Department of the Treasury

DLN: 93493311007010

2019

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.

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

Open to Public Inspection

			I									
			alendar year, or tax year begin C Name of organization	ning 01-01-2019 , and ending	12-31-	2019	D Employ	or idontif	fication number			
			American Institute of Physics Inc						ication number			
Application is a constant of the constant of t	-	% CATHERINE G SWARTZ CFO				13-166	/053					
_			Doing business as									
			Number and street (or P.O. box if ma	ail is not delivered to street address) Ro	oom/suite)	E Telephon	ne number	-			
□ Ар	plicatio	on pending	One Physics Ellipse				(301) 2	09-3100				
			City or town, state or province, coun College Park, MD 207403843	try, and ZIP or foreign postal code								
			<u> </u>				G Gross re	ceipts \$ 1	03,945,928			
			F Name and address of principa MICHAEL MOLONEY	l officer:		H(a) Is this	a group re	turn for				
			One Physics Ellipse			subore H(b) Are al	dinates? Lsubordinat	-00	☐Yes ☑No			
T Ta	v-0v0p	nnt status:	College Park, MD 207403843			`´ includ	ed?		∐Yes ∐No			
		•	№ 501(c)(3)	insert no.)			•	•	instructions)			
J W	ebsit	e: Nw	w.aip.org			H(c) Group	exemption	number	•			
V [Corporation Trust Associated	ainting Other S		Year of forma	ition: 1931	M State	of legal domicile: NY			
N FOII	n or or	ganization:	Corporation in Trust in Assor	ciation 🗀 Other 🖊								
Pa	art I	Sumi	mary					ı				
			scribe the organization's mission or	r most significant activities: AND SERVE THE PHYSICAL SCIENC	CEC EOD	THE BENIEF	T OF HIIMA	NITV				
ce	-	AIF 5 MIS.	SION IS TO ADVANCE, PROMOTE A	AND SERVE THE PHYSICAL SCIENC	LES FOR	THE DEMENT	T OF HOMA	INIT.				
Tan Tan	-											
Ke I		a				250/						
<u> </u>	3	Number of	is box > if the organization dis of voting members of the governin	continued its operations or dispose g body (Part VI, line 1a)	ea or mo	re than 25%	or its net a	ssets.	16			
	l			the governing body (Part VI, line 1	lb) .			4	14			
ges	5	Total nun	nber of individuals employed in cal	endar year 2019 (Part V, line 2a)				5	337			
E	6	Total num	6	172								
AC	7a	7a Total unrelated business revenue from Part VIII, column (C), line 12										
	ь	Net unrel	7b									
						Pri	or Year		Current Year			
Q)	8	Contribut	ions and grants (Part VIII, line 1h)				213,:	7,147,2				
ň.	9	Program	service revenue (Part VIII, line 2g)	60,181,4	400 66,215,1							
ř	10	Investme	532	7,905,414								
_	11	Other rev	345	1,822,126								
	12	Total reve	enue—add lines 8 through 11 (mu:	st equal Part VIII, column (A), line :	12)		76,079,9	918	83,089,928			
	13	Grants ar	nd similar amounts paid (Part IX, c	olumn (A), lines 1–3)			662,8	302	820,709			
	14	Benefits p	paid to or for members (Part IX, co		0							
8			other compensation, employee be	31,396,9	909	33,796,88:						
ens			• , ,	nn (A), line 11e)	•			0	(
3	l		raising expenses (Part IX, column (D), I	·	_							
	l	•	penses (Part IX, column (A), lines :	•			33,536,6		38,464,068			
	l	•	enses. Add lines 13–17 (must equ			65,596,339			73,081,658			
_ 0	19	Kevenue	less expenses. Subtract line 18 fro	om line 12	•	Roginning	10,483,5 of Current Y		10,008,270 End of Year			
20 G						Degiiiiiig	or current r	Cai	Liid Oi Teal			
SS 6	20	Total asse	ets (Part X, line 16)				218,396,7	754	252,135,023			
₹ E	21	Total liab	ilities (Part X, line 26)				39,571,	541	43,683,768			
žū	22	Net asset	s or fund balances. Subtract line 2	1 from line 20			178,825,2	213	208,451,255			
			ature Block									
				ned this return, including accompa Declaration of preparer (other tha								
			., 10 15 17 40, 6011 600, 4114 6011 616	Decidiation of preparet (other the		., 15 54564 6			Trineir preparer mas			
		 ******	*			າດາ	0-11-05					
Sian		Signatu	ure of officer			Date						
_		CATHE	RINE G SWARTZ CFO									
			r print name and title									
		<u>, , </u> Р	rint/Type preparer's name	Preparer's signature	Dat	e C		PTIN				
Paid	t					I	ck பார் ர -employed	P0187156	<i></i>			
Pre	pare	er 📴	irm's name > BDO USA LLP			Firn	n's EIN ▶					
Part I Server Segment	ь. ⊢	irm's address ► 8401 GREENSBORO DR	IVE 800		Pho	ne no. (703)	893-0600					
			MCLEAN, VA 22102				·/					
M-1/4	ho ID	C diasuss	this return with the preparer show						/es □No			

