 113	tea below, pied	se complete i al		
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
	(or fiscal year beginning in) ▶	(a)2012	(0)2013	(0)2014	(4)2013	(e)2010	(T)TOtal
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						,
	organization's benefit and either paid						
3	to or expended on its behalf The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
	line 4						
S	ection B. Total Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	. ,	, ,	, ,	 ``	. ,	
8	Gross income from interest,				+		
٠	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						
11	(Explain in Part VI) Total support. Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ns)			12	
13	First five years. If the Form 990 is for	r the organization	's first, second, th	ird, fourth, or fifth	h tax year as a sec	tion 501(c)(3) org	anızatıon,
	check this box and stop here					▶ [
S	ection C. Computation of Public						
14	Public support percentage for 2016 (lin	e 6, column (f) dı	vided by line 11,	column (f))		14	
15	Public support percentage for 2015 Sch	nedule A, Part II, l	ine 14			15	
16a	33 1/3% support test—2016. If the	organization did r	ot check the box	on line 13, and lir	ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif						ightharpoons
Ŀ					and line 15 is 33 i	1/3% or more, chec	ck this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ □
17 a	10%-facts-and-circumstances test						
	is 10% or more, and if the organization						
	in Part VI how the organization meets t	the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	icly supported	. \square
	organization	2045 1511			12.46.46	47 11	▶ □
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	supported organization			. 5-	,	. ,	►□
18		n did not check a	box on line 13, 1	6a, 16b, 17a, or 1	L7b, check this box	k and see	
	instructions		,	. ,	·		ightharpoons
					Schadu	le A (Form 990 o	r 990-F7) 2016

P	art III Support Schedule fo						
	(Complete only if you						Part II. If
	the organization fails tection A. Public Support	o quality under i	the tests listed i	below, please co	omplete Part II.)	
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
	(or fiscal year beginning in) ▶	(4)2012	(6)2013	(6)2014	(d)2013	(6)2010	(1) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,520,077	4,093,488	4,195,143	2,513,039	2,746,787	17,068,534
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	31,549,011	12,992,652	27,547,038	27,516,431	30,466,706	130,071,838
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	35,069,088	17,086,140	31,742,181	30,029,470	33,213,493	147,140,372
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	20,678	3,890	57,475	18,270	18,340	118,653
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	20,678	3,890	57,475	18,270	18,340	118,653
8	Public support. (Subtract line 7c from line 6)						147,021,719
Se	ction B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
9	Amounts from line 6	35,069,088	17,086,140	31,742,181	30,029,470	33,213,493	147,140,372
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,163,737	15,781,394	2,513,179	2,046,350	2,101,346	35,606,006
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	13,163,737	15,781,394	2,513,179	2,046,350	2,101,346	35,606,006

ь	Unrelated business taxable income	
	(less section 511 taxes) from	

Net income from unrelated

assets (Explain in Part VI) Total support. (Add lines 9, 10c,

check this box and stop here

11, and 12)

11

13

14

15

16

20

business activities not included in line 10b, whether or not the	
business is regularly carried on	
Other income Do not include gain	
or loss from the sale of capital	

48,232,825 32,867,534 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

Section C. Computation of Public Support Percentage

Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2015 Schedule A, Part III, line 15

34,255,360

32,075,820

35,314,839

182,746,378

15

19 480 %

19 890 %

16

80 450 %

17

18

80 050 %

▶□

ightharpoons

Section D. Computation of Investment Income Percentage

Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) Investment income percentage from 2015 Schedule A, Part III, line 17

19a 331/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2015. 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

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

Page 4

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

_	If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,		
	describe the designation If historic and continuing relationship, explain	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)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
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 Part VI when and how the organization made the		

эa	Did the organization have a supported organization described in section 301(c)(4), (5), or (6), it res, answer (b) and (c)		
	below	3a	
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 Part VI 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 Part VI 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		

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI 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 Part VI 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 12a or 12b ın 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	
	Supervised by or in connection with its supported organizations		

	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI 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 12a or 12b 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	4b	
С	supervised by or in connection with its supported organizations 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)? 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		

4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın 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	
С	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)? 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	5a	

U	bld the organization have ditinate 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	
С	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)? 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	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		
	organization's organizing document?	5b	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)			
			Yes	No
11	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		
C-	ection B. Type I Supporting Organizations			
se	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 of	ır 🗀	1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
			•	•
Se	ection C. Type II Supporting Organizations		Yes	N.
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
				•
Se	ection D. All Type III Supporting Organizations		T.	
	Did the appropriate any would be each of the grown which are not the best first first of the COL seconds of the	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of			
	Form 990 that was most recently filed as of the date of notification, and (III) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	<u> </u>	-	<u> </u>
2	Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported arrangement	n 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 Part VI how the organization	"		
	maintained a close and continuous working relationship with the supported organization(s)	<u> </u>		
_	Divinion of the valeting described in (2) did the surround of	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
			1	
	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 instr	actions)		
a				
b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))
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 supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3		
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>		
	substantially all of its activities	2a		
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 Part VI the reasons for the			
	organization's position that its supported organization(s) would have engaged in these activities but for the organization	s		
_	involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1	
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		,	1	

-	Add lifles 1 till odgif 5			
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	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 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		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 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		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

b Excess from 2013.

d Excess from 2015.

e Excess from 2016. . . .

c Excess from 2014.