Form	990 (2019)					Page 2
Pa	rt III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to	any line in this Part III .		🗹
1	Briefly describe the o	organization's mission:				
SEE :	SCHEDULE O					
	D:1+h					
2	-	r 990-EZ?	. 3	vices during the year wh	nich were not listed on	☐ Yes ☑ No
		r 990-E2? ese new services on Sc				□ Yes • NO
3	•			changes in how it condu	icte any program	
3	services?		lake significant	changes in now it condu	icts, any program	□yes ✓No
	If "Yes," describe the	□ res ☑ No				
4	Describe the organization 501(c)(3) an	ation's program service	e accomplishmer ons are required	I to report the amount o	largest program services, as mea f grants and allocations to others	
4a	(Code:) (Expenses \$	48,911,428	including grants of \$) (Revenue \$	63,161,678)
	See Additional Data					
4b	(Code:) (Expenses \$	13,026,804	including grants of \$	811,322) (Revenue \$	3,053,438)
	See Additional Data					
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4d	Other program service	ces (Describe in Sched	ule O.)			
	(Expenses \$	•	luding grants of	\$) (Revenue \$)
	the state of the s				· · · · · · · · · · · · · · · · · · ·	•

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

rm :	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
_			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L,</i> Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
3	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
)	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
;	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
ar	Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V	. ;		
			Yes	No

1a

1b

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

289

0

1c

Yes

	Statements Bernding Other TDC Filings and Top Compliance (continued)			Page 5
	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ►CH	4a	Yes	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	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?	7c		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
g	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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
_	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a h	Gross income from members or shareholders			
	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.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
c	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		110
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess			
	parachute payment(s) during the year?	15 16		No No
	in 163, Complete Form 4720, Schedule O.			

rm 9	990 (2019)			Page 6
Part	VI 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. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines
Sec	tion A. Governing Body and Management			
			Yes	No
	Enter the number of voting members of the governing body at the end of the tax year 16			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
	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
	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
	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 members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Yes	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	∋ Code	⊋.)	
			Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
	and branches to ensure their operations are consistent with the organization's exempt purposes?	100		<u> </u>
	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			
2a	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	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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
	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?	461		
	tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed▶			
8	MD , NY Section 6104 requires an organization to make its Form 1023 (or 1024-A 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)			
	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.			
0	State the name, address, and telephone number of the person who possesses the organization's books and records: CATHERINE G SWARTZ CFO ONE PHYSICS ELLIPSE College Park, MD 207403843 (301) 209-3100			

Name and title

Part VII

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

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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

 \checkmark

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

	for rolated			, .		,		(14/ 2/1000	(1)/ 2/1000	organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

Rhode Island Convention Center, One Sabin Street PROVIDENCE, RI 02903

Page 8

Form 990 (2019)													Page 8
Part VII Section A. Officers, Dire	ectors, Trustees	s, Key	Empl	loye	es,	and	High	hest Comp	ensate	ed Employees	(cont	inued)	
(A) Name and title	(B) Average hours per week (list any hours	than d	ne b	ox, ι n of	t che inle: ficer	eck mess pers r and a ee)	son	Report compen from organiz	able sation the ation	(E) Reportable compensation from related organizations	5	Estima amount of compen from	ated of other sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1 MIS		(W-2/1099- MISC)		organizat relat organiz	ed
See Additional Data Table													
b Sub-Total						>				'	1		
d Total (add lines 1b and 1c)	•					•		4,16	3,312		0		541,79
! Total number of individuals (includ of reportable compensation from the compensation from the compensation).			e list	ed a	bove	e) who	rece	eived more	than \$1	00,000			
												Yes	No
Did the organization list any forme line 1a? <i>If "Yes," complete Schedu</i>			ee, k				or hi	ghest comp	ensated • •	employee on	3		No
For any individual listed on line 1a, organization and related organizati										n the			
individual				•	•	•					4	Yes	
5 Did any person listed on line 1a re- services rendered to the organization										· · ·	5		No
Section B. Independent Contra										+100.000 (
Complete this table for your five hi from the organization. Report com	pensation for the o									n's tax year.	mpens		
Nan rigin Editorial LLC,	(A) ne and business addre	ess						Er		(B) ription of services OPERATIONS		Comper	
rigin Editorial ELC, 4274 W 88th Drive Unit A RVADA, CO 80005								EL	TIORIAL	OPERATIONS		1	,872,416
ryan Cave Leighton Paisner, L55 F Street ASHINGTON, DC 20004								Le	gal Fees				330,954
PC Postal Logistics, 40 East Union Avenue								Ma	iling and	Shipping			269,834
AST RUTHERFORD, NJ 07073 DO USA LLP, O Box 642743								Ac	counting	Services			234,570
PITTSBURGH, PA 15264									nyontion	Sorvicos			216 738