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Political Campaign and Lobbying Activities

DLN: 93493289017487

2016

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

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

• S	ection 501(c)(3) organizations Cor Section 501(c) (other than section 5 Section 527 organizations Complet	n Form 990, Part IV, Line 3, or Form 9 nplete Parts I-A and B Do not complete i01(c)(3)) organizations Complete Parts te Part I-A only n Form 990, Part IV, Line 4, or Form 9	Part I-C I-A and C below	Do not cor	mplete Part I-	В	·	n
● S f the Prox ● S	Section 501(c)(3) organizations that e organization answered "Yes" or ky Tax) (see separate instruction Section 501(c)(4), (5), or (6) organiz		ider section 501(h	n)) [`] Comple	te Part II-B D	o noi 90-E	t complete Pa Z, Part V, line	art II-A e 35c
	ne of the organization RICAN GEOPHYSICAL UNION				Employer id 52-0955532	lentii	fication num	iber
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a sectio	n 527 orga	niza	tion.	
1 2	Provide a description of the organ Political expenditures	nization's direct and indirect political can	npaign activities i	n Part IV	•	\$.		
3	Volunteer hours							
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise ta	ax incurred by the organization under se	ection 4955		•	\$.		
2	Enter the amount of any excise ta	ax incurred by organization managers ur	nder section 4955	i	>	\$.		
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	hıs year?				☐ Yes	□ No
4a	Was a correction made?						☐ Yes	□ No
	If "Yes," describe in Part IV		- 501/2)		501/->/	2)		
	<u> </u>	nization is exempt under sectio						
1	·	ed by the filing organization for section	•			\$.		
2	function activities	anızatıon's funds contributed to other or	rganizations for s	ection 527	exempt •	\$.		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	, lıne 17b	>	\$.		
4	Did the filing organization file Fori	•					☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	e filing orga political orga	inization's fun anization, suc	ids A	Iso enter the	
	(a) Name	(b) Address	(c) EIN	filing o	ount paid fron organization's If none, enter -0-		(e) Amount of contributions and promp directly delived separate programments or an enter-	received otly and vered to a political If none,
2								
3								
1								
5								
5								

120,000

250,000

112,792

250,000

3,157

44,879

250,000

21,360

250,000

135

Schedule C (Form 990 or 990-EZ) 2016

299,031

1,000,000

1.500.000

4,193

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

SCHEDULE D

Supplemental Financial Statements

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

➤ Attach to Form 990.

DLN: 93493289017487 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Open to Public

AMI	ERICAN GEOPHYSICAL UNION				52.005			
Da	rt I Organizations Maintaining Donor	Advised Funds or Ot	her Si	milar Fund	52-095			
	Complete if the organization answere				15 OI ACCOU	iics.		
		(a) Donor advised	funds		(b) Fur	nds and o	other accour	nts
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor funds are the organization's property, subject to t	advisors in writing that the the organization's exclusiv	e assets e legal	s held in dono control?	or advised		☐ Ye	es 🗌 No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?					ose	☐ Ye	es 🗌 No
Pa	rt III Conservation Easements. Complet	e if the organization ar	iswere	d "Yes" on	Form 990, P	art IV, l	ıne 7.	
1	Purpose(s) of conservation easements held by the	e organization (check all th	nat app	ly)				
	\square Preservation of land for public use (e g , rec	reation or education)	□ P	reservation o	f an historical	ly impor	tant land are	ea
	Protection of natural habitat		□ P	reservation c	of a certified h	istoric st	ructure	
	Preservation of open space							
2	Complete lines 2a through 2d if the organization heasement on the last day of the tax year	neld a qualified conservati	on cont	ribution in th			on the End of	the Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easemen	ts			2b			
C	Number of conservation easements on a certified		٠,		2c			
d	Number of conservation easements included in (c) structure listed in the National Register) acquired after 8/17/06, a	and not	on a historic	2d			
3	Number of conservation easements modified, trar tax year ▶	nsferred, released, extingu	ııshed,	or terminated	l by the organ	ızatıon d	uring the	
4	Number of states where property subject to conse	ervation easement is locat	ed ►		_			
5	Does the organization have a written policy regar and enforcement of the conservation easements i		ng, Insp	ection, handl	ling of violatio	ns, [☐ Yes [□ No
6	Staff and volunteer hours devoted to monitoring, •	inspecting, handling of vio	olations	, and enforcir	ng conservatio	n easem	ents during	the year
7	Amount of expenses incurred in monitoring, insper	ecting, handling of violation	ns, and	enforcing co	nservation eas	sements	during the y	ear ear
8	Does each conservation easement reported on lin	e 2(d) above satisfy the re	equirem	ents of section	on 170(h)(4)(l	B)(ı)		
	and section 170(h)(4)(B)(II)?						ີ Yes ່	□ No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the orga						
Par	Complete if the organization answere				Other Simil	ar Ass	ets.	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	eld for public exhibition, ed	ducation	n, or research	ı ın furtheranc			rks of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for following amounts relating to these items	AS 116 (ASC 958), to rep	ort in it	s revenue sta	atement and b			
((i) Revenue included on Form 990, Part VIII, line 1				ı	\$		
(1	ii)Assets included in Form 990, Part X				1	\$		
2	If the organization received or held works of art, following amounts required to be reported under				financial gain			
а	Revenue included on Form 990, Part VIII, line 1				i	▶ \$		
b	Assets included in Form 990, Part X					▶ \$		
For	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.		Cat	No 52283D	Sched	lule D (Form	m 990) 2016

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)

 ${f d}$ Equipment . . .

e Other .