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 8

216,738

Convention Services

orm 9 Part		(2019) Statement	of F	Revenue						Page 9
		Check if Scheo	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(0	1a	Federated campa	aigns		1 a			revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	s.	. [1 b					
Gra mo	c	: Fundraising even	its .	. [1c					
fts, ir A	d	Related organiza	tions	5	1 d					
ni;G	е	Government grants	(con	tributions)	1e	190,082				
ons Sil	f	All other contribution and similar amounts			1f	6,957,190				
buti the		above Noncash contributio	ns in	L cluded in	11	0,937,190				
Contributions, Gifts, Grants and Other Similar Amounts	9	lines 1a - 1f:\$			1 g					
G G G	F	n Total. Add lines :	1a-1	f		•	7,147,272			
						Business Code				
	2a	PUBLISHING RELATE	D			511120	63,161,678	61,337,448	1,824,230	
ane	b	PHYSICAL SCIENCES				900099	3,053,438	2,203,737	849,701	
Pe K						300033				
ice	С									
Program Service Revenue	d									
an	u									
Togr	е									
<u>-</u>	f	All other program	serv	ice revenue.						
	g	Total. Add lines 2	2a-2	f	•	66,215,116				
		nvestment income			nds, i		6,132,373	3		6,132,373
		imilar amounts) . Income from invest			nnt h	ond proceeds		<u> </u>		0,132,373
					-					
		•		(i) Rea		(ii) Personal	1			
	6a	Gross rents	6a							
		Less: rental					-			
		expenses	6b				_			
		Rental income or (loss)	6с		(o			
	d	Net rental income	or ((loss)						
				(i) Securi	ties	(ii) Other	_			
		7a Gross amount from sales of assets other than inventory				1				
	_	Less: cost or other basis and sales expenses	er basis and 7b 20,856,000							
	С	Gain or (loss)	7c	1,7	73,04:	1				
		• · · ·					1,773,041	1		1,773,041
Other Revenue		Gross income from fu (not including \$ contributions reported See Part IV, line 18	d on	of						
Rev		Less: direct expen		· ·	8a 8b	C				
er		Net income or (los				ents				
		Gross income from See Part IV, line 19			9a	C	,			
	b	Less: direct expen	ses		9b	C	_			
	c	Net income or (los	s) fr	om gaming a	ctivit	ies		י		
	102	Gross sales of inve	anto	sy less						
	IVa	returns and allowa	ances	y, less	10a	C	1			
	b	Less: cost of good	s sol	ld	10b	C				
	С	Net income or (los			nvent		(
	11.	Miscellaneo				Business Code 90009	9 1,781,151	1		1,781,151
	-14	PASS THRU MEME	⊃EK ¦	SOCIETY		30009	1,761,131			1,761,131
	b	EQUITY GAIN ON	ACP			90009	9 40,975	5		40,975
	-	_QOZI I GAZIN ON	, (CF							
	c									
	d	All other revenue	•							
	e	Total. Add lines 1	1a-1	l1d		•	1,822,126	5		
	12	Total revenue. S	ee ir	nstructions .			83,089,928		2 672 024	0 727 540
							03,089,928	63,541,185	2,673,931	9,727,540 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must		_		mn (A).
Check if Schedule O contains a response or note to a	ny line in this Part IX			<u> U</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	441,790	441,790		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	318,754	318,754		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	60,165	60,165		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	4,072,934	2,106,861	1,966,073	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	21,765,199	13,271,830	8,202,891	290,478
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,073,477	1,305,698	747,637	20,142
9 Other employee benefits	4,035,561	2,540,436	1,456,736	38,389
10 Payroll taxes	1,849,710	1,164,004	668,523	17,183
11 Fees for services (non-employees):				
a Management	2,078,934	612,361	1,443,623	22,950
b Legal	649,801		649,801	
c Accounting	195,467	2,188	193,279	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	121,302		121,302	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,635,610	771,370	864,240	
12 Advertising and promotion	3,051,521	2,964,312	80,317	6,892
13 Office expenses	1,634,858	938,492	694,258	2,108
14 Information technology	4,148,432	1,735,062	2,407,840	5,530
15 Royalties	0			
16 Occupancy	3,222,699	239,501	2,983,198	
17 Travel	1,417,287	1,136,024	256,186	25,077
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	1,661,808	1,134,044	527,764	
20 Interest	25,162		25,162	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,193,861	15,589	1,178,272	
23 Insurance	182,350		182,350	
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 expenses on Schedule O.)				
a EDIT MANAGEMENT	5,346,541	5,346,541		
b PUBLISHING PRODUCTION	2,216,531	2,205,615	-2,406	13,322
c PASS THRU MEMBER SOCIETY	8,065,791	8,065,791		
d PUBLISHING PRINTING	1,629,591	1,627,688	1,903	
e All other expenses	-13,478	13,934,116	-14,376,953	429,359
25 Total functional expenses. Add lines 1 through 24e	73,081,658	61,938,232	10,271,996	871,430

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).

Form 990 (2019)

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Fund Balances

٥ 29

Assets 30 29,174,773

3,668,353

1,943,650

4.430.604

180.376

4,169,043

3,572,163

169,003,952

20.221.762

15,162,338

252,135,023

8.068.223

24.957.697

0

0

0

0

10,657,848

43.683.768

169,642,053

38,809,202

208,451,255

252,135,023

Form 990 (2019)

608,009

(B) End of year

Beginning of year

29,810,881

2,655,876

1,875,158

3,772,420

0 5

0 6

0 8

175.455

2,433,191

4,458,677

127,743,764

29.741.960

15,121,363

218,396,754

8,966,467

20,822,773

608,009

0 14

0 18

0 20

0 21

0 22

0

0 24

9,782,301

39.571.541

151,157,428

27,667,785

178,825,213

218,396,754

13,547,540

9,975,377

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Page **11**

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

	_
ash-non-interest-bearing	
avings and temporary cash investments	_
adara and manks washingly was	_

1 Ca Sa 2 3 Pledges and grants receivable, net . Accounts receivable, net .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . . Assets Inventories for sale or use .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation Investments—publicly traded securities .

10a

11 12 13 Investments—program-related. See Part IV, line 11 14 Intangible assets .

10b Investments—other securities. See Part IV, line 11 . Other assets. See Part IV, line 11 . . .

15 16

Accounts payable and accrued expenses

Total assets. Add lines 1 through 15 (must equal line 34) . 17 18 Grants payable . 19 Deferred revenue . . . 20 Tax-exempt bond liabilities .

Escrow or custodial account liability. Complete Part IV of Schedule D

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

21 22

Liabilities 23 24

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Secured mortgages and notes payable to unrelated third parties and other liabilities not included on lines 17 - 24).

Complete Part X of Schedule D

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

25

Unsecured notes and loans payable to unrelated third parties

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

Total liabilities. Add lines 17 through 25 . .

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

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

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow FASB ASC 958, check here <a> \square and

3a

3h

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Form 990 (2019)

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.

Audit Act and OMB Circular A-133?

Additional Data

Software Version: **EIN:** 13-1667053

Name: American Institute of Physics Inc

Software ID:

Form 990 (2019)

Form 990, Part III, Line 4a:

PUBLISHING RELATED. SEE SCHEDULE O

Form 990, Part III, Line 4b: PHYSICAL SCIENCE PROGRAMS AND RESOURCES. SEE SCHEDULE O

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

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

,					,		'	1 (1) 2 (4,000	(14) 2/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
John Haynes AIPP, CEO	40.0				х			705,586	0	44,270
Michael Moloney CEO	40.0 10.0	Х		х				511,123	0	46,191
Roy Levenson AIPP, CFO	40.0				х			386,487	0	51,480
Jason Wilde AIPP, Chief Publishing Officer	40.0				х			366,061	0	53,352
Catherine Swartz	40.0			х				336,374	0	45,756

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235,311

245,180

194,483

182,889

198,700

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48,991

23,262

62,840

43,751

21,002

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AIPP, CFO
Jason Wilde
AIPP, Chief Publishing Officer
Catherine Swartz
CEAO

Kevin Steiner

Tracy Denien

Sara Girard

Peter Inchautequiz

DEO

Stephen Mackwell

AIPP, Head of Global Sales

AIPP, Head of Info. Technology

AIPP, Head of Mkt and Comm

Sr Director, Strategic Mkt

and Independent Contractors

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

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

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensate employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Sherry Render Controller	40.0					X		181,788	0	36,062
Adam Chesler AIPP, Dir Global Sales	40.0					х		192,114	0	20,269
Naomi Schmuckler Sr Dir, Human Resources	40.0					Х		182,496	0	27,830
Larry Fishbein Sr Dir, News and Magazines	40.0				х			179,720	0	16,740
David Helfand Chair	10.0	Х		x				70,000	0	0

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John Kent

Treasurer

Judy Dubno

Susan Avery

Director

Director

Director

Interim Secretary

J Daniel Bourland

Susan Burkett

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation

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

	any hours	and			r/tr	ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Jack Hehn	4.0									
Director	0.0	Х						0	0	0
Kate Kirby	4.0									_
Director	3.0	Х						0	0	0
Allison MacFarlane	4.0									_
Director	0.0	Х						0	0	0
	4.0									
Director	0.0	Х						0	0	0
Michael Morgan	8.0									

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Director
Kevin Marvel
Director
Michael Morgan