Par	t IIII	Organizations Ma	aintaining Collections	of Art, Histor	rical T	reası	ires, or Other	Similar A	ssets (continued)	
3		g the organization's acq s (check all that apply)	uisition, accession, and othe	er records, check	any of	the fo	llowing that are a	significant	use of its	collection	
а		Public exhibition		d		Loan	or exchange prog	rams			
b		Scholarly research		e		Othe	r				
С		Preservation for future	e generations								
4	Provi Part		organization's collections an	d explain how th	ney furtl	her the	e organization's ex	empt purp	ose ın		
5			anization solicit or receive d nds rather than to be mainta					ılar	☐ Ye	.e	No
Pai	rt IV	Escrow and Cust	odial Arrangements.							э 🗀 і	10
			ganization answered "Ye	s" on Form 99	0, Part	IV, lı	ne 9, or reporte	ed an amo	unt on F	orm 990,	, Part
1a		e organization an agent ded on Form 990, Part)	, trustee, custodian or othei X?	ntermediary fo	r contri	bution	s or other assets i	not	☐ Ye	ıs 🗆 n	No
Ь	If "Y	es " explain the arrange	ement in Part XIII and comp	lete the followin	a table				Amount		
c		nning balance	mene in raite xiii ana comp	icte the followin	g table		1c				_
d	_	tions during the year					1d				
e		ibutions during the year	-				1e				
f		ng balance					1f				
2 a		•	an amount on Form 990, Pa	art X line 21 fo	r escrov	or cu	ustodial account lia	bility?			_
		-	·	,				·	∐ Ye		No
b			ment in Part XIII Check he							. Ц	
Pa	rt V	Endowment Fund	ds. Complete if the orga				· · · · · · · · · · · · · · · · · · ·				
1.	Pogine	ning of year balance .	(a)Curre	ent year (b) 656,256	Prior yea	r 2,625	(c)Two years back	(d)Three ye	ears back	(e)Four yea	ars back
	-	butions		84,268		9,902	602,625				
			as and losses	45,316		9,729	002,023				
		vestment earnings, gair	· -	21,000		,,,,,					
		•		21,000							
	and pr	expenditures for facilities of the contract of	es								
		istrative expenses .		460		5,000					
g	End of	f year balance		764,380	656	5,256	602,625				
2		·	ntage of the current year er	d balance (line	1g, colu	mn (a)) held as				
а	Boar	d designated or quasi-e	ndowment 🟲								
b	Perm	nanent endowment 🕨	95 570 %								
c	Tem	porarily restricted endov	vment ► 4 430 %								
		·	, 2b, and 2c should equal 10								
3а		here endowment funds nization by	not in the possession of the	organization th	at are h	eld an	d administered foi	r the		Yes	No
	(i) u	nrelated organizations								a(i)	No
		related organizations .							<u> </u>	ı(ii)	No
		, ,,	lated organizations listed as			.7			·	3b	<u></u>
4			ended uses of the organizati	on s endowment	runas						
Рā	rt VI	, ,	and Equipment. ganization answered 'Yes	s' on Form 990), Part	IV, lır	ne 11a. See Forr	n 990, Pa	ırt X, lını	e 10.	
	Descr	iption of property	(a) Cost or other basis (investment)	(b)Cost or other	•		(c)Accumulated d		 	(d)Book valu	ie
1 a	Land				1.71	05,021					1,705,021
	Buildir				-	90,635		4,080,481			5,510,154
-		- I		i							

4,758,431

7,724,695

1,582,211

3,893,798

6,983,484

1,576,763

864,633

741,211

8,826,467

5,448

Schedule D (Form 990) 2016 Part VII Investments—Other Securities. Complete if th	ne organiza	tion answ	vered 'Yes' on Form	n 990 Part IV line	Page 3	
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book			1ethod of valuation		
(including name of security)	(6)5007	value		nd-of-year market va	alue	
(1)Financial derivatives						
(3)Other(A) TRUST INVESTMENTS	39	,084,923		F		
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		,084,923	107 1 5	000 B + T/ -		
Part VIII Investments—Program Related. Complete if t See Form 990, Part X, line 13.	tne organiz	ation ans	swered 'Yes' on For	m 990, Part IV, III	ne 11c.	
(a) Description of investment	(b) B	ook value		Method of valuation nd-of-year market va	alue	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•					
Part IX Other Assets. Complete if the organization answered (a) Description		m 990, Pa	rt IV, line 11d See F		Book value	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				•		
Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	nswered 'Y			ne lle or llt.		
1. (a) Description of liability (1) Federal income taxes		(b) B	ook value			
(-), (-), (-), (-), (-), (-), (-), (-),						
SECURITY DEPOSITS			6,977			
INTEREST RATE COLLAR AGREEMENTS			363,706			
ACCRUED POSTRETIREMENT BENEFITS			3,366,293			
(4)			, ,			
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		3,736,976			
2. Liability for uncertain tax positions. In Part XIII, provide the text of			ganızatıon's fınancıal			
organization's liability for uncertain tax positions under FIN 48 (ASC 7	40) Check	here if the	text or the foothote h	ias peen provided in	rail XIII 🗀	