Director

Director

Director

Director

Director

Faith Morrison

Elizabeth Nolan

Nathan Sandars

Cheryl Stevens

and Independent Contractors

efil	e GR/	<u>APHIC prii</u>	nt - DO NOT PROC	ESS	As Filed Data -			DLN: 9	3493311007010
SCI	HED	ULE A	Dub	lic C	harity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
(F 000			Complete if	the or	ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e mpt charitable 990 or Form 99	organization or trust. 10-EZ.	r a section	2019
		f the Treasury	► Go to <u>wи</u>	w.irs.	<i>gov/Form990</i> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	he organiza titute of Physic						Employer identific	ation number
		<u>'</u>						13-1667053	
	rt I		for Public Charity a private foundation be					See instructions.	
1	n gannz		•		•	•		(Δ)(i).	
2		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
3			or a cooperative hospit			,			
4		·	esearch organization o		-			•	nter the hospital's
•	Ш	name, city,		perace	a in conjunction with	a nospital descri	bed in Section .	170(b)(1)(A)(III). L	inter the hospital s
5		(b)(1)(A)	ation operated for the lation (Complete Part II	.)	-				bed in section 170
6			tate, or local governm		_				
7			ation that normally rec O(b)(1)(A)(vi). (Cor			s support from a	governmental u	init or from the gener	al public described in
8			ty trust described in s e	-	•	(Complete Part I	I.)		
9			ural research organizat ant college of agricult						ege or university or a
10	✓	from activit investment	ation that normally rec ies related to its exem income and unrelated see section 509(a)(2	pt func busine	tións—subject to cer ss taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	•
11		An organiza	ation organized and op	erated	exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and op ly supported organiza through 12d that des	tions de	escribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		organizatio	supporting organization n(s) the power to regu Part IV, Sections A a	larly ap					
b		manageme	supporting organization or the supporting or old the supporting or old the plete Part IV, Section	ganizal	tion vested in the sar				
С			unctionally integrate						ted with, its
d		Type III n	organization(s) (see in on-functionally inte- integrated. The organ	grated iization	. A supporting organi generally must satis	zation operated fy a distribution	in connection wi	th its supported orgar	
e		Check this	 You must completed box if the organization or Type III non-function 	receive	ed a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organiza			-		<u> </u>	
g	Provi	de the follow	ing information about	the sup	pported organization(
	(i) N	Name of supp organization		IN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
				-+					
Tota			tion Act Notice, see			Cat. No. 11285			90 or 990-EZ) 2019

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for	Organizations	Described in S	Sections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A	(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	ection A. Public Support Calendar year		I				
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) 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						
_	to or expended on its behalf The value of services or facilities						
3	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 shown on line 11, column (f).						
6	Public support. Subtract line 5 from						
	line 4.						
<u>s</u>	ection B. Total Support		T		1	1	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain or						-
	loss from the sale of capital assets						
	(Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	n tax year as a sec	tion 501(c)(3) org	anization,
	check this box and stop here					▶ [
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11,	column (f))		14	-
15	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15	
16a	33 1/3% support test—2019. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
b	33 1/3% support test—2018. If th	e organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ 🗆
17 a	10%-facts-and-circumstances tes	t— 2019. If the org	ganization did not	check a box on lin	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization in Part VI how the organization meets	n meets the facts	-and-circumstanci cumstances" test.	es test, check thi The organization	s box and stop n e qualifies as a publ	e re. Explain icly supported	
	organization			-			►□
h	10%-facts-and-circumstances tes	st— 2018. If the o	rganization did no	t check a box on I	ine 13, 16a, 16b,	or 17a, and line	
_	15 is 10% or more, and if the organiz	zation meets the "i	facts-and-circums	tances" test, chec	k this box and sto	p here.	
	Explain in Part VI how the organization			-		• •	. \Box
_	supported organization		haven 15 40-4	C- 10b 47 4	76		▶⊔
18	_						. □
	instructions		<u> </u>		- Cabadu	lo A (Form 000 o	▶ ⊔

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P	Support Schedule for						D 11 16
	(Complete only if you the organization fails t					to quality unde	r Part II. If
Se	ection A. Public Support	o quality under t	ine tests listed t	relow, please co	inplete Falt II.)		
	Calendar year	(-) 201E	(1-) 2016	(-) 2017	(4) 2010	(-) 2010	(C) T-1-1
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	625,308	542,542	5,181,382	213,141	7,147,272	13,709,64
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	57,996,069	59,517,781	57,157,030	57,155,856	66,215,116	298,041,85
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						ı
5	The value of services or facilities furnished by a governmental unit to the organization without charge						1
6	Total. Add lines 1 through 5	58,621,377	60,060,323	62,338,412	57,368,997	73,362,388	311,751,49
7a	Amounts included on lines 1, 2, and			5,000,000			5,000,000
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than			3,555,555			-,,,,,,,
	disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						(
С	Add lines 7a and 7b			5,000,000			5,000,00
8	Public support. (Subtract line 7c						306,751,49
	from line 6.) ection B. Total Support	<u>L</u>					
30	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	·	58,621,377	60,060,323	62,338,412	57,368,997	73,362,388	311,751,49
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,815,457	3,503,594	5,265,827	5,073,872	6,132,373	23,791,12
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						,
С	Add lines 10a and 10b.	3,815,457	3,503,594	5,265,827	5,073,872	6,132,373	23,791,12
11	business activities not included in line 10b, whether or not the business is regularly carried on.						I
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,917,266	766,626	1,791,993	6,560,845	1,822,126	14,858,85
13	Total support. (Add lines 9, 10c, 11, and 12.).	66,354,100	64,330,543	69,396,232	69,003,714	81,316,887	350,401,47
14	First five years. If the Form 990 is f	=			-		_
	check this box and stop here	<u> </u>	<u> </u>				▶ 🗆
	ection C. Computation of Public			1 (6)		T J	
	Public support percentage for 2019 (I					15	87.543 %
15	Dublic consent on the Control					16	86.113 %
16	Public support percentage from 2018					10	001110 /
16 Se	ection D. Computation of Inves	tment Income	Percentage				
16 Se 17	ection D. Computation of Inves Investment income percentage for 20	tment Income 019 (line 10c, colur	Percentage mn (f) divided by l	ine 13, column (f))	17	6.790 %
16 Se 17 18	ection D. Computation of Inves	tment Income D19 (line 10c, colur 2018 Schedule A,	Percentage nn (f) divided by l Part III, line 17 .	ine 13, column (f))	17 18	6.790 % 6.064 %

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? 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 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 in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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 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

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 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 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 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 amendment to the organizing document).

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

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 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

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

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

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
```

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

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

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

	edule A (101111 330 01 330 E2) 2013			age 3				
Pa	rt IV Supporting Organizations (continued)							
_			Yes	No				
	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						
	A family member of a person described in (a) above?	11b						
	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						
S	ection B. Type I Supporting Organizations							
			Yes	No				
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part 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	-						
2	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	2						
	organization.							
S	ection C. Type II Supporting Organizations							
_			Yes	No				
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of							
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1						
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).							
S	ection D. All Type III Supporting Organizations		v					
_			Yes	No				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 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?							
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).							
_		2						
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax							
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3						
S	ection E. Type III Functionally-Integrated Supporting Organizations							
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):						
	The organization satisfied the Activities Test. Complete line 2 below.							
	b							
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)					
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No				
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a						
ı	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.							
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a						
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h						

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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		
e	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		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
_		

7 Total annual distributions. Add lines 1 through 6.						
8 Distributions to attentive supported organizations to who details in Part VI). See instructions						
9 Distributable amount for 2019 from Section C, line 6						
10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
		110 2013	Allibalit for 2013			
1 Distributable amount for 2019 from Section C, line 6		110 2015	Allount for 2013			

details in Part VI). See instructions		(
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018.			

Schedule A (Form 990 or 990-EZ) (2019)

f Total of lines 3a through e

instructions)

See instructions.

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

3j and 4c. 8 Breakdown of line 7:

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

Additional Data

Software ID: Software Version:

EIN: 13-1667053

Name: American Institute of Physics Inc

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

Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

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

DLN: 93493311007010

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

SCHEDULE C (Form 990 or 990-

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

Inspection

		01(c)(3)) organizations: Complete Parts	I-A and C below.	Do not complete Part I-B.	
	Section 527 organizations: Complet	e Part I-A only. n Form 990, Part IV, Line 4, or Form 9	00 E7 Bart VI lin	o 47 (Lobbying Activities) than
		t have filed Form 5768 (election under s			
•	Section 501(c)(3) organizations that	have NOT filed Form 5768 (election un	der section 501(h))): Complete Part II-B. Do r	not complete Part II-A.
		າ Form 990, Part IV, Line 5 (Proxy Tax	() (see separate ir	nstructions) or Form 990-	EZ, Part V, line 35c
	xy Tax) (see separate instruction: Section 501(c)(4), (5), or (6) organiz				
	me of the organization	Lations. Complete Fait III.		Employer iden	tification number
	erican Institute of Physics Inc				
	Complete State and	nization is exempt under sectio	- F01(a) au ia	13-1667053	
				-	
1	"political campaign activities")	ization's direct and indirect political can	, ,	`	
2		itures (see instructions)			\$
3		aign activities (see instructions)			
Par	t I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	ex incurred by the organization under se	ction 4955	>	\$
2	Enter the amount of any excise ta	ex incurred by organization managers u	nder section 4955	>	\$
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	his year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3)	•
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt functi	ion activities 🕨	\$