Part XI

2

а

b

4

1

2

а b

d

e 3

а

b

c

Part XIII

5

4

Part XII

Schedule D (Form 990) 2016

Page 4

4,749,511

35,814,284

35,814,284

36,921,184

36.921.184

36,921,184

Schedule D (Form 990) 2015

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . 2a 4.548.877 2b

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Donated services and use of facilities . 2c Recoveries of prior year grants . . . 2d 200.634

c Other (Describe in Part XIII) . . d Add lines 2a through 2d е 2e 3 Subtract line 2e from line 1 . 3

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b. 4a

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII) Add lines 4a and 4b . . .

b 5

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII)

Supplemental Information

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

4b

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b 2c

2d

4b

Explanation

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

4c

2e

3

4c

5

Page 5	hedule D (Form 990) 2015					
	Information <i>(continued)</i>	Part XIII Supplemental Info				
planation		Return Reference				

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Supplemental Information

cellence in specific areas of scientific research

Return Reference

Explanation The endowment funds have been established for the purpose of recognizing and supporting ex

Part V, Line 4

upplemental Information							
Return Reference	Explanation						
Part XI, Line 2d - Other Adjustments	NET GAIN ON INTEREST RATE COLLAR 122,583 CHANGE IN POST-RETIREMENT BENEFITS 78,051						

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493289017487 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number AMERICAN GEOPHYSICAL UNION 52-0955532 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e q, program service, describe for and investments employees, agents, fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 746,912 3a Sub-total 3,432,468 b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 4,179,380 Cat No 50082W For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2016

Page **3**

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.

Taic III can be	auplicated if addition	onar space is i	iccaca.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							
1		l l		ĺ		1	

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	2.1.3.1. decidens for 1 5.1.1.5 GS2G and GS2G Try	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	\square Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6003)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	∐ Yes	✓ No

Schedule F (Form 990) 2016 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).							
ar	y additional information (see instructions).						
Return Reference	Explanation Explanation						

Additional Data

Europe (Including Iceland &

Austria, Belgium

Greenland) - Albania, Andorra,

Software ID: Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Honoraria,

Reimbursements

458,292

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

0

(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
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	0	program service activities	Reimbursements	13,083

125,842 0 program service activities Honoraria, 0 Australia, Brunei, Burma, Reimbursements Cambodia,

0 program service activities

East Asia and the Pacific -

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle East and North Africa -0 IGRANTMAKING 1.000 Algeria, Bahrain, Djibouti, Egypt, North America - Canada and 0 program service activities 55,366 Honoraria, Reimbursements Mexico, but not the United States Russia and Neighboring States 0 IGRANTMAKING 7,101 - Armenia, Azerbijan, Belarus,

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in services, grants to service(s) in region region recipients located in the region) South America - Argentina, 0 program service activities | Reimbursements 69,183 Bolivia, Brazil, Chile, Columbia, Ecuador, South Asia - Afghanistan, 0 program service activities Reimbursements 17.045 Bangladesh, Bhutan, India, Maldives, Nepal, Sub-Saharan Africa - Angola, 0 program service activities 58,103 Honoraria, Benin, Botswana, Burkina Reimbursements Faso,

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (a) Region (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of region agents in services, grants to service(s) in region region recipients located in the region) 3,374,365 EUROPE (Including Iceland & 0 linvestments Greenland) - Albania, Andorra, Austria, Belgium

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) Fall Meeting and 18 12,365 WIRE TRANSFER North America Chapman Travel Grant Fall Meeting and 2.000 WIRE TRANSFER Central America Chapman Travel land the Grant lCarıbbean

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S								
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
CI T I	East Asia and the Pacific	23	21,265	WIRE TRANSFER	0			
Chapman Travel Grant	Europe (Including Iceland & Greenland)	89	89,050	WIRE TRANSFER	0			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Fall Meeting and 1,000 WIRE TRANSFER Middle East and Chapman Travel North Africa Grant Fall Meeting and 7.101 WIRE TRANSFER Russia and Chapman Travel Neighboring Grant States

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Fall Meeting and 31 32,942 WIRE TRANSFER South America Chapman Travel Grant Fall Meeting and 19 16,787 WIRE TRANSFER South Asia Chapman Travel Grant

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Fall Meeting and 10 9,069 WIRE TRANSFER Sub-Saharan Chapman Travel Africa Grant

efile GRAPHIC print - DO I	NOT PROCESS	As Filed Data -					DLN	l: 93493289017487
Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.								2016 Open to Public
Department of the Treasury Internal Revenue Service	▶ Inform	mation about Schedule	► Attach to Form I (Form 990) and its i		w.irs.gov/form990.			Inspection
Name of the organization AMERICAN GEOPHYSICAL UNION						Employe	r identifica	tion number
AMERICAN GEOFHTSICAL UNION						52-0955	5532	
Part I General Informa	ation on Grants	and Assistance						
 Does the organization main the selection criteria used to Describe in Part IV the organization 	o award the grants	or assistance?		· · · · · · · · ·		e, and		☑ Yes ☐ No
Part III Grants and Other A		estic Organizations an can be duplicated if addi		nts. Complete if the or	ganization answered "Yes"	on Form 990, Pa	rt IV, line 2	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descript non-cash assi		(h) Purpose of grant or assistance
(1) AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE 1200 NEW YORK AVENUE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	7,830					Support for Congressional Fellows and placement resources
(2) Purdue University SAGE program 550 Stadium Mall Drive WEST LAFAYETTE, IN 47907	35-6002041	501(C)(3)	10,000					Summer of Applied Geophysical Experience (SAGE) Program for 2016
2 Enter total number of section	on 501(c)(3) and go	overnment organizations	listed in the line 1 table .)	>	2
3 Enter total number of other	organizations listed	d in the line 1 table		<u> </u>	<u>.</u>		<u> </u>	0
For Paperwork Reduction Act Notice	see the Instruction	ns for Form 990.		Cat No. 50055	Р		Sche	dule I (Form 990) 2016

Page **2**

Schedule I (Form 990) 2016

(2) 17,500 Data Visualization and Storytelling Competition Grand (3) FM Travel Grant 145 108.421

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

(4) OSM Travel Grant 23 12.500 (5) Congressional Science Fellows 147.333 (6) Other Travel Grants 2,000

ACTUAL EXPENSES AND CONFIRMATION THAT THE AWARDEE HAS MET CONTRACT OBLIGATIONS

(7) Horton Grants 32,265 (7)

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

THE EXPENSES INCLUDED IN THE BUDGETS ARE REVIEWED PRIOR TO MAKING AN OFFER OF AN AWARD AND THE PRESENTATION OF A CONTRACT POTENTIAL AWARDEES ARE ASKED TO REVISE THEIR BUDGETS, WHERE NECESSARY, AND TO PRESENT AN ANNOTATED BUDGET NARRATIVE EXPLAINING PROPOSED EXPENSES PRIOR TO TRANSFERRING ANY FUNDS. WE CONFIRM THAT THE RECIPIENT IS NOT LISTED ON EITHER THE TREASURY DEPARTMENT OFFICE OF TERRORISM AND FINANCIAL SANCTIONS LIST OR THE GSA EXCLUDED PARTIES LIST SYSTEM. THE PRINCIPAL INVESTIGATOR AND THE INSTITUTION'S FINANCIAL OFFICER ARE PRESENTED WITH COPIES OF FINANCIAL REGULATIONS. AS WELL AS REFERENCES WITH ADDITIONAL INFORMATION THE AWARDEES ARE INSTRUCTED THAT UPON SIGNATURE IT IS EXPECTED THAT THEY WILL ABIDE BY ALL STIPULATIONS OF THE CONTRACT AS WELL AS THE ACCOMPANYING INFORMATION. ESPECIALLY IN REGARD TO REPORTING REQUIREMENTS. THE NAME OF THE CONTRACT OFFICER IS INCLUDED IN ALL CORRESPONDENCE AND RECIPIENTS ARE REQUIRED TO REMAIN IN CONTACT WITH THE CONTRACT OFFICER THROUGHOUT THE TIME OF THE GRANT AWARD AWARDEES ARE ALSO REQUIRED TO REPORT ON CHANGES IN PROPOSED EXPENSES IF THOSE CHANGES EXCEED 20% OF THE FUNDS IN ANY INDIVIDUAL CATEGORY, DETAILED FINANCIAL REPORTS, INCLUDING BACKUP DOCUMENTATION, ARE REQUIRED AT SUITABLE INTERVALS DURING THE PROJECTS THE GRANT AWARDS ARE MADE IN INSTALLMENTS BASED ON A PRE-

DETERMINED PAYMENT SCHEDULE FINAL PAYMENTS ARE MADE ONLY AFTER REVIEW OF THE FINANCIAL STATEMENTS AND TECHNICAL REPORTS AND ARE BASED ON

Part IV

Schedule I (Form 990) 2016

Return Reference Part I, Line 2

Part III can be duplicated if additional space is needed

Explanation

Additional Data

Chapman Travel Grant

Competition Grand FM Travel Grant

OSM Travel Grant

Data Visualization and Storytelling

Congressional Science Fellows

Software ID: **Software Version: EIN:** 52-0955532

35

145

Name: AMERICAN GEOPHYSICAL UNION

Form 990, Schedule I, Part III, Grant	ts and Other Ass	istance to Domestic	Individuals.
(a)Type of grant or assistance	(b)Number of	(c)Amount of	(d)Amount

recipients	cash grant	non-cash assistance

)	Domestic	Individuals.

ance to Domestic	Individuals.
(c)Amount of	(d)Amount of

46,508

17,500

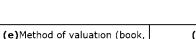
108,421

12,500

147,333

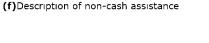


FMV, appraisal, other)









(a)Type of grant or assistance

(b)Number of recipients

(c)Amount of non-cash assistance

(d)Amount of non-cash assistance

(e)Method of valuation (book, FMV, appraisal, other)

(f)Description of non-cash assistance

Other Travel Grants	1	2.000		

32.265

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

Horton Grants

DLN: 93493289017487

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

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

Open to Public Inspection

2015

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN GEOPHYSICAL UNION Employer identification number