2		anization's funds contributed to other o	-	·	\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and or	Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ 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 deliver ee (PAC). If additional space is needed,	ount paid from the ed to a separate po	filing organization's funds. olitical organization, such a	Also enter the amount
	(a) Nama	(b) Address	(a) EIN	(d) Amount naid from	(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
1					
5					
5					
or P	Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2019

Sche	dule C (Form 990 or 990-EZ) 2019					Р	age 3
Pa	rt II-B Complete if the organi Form 5768 (election u	zation is exempt under section $501(c)(3)$ and has NOT finder section $501(h)$).	led				
For e	ach "Yes" response on lines 1a through	1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ	ity.		Yes	No	'	Amour	nt
1	During the year, did the filing organiza including any attempt to influence pub	tion attempt to influence foreign, national, state or local legislation, lic opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		Yes				
b	Paid staff or management (include con	npensation in expenses reported on lines 1c through 1i)?	Yes		1		
C	Media advertisements?			No	7		
d	Mailings to members, legislators, or th	e public?		No			
е	Publications, or published or broadcast	statements?		No			
f		ring purposes?		No			
g	-	affs, government officials, or a legislative body?	Yes			10	00,000
h	· · · · · · · · · · · · · · · · · · ·	ventions, speeches, lectures, or any similar means?		No			
i				No			
j	-					10	00,000
2a		ganization to be not described in section 501(c)(3)?		No	4		
b		ncurred under section 4912					
C		ncurred by organization managers under section 4912					
d		tion 4912 tax, did it file Form 4720 for this year?	7 =3 -		<u>. </u>		
Pal	t III-A Complete if the organi 501(c)(6).	zation is exempt under section 501(c)(4), section 501(c)	(5), 0	r seci	ION		
	332(3)(3):					Yes	No
1	Were substantially all (90% or more) of	dues received nondeductible by members?		ſ	1		
2	Did the organization make only in-hou	se lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over	er lobbying and political expenditures from the prior year?			3		
Pai	and if either (a) BOTH answered "Yes."	zation is exempt under section 501(c)(4), section 501(c) Part III-A, lines 1 and 2, are answered "No" OR (b) Part					(6)
1		ts from members	1				
2	expenses for which the section 52	• •					
a			2a 2b				
b c	•		2c				
3		6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3				
4		n line 2c exceeds the amount on line 3, what portion of the excess does	<u> </u>				
•	the organization agree to carryover to	the reasonable estimate of nondeductible lobbying and political	4				
5	Taxable amount of lobbying and politic	al expenditures (see instructions)	5				
P	art IV Supplemental Informa	ition	•				
		A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); nplete this part for any additional information.	Part II-	·A, line	s 1 ar	d 2 (se	ee
	Return Reference	Explanation					
	OBBYING ACTIVITY: FOR	S LOBBYING EFFORTS FOCUS ON SCIENCE AND TECHNOLOGY FUNDING THE NATIONAL SCIENCE FOUNDATION, NATIONAL AERONAUTICS AND S ARTMENT OF ENERGY, NATIONAL INSTITUTE OF STANDARDS AND TECH	SPACE A	ADMINI	STRA	TION,	

EDUCATION, AS WELL AS SCIENCE IN GENERAL.

DEFENSE. WE ALSO WORK ON GOVERNMENT MANDATES AFFECTING SCHOLARLY PUBLISHING, SCIENCE

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493311007010

OMB No. 1545-0047

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.

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

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

), 12b.	2019
	Open to Public
mation.	Inspection
Employer ident	ification number

Ame	erican Institute of Physics Inc					13-16	67053		
Pa	rt I Organizations Maintaining Donor Adv					r Acco	unts.		
	Complete if the organization answered "Yo			-					
•	Total number of and of con-	(a) Done	or advi	sed fund	ls	(b) Funds and	other a	ccounts
L ,	Total number at end of year								
2	Aggregate value of contributions to (during year)								
•	Aggregate value of grants from (during year)								
+	Aggregate value at end of year		_						
5	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e						ınds are the		Yes 🗌 No
5	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?	or or donor advisor,	or for	any othe	er purpose o				Yes 🗌 No
Pa	rt II Conservation Easements. Complete if the organization answered "You	es" on Form 990,	Part	[V, line	7.				
L	Purpose(s) of conservation easements held by the orga	anization (check all	that ap	ply).					
	Preservation of land for public use (e.g., recreation	on or education)		Preserv	ation of an	historic	ally important	land ar	ea
	Protection of natural habitat			Preserv	ation of a d	ertified	historic struct	ure	
	Preservation of open space								
,	Complete lines 2a through 2d if the organization held a	a qualified conserva	tion co	ntributio	on in the for	m of a	conservation		
-	easement on the last day of the tax year.	a quamica consciva	cion co	ne ibacie	on in the for	Г	Held at the	End of	the Year
а	Total number of conservation easements					2a			
b	Total acreage restricted by conservation easements					2b			
c	Number of conservation easements on a certified histor	ric structure include	d in (a)		2c			
d	Number of conservation easements included in (c) acqu structure listed in the National Register	uired after 7/25/06,	and n	ot on a h	nistoric	2d			
3	Number of conservation easements modified, transferr tax year ▶	ed, released, exting	guished	, or terr	minated by	the orga	anization durin	g the	
1	Number of states where property subject to conservati	ion easement is loca	ated ►						
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold				n, handling	of violat		es (□ No