			52-0955532			
Pa	rt I Questions Regarding Compensation					
					Yes	No
1 a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to		•			
	┌ First-class or charter travel	Г	Housing allowance or residence for personal use			
	☐ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	☐ Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organism reimbursement or provision of all of the expenses described.		, , , , ,	1b	Yes	
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu			2	Yes	
			,		165	
3	Indicate which, if any, of the following the filing organizer organization's CEO/Executive Director Check all that used by a related organization to establish compensat	t appl	y Do not check any boxes for methods			
	Compensation committee	Ľ	Written employment contract			
	Independent compensation consultant	Ľ	Compensation survey or study			
	Form 990 of other organizations	Ľ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	art V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the revenues of	line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the net earnings of	line 1a	a, did the organization pay or accrue any			
а	The organization?			6 a		Νo
b	Any related organization?			6b		Νo
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," des			7	Yes	
8	Were any amounts reported on Form 990, Part VII, pa					
	subject to the initial contract exception described in F in Part III	Regula	itions section 53 4958-4(a)(3)? If "Yes," describe			
_				8		No
9	If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	9		

Schedule J (Form 990) 2015							Page Z
Part III Officers, Directors	, Trustees, Key Er	nployees, and Hig	hest Compensate	ed Employees. Use	duplicate copies if	additional space is	needed.
For each individual whose compensal instructions, on row (ii) Do not list al Note. The sum of columns (B)(i)-(iii)	ny individuals that are	not listed on Form 990	, Part VII	• , ,	-	·	
(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Schedule 3 (1 offil 330) 2013	rage 3
Part IIII Supplemental Infor	mation
Provide the information, explanation, o	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
Part I, Line 1a	AGU MAY PROVIDE BUSINESS OR FIRST CLASS TRAVEL (ON A CASE-BY-CASE BASIS) FOR THE AGU PRESIDENT WHEN MULTIPLE TRIPS (IN EXCESS OF 6 HOURS) TO ATTEND AGU BUSINESS MEETINGS ARE REQUIRED ADDITIONALLY, THE CEO'S EMPLOYMENT AGREEMENT ALLOWS FOR BUSINESS OR FIRST CLASS TRAVEL FOR TRIPS IN EXCESS OF 5 HOURS AGU DOES NOT INCLUDE THE COST OF FIRST CLASS OR BUSINESS TRAVEL AS TAXABLE INCOME TO THE CEO OR PRESIDENT AGU WILL PAY ANNUALLY ALL REASONABLE EXPENSES OF THE CEO'S SPOUSE TO ACCOMPANY HER TO THE FALL MEETING AND ONE OTHER AGU MEETING OF HER CHOICE WHICH IS TAXABLE INCOME TO THE

Dana 3

Schedule J (Form 990) 2015

ICEO CHRISTINE W MCENTEE \$170.629. SECTION 457 PLAN CURRENT YEAR PAYOUT - SEE SCHEDULE J. PART II COLUMN (F)

Part I. Lines 4a-b Part I, Line 7

Schedule 1 (Form 990) 2015

THE EXECUTIVE COMMITTEE, IN ITS SOLE DISCRETION, MAY PAY EXECUTIVE AN ANNUAL PERFORMANCE BONUS OF UP TO TEN PERCENT

 $(10\%)\,$ OF HER SALARY BASED ON HER ACHIEVING EXPLICIT PERFORMANCE GOALS MANUALLY SET FORTH ANNUALLY BY THE EXECUTIVE

AND THE EXECUTIVE COMMITTEE DURING THE REVIEW PERIOD

Software ID: Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

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

Base Bonus & Other compensation reported as def Compensation incentive reportable on prior Form compensation compensation	Form 990, Schedule J,	Part 1				1 Highest Compen		i	
Carel Executive Officer	(A) Name and Title		(i) Base Compensation	(ii) Bonus & Incentive	(iii) O ther reportable	other deferred			(F) Compensation in column (B) reported as deferred on prior Form 990
TRANK CRAINSE 10		(1)	622,868	47,000	30,568	71,654	19,731	791,821	170,629
Civil Gueralan Officer		(11)	0	0	0	0			0
Moderate Shadews 10	1FRANK KRAUSE Chief Operating Officer	(1)	343,059	18,500	874	32,201	29,752	424,386	0
Decelor of Finance	,	(11)	0	0	0	0			0
AMAN FERMICK Cheef Frances Officer (unal 7/16)		(1)	162,748	4,000	4,336	18,270	1,976	191,330	0
Chef Financial Officer (until 7/15)	Shocker of Finance	(11)	0	0	0	0			0
17,16		(1)	112,823	0	35,918	10,786	5,736	165,263	0
Director, Publications Color Col		(11)	0	0	0	0			0
Comparison of		(1)	246,015	3,000	1,620	29,631	15,849	296,115	0
Comparison Com	z. seco., r aznedatene	(11)	0	0	0	0			0
CAMALA KOVALICK (II)	5 Dana RehmDirector, MCE	(1)	219,027	4,225	19,803	29,085	1,704	273,844	0
Comparison Systems		(11)	0	0	0	0			0
Company Comp		(1)	164,625	0	6,571	17,580	7,766	196,542	0
Comparison of the property o	,	(11)	0	0	0	0			0
BILLY WILLIAMS (II)		(1)	187,013	0	500	18,590	11,419	217,522	0
Director, Science		(11)	0	0	0	0			0
HARRY FURUKAWA Director, Product City 152,543 Director, Product City 168,598 Director, Public Affairs City 163,696 City City		(1)	195,557	0	4,409	23,765	30,944	254,675	0
Director, Product Development (II) 0 0 0 0 0 0 0 0 10Alexandra Shultz Director, Public Affairs (II) 0 0 0 1475 18,466 14,188 201,727 (II) 0 0 0 11Rajul Pandya Program Director (II) 0 0 0 475 18,466 14,188 201,727 0 0 0 17,309 17,309 1,229 182,684 (II) 0 0 0 0 12Patricia Yaya Director, Human Resources (II) 149,858 0 697 15,858 5,155 171,568		(11)	0	0	0	0			0
Development (II)		(1)	152,543	0	41,510	16,152	10,070	220,275	0
Director, Public Affairs (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0			0
(II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(1)	168,598	0	475	18,466	14,188	201,727	0
Program Director (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2	(11)	0	0	0	0			0
(II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(1)	163,696	0	450	17,309	1,229	182,684	0
Director, Human Resources		(11)	0	0	0	0			0
		(1)	149,858	0	697	15,858	5,155	171,568	0
		(11)	0	0	0	0	- 0	0	0

efi	le GRAPHIC print - DO NO	T PROCESS As	Filed Data -									DLN: 9:	349328	8901	7487
	hedule K orm 990)			Information o					scriptions,				o 1545- 01 (-	
		• • • • • • • • • • • • • • • • • • •		, and any additional Attach to Form 99	information				,						
	ortment of the Treasury rnal Revenue Service	▶Informatio	n about Schedule I	K (Form 990) and its		s is at <u>w</u>	ww.i	irs.gov/for	<u>m990</u> .				n to Pul spectio		
	e of the organization RICAN GEOPHYSICAL UNION									Emplo	yer iden	tification	number		
										52-09	955532				
Pa	Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	((f) Descripti	on of purpose	(g) D	efeased	(h) (behali	of	(i) I fınar	
										Yes	No	Yes	No '	Yes	No
A	DISTRICT OF COLUMBIA	53-6001131	254839K77	05-10-2006	8,0	95,000	REMA	RKET 09/29	/93 BOND ISSU	JE .	Х		Х		Х
Pa	Proceeds														
						Α		E	3	(<u> </u>			D	
1	Amount of bonds retired					4,070,	,000								
2	Amount of bonds legally defea	sed													
3	Total proceeds of issue					8,095,	,000								
4	Gross proceeds in reserve fun	ds				485,	,027								
5	Capitalized interest from proce	eeds													
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds														
8	Credit enhancement from prod	ceeds													
9	Working capital expenditures														
10	Capital expenditures from pro														
11	Other spent proceeds														
12	Other unspent proceeds														
13	Year of substantial completion				19	94									
					Yes	No		Yes	No	Yes	No		Yes	ı	No
14	Were the bonds issued as part	of a current refunding	g issue?	1	Х										
15	Were the bonds issued as part	of an advance refund	ing issue?			X									
16	Has the final allocation of prod	ceeds been made? .			Х										
17	Does the organization maintal proceeds?				х										
Pai	rt IIII Private Business l														
						Δ.			3					D	
1	Was the organization a partne financed by tax-exempt bonds	r ın a partnership, or a	member of an LLC,	which owned property	Yes	No X	\dashv	Yes	No	Yes	No		Yes		No
2	Are there any lease arrangem property?	ents that may result in	private business use			х									
For	Panerwork Peduction Act No	tice see the Instruct	tions for Form 990		Ca	No 50:	103E		<u> </u>			chadula	K /Form	200) 2016

Arbitrage

Does the bond issue meet the private security or payment test? . . .

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

8a

Part IV

C

Page 2

D

D

Schedule K (Form 990) 2016

No

Yes

		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		x						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		•		•		•		•
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								

Χ

No

Х

Χ

Х

Х

Χ

Α

Yes

Х

Х

Х

В

No

Yes

C

No

Yes

Schedule K (Form 990) 2016

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the

voluntary closing agreement program if self-remediation is not available under

requirements of section 148? . . .

applicable regulations?

Return Reference

Date Rebate Computation

(GIC)?

period?

Part V

Part VI

Performed

		,	4		•	
		Yes	No	Yes	No	Yes
а	Were gross proceeds invested in a guaranteed investment contract		V			

Yes

Х

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

Issuer Name DISTRICT OF COLUMBIA Date the Rebate Computation was Performed 05/28/2015

Explanation

Х

No

В

No

Yes

Yes

Page 3

No

No

D

Yes

Yes

No

No

Return Reference	Explanation
	THE BONDS WERE ORIGINALLY ISSUED IN 1993, AND THE BUILDING WAS SUBSTANTIALLY COMPLETED IN 1994 THE BONDS WERE REMARKETED IN 2006

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLI	N: 93493289017487			
(Form 990 or EZ) Department of the T	► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.qov/form990.					
Name of the org AMERICAN GEOPH 990 Schedule		Employer idea 52-0955532	ntification number			
Return Reference	Explanation					
Form 990, Part VI, Section A, line 1	There shall be an Executive Committee composed of the president, president-elective past president, general secretary, and the international secretary. The executive or shall be a nonvoting ex-officio member. The Executive Committee shall have they to conduct the affairs of the Union between meetings of the Board, provided that cutive Committee may not contradict Board policy or decisions. Actions of the Executive Committee must be reported to the Board within ten days. The Executive Committee et by conference call or other electronic means provided that all persons may hear ak to one another at the same time. The Executive Committee may take action by sent signed by all members.	direct e authorit the Exe cutive Co may also me and spe				

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	There shall be the following membership categories. A Member - Individuals who are profes sionally engaged in or associated with Earth and space science are eligible to become members of the Union. Members shall be entitled to all rights and privileges of membership, in cluding the right to receive publications and other materials, subscribe to Union journals, purchase Union publications at member rates as established by the Board of Directors, se rive as elected officers of the Union, sections and focus groups, and vote on matters brought before the membership, B. Fellow - A member who has attained acknowledged eminence in Elarth and space science, and who has been elected by a committee of fellows appointed by the elected as a fellow. A member of the Union who is a recipient of an AGU medal shall automatically be made a fellow. The number of fellows elected in each annual class shall not exceed 0.1% of the total membership at the end of the year preceding in stallation of that class, C. Honorary Fellow - A person who has provided services to the Union or made exceptional contributions to the fields of Earth and space science may be elected an honorary fellow by the Council, D. Associate - An individual who desires identification with the Union and wishes to support its objectives but does not meet the qualifications of membership may become an associate Associate members may not vote or hold office, but shall otherwise have all of the rights of membership, and E. Affiliate - A corporation, academic institution, or other organization interested in Earth and space science may designate a representative to become an affiliate. The designated representative shall enjoy the privileges of a member.

Return Explanation
Reference

Form 990, Part VI, ARY AND GENERAL SECRETARY/TREASURER) AND CAN VOTE IN UP TO THREE SECTIONS OF THEIR CHOICE Section A, Indicate the section of the section

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Intelligible 11b

THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS THE 990 IN DEPTH WITH THE CEO, COO, AND CFO O
F AGU THE ENTIRE BOARD OF DIRECTORS IS GIVEN THE OPPORTUNITY TO REVIEW AND COMMENT ON AN
ELECTRONIC COPY OF THE FORM 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	IF AN OFFICER, DIRECTOR, TRUSTEE OR EMPLOYEE HAS ANY INDICATION THAT HE OR SHE HAS A DIREC T OR INDIRECT CONFLICT OF INTEREST, OR RECEIVES INFORMATION REGARDING A POTENTIAL CONFLICT OF INTEREST OF ANOTHER, THE CEO, COO AND DIRECTOR OF HUMAN RESOURCES MUST BE IMMEDIATELY NOTIFIED ALL AGU OFFICERS, DIRECTORS, TRUSTEES, AND COMMITTEE MEMBERS ARE REQUIRED TO SIG N A CONFLICT OF INTEREST AT THE START OF THEIR TENURE EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY AT THE START OF EMPLOYMENT EMPLOYEES AND VOLUNTEERS ARE ASKED TO REVIEW AND UPDATE THEIR CONFLICT OF INTEREST STATEMENT ANNUALLY IF NECESSARY

Return

Reference

	15A - CEO COMPENSATION IS ESTABLISHED USING THE METHODS INDICATED ON SCHEDULE J, PART I, L
Part VI,	INE 3 COMPENSATION OF THE EXECUTIVE DIRECTOR WAS LAST REVIEWED BY THE EXECUTIVE COMMITTEE
Section B,	OF THE AGU BOARD IN FEBRUARY 2015 15B - COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES
line 15	IS DETERMINED USING AN INDEPENDENT COMPENSATION CONSULTANT, COMPENSATION SURVEYS, AND FORM
	990 COMPARISON DATA COMPENSATION APPROVAL FOR AGU OFFICERS AND KEY EMPLOYEES IS THE RESP
	ONSIBILITY OF THE CEO The CEO shares the comparable market data on salary ranges with the
	Executive Committee

Explanation

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Inne 19

Return Explanation

11g

Form 990, Other professional fees Program service expenses 1,899,937 Management and general expens es 2,223,733 Fundraising expenses 351,882 Total expenses 4,475,552

Return Explanation
Reference

PART IX,
LINE 24

THERE IS AN ALLOCATION OF OVERHEAD INCLUDED ON FORM 990, PART IX, LINE 24, COLUMNS (B), (C
), AND (D) THAT IS NOT ALLOCABLE TO ANY NATURAL EXPENSE LINE ITEM IN PART IX, BUT RATHER I
S ALLOCABLE IN A GENERAL FASHION TO THE ORGANIZATION'S PROGRAM SERVICE ACTIVITIES AS REPOR
TED IN ITS AUDITED FINANCIAL STATEMENTS THIS ALLOCATION WAS MADE SO AS TO BETTER ALIGN TO
TAL PROGRAM SERVICE EXPENSES WITH THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS, WHICH F
AIRLY REPORT THE ORGANIZATION'S PROGRAM SERVICE EXPENDITURES

Return Explanation
Reference

Form 990, Part XI, line NET GAIN ON INTEREST RATE COLLAR 122,583 CHANGE IN POST-RETIREMENT BENEFITS 78,051

Return Explanation
Reference

Reference
Form 990
Part IX Line
The oversight process remains unchanged from the prior year