5	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of v	riolatio	ns, and	enforcing co	onservat	tion easements	s during	the year
7	Amount of expenses incurred in monitoring, inspecting \$ \\$	ı, handling of violati	ons, ar	nd enfor	cing conser	vation e	asements duri	ng the v	year
3	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?	,	•			70(h)(4	^ ^ / _	íes	□ No
•	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the or							
ar	Organizations Maintaining Collections Complete if the organization answered "Yo	•			•	er Sim	nilar Assets.	ı	
La	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina	16 (ASC 958), not to public exhibition,	to repo educat	rt in its on, or re	revenue sta esearch in f				orks of
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items:								
(i) Revenue included on Form 990, Part VIII, line 1						▶ \$		
	i)Assets included in Form 990, Part X								
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS	rical treasures, or o	ther sir	nilar ass	ets for fina				
а	Revenue included on Form 990, Part VIII, line 1	•	-				▶ \$		
b	Assets included in Form 990, Part X						▶ \$		
	Paperwork Reduction Act Notice, see the Instruction						Schedule	D (For	m 990) 201

d Equipment .

Sche	dule D (Form 990) 2019						Page 2
Par	t III Organizations Maint	aining Collections o	f Art, Histori	ical Treas	ures, or Other	Similar Assets (d	ontinued)
3	Using the organization's acquisiting items (check all that apply):	on, accession, and other	records, check	any of the f	ollowing that are	a significant use of its	collection
а	Public exhibition		d	☐ Loa	n or exchange pro	grams	
b	Scholarly research		е	☐ Oth	er		
С	Preservation for future gen	erations					
4	Provide a description of the organ Part XIII.	nization's collections and	explain how the	ey further th	ne organization's e	exempt purpose in	
5	During the year, did the organiza assets to be sold to raise funds ra						s ☑ No
Pa	Escrow and Custodia Complete if the organi: X, line 21.		' on Form 990), Part IV,	line 9, or report	ed an amount on F	orm 990, Part
1 a	Is the organization an agent, trus						
	included on Form 990, Part X? .					· · · · ·	s 🗌 No
b	If "Yes," explain the arrangemen	t in Part XIII and comple	te the following	table:		Amount	
c	Beginning balance	•	_		1c	Amount	
d	Additions during the year				4.1		
е	Distributions during the year						
f	Ending balance				4.5		
2a	Did the organization include an a					iability2	 s □ No
	•	•	,			· —	S L NO
b	If "Yes," explain the arrangement rt V Endowment Funds.	In Part XIII. Check here	e ir the explanat	ion nas bee	n provided in Part	хііі Ц	
r (·	Complete if the organiz	zation answered "Yes	' on Form 990	, Part IV,	line 10.		
	, ,	(a) Currer		Prior year		(d) Three years back	(e) Four years back
1 a	Beginning of year balance	111	,211,052	23,014,776	17,347,56	8 16,654,442	27,228,652
b	Contributions		,762,670	2,059,000	2,882,32		246,811
c	Net investment earnings, gains, ar	nd losses 20,	,297,013	-1,232,576	3,439,15	6 1,216,351	-460,358
d	Grants or scholarships						
е	Other expenditures for facilities and programs	5	,514,646	-87,369,852	654,27	6 591,790	10,360,663
f	Administrative expenses						
g	End of year balance	132	,756,089	111,211,052	23,014,77	6 17,347,568	16,654,442
2	Provide the estimated percentage	e of the current year end	balance (line 1	g, column (a)) held as:		
а	Board designated or quasi-endow	vment ▶ 81.000 %					
b	Permanent endowment > 8.	000 %					
c	Temporarily restricted endowmer	nt ▶ 11.000 %					
	The percentages on lines 2a, 2b,	and 2c should equal 100)%.				
3а	Are there endowment funds not i organization by:	·	organization tha	t are held a	nd administered f	_	Yes No
	(i) unrelated organizations .			• •		<u> </u>	n(i) No
L	(ii) related organizations					<u> </u>	(ii) No
ь 4	If "Yes" on 3a(ii), are the related Describe in Part XIII the intended						9D
	rt VI Land, Buildings, and		13 endowment	idilas.			
ı u	Complete if the organiz		' on Form 990	, Part IV,	line 11a. See Fo	orm 990, Part X, lin	e 10.
		(a) Cost or other basis (investment)	(b) Cost or other				d) Book value
1 a	Land						
b	Buildings						
	Leasehold improvements			4,921,842	2	2,779,595	2,142,247

1,609,339

7,016,359

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

400,742

1,029,174

3,572,163

1,208,597

5,987,185

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on I	Form 000 Part IV lie	20 11h	Soo Form 990 [Part V line 12
	(a) Description of security or category	(b) Book value	ie III	(c) Metho	d of valuation:
(1) Financia	(including name of security)			Cost or end-or-	-year market value
(2) Closely- (3) Other _	held equity interests				
(A) OPPORT (B)	UNISTIC INVESTMENTS	20,221,762			F
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
,	n (b) must equal Form 990, Part X, col. (B) line 12.)	20,221,762			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	Form 990, Part IV, lir	ne 110	. See Form 990,	Part X, line 13.
	(a) Description of investment			(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered 'Yes' on F (a) Description	orm 990, Part IV, lin	e 11d	. See Form 990, Par	t X, line 15. (b) Book value
(1)INVESTN (2)	MENT IN ACP				15,162,338
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15.)				15,162,338
Part X	Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990 Part IV lin	م 11 م	or 11f See Form	990 Part V line 25
1.	(a) Description of l		C 11C	or 111.5ee roim	(b) Book value
(1) Federal (4)	income taxes				0
(5)					
(6)					
(7)					
(8)					
(9)			_		
-	on (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text o	of the footnote to the on	ganizat	ion's financial state	10,657,848 ments that reports the
	's liability for uncertain tax positions under FIN 48 (ASC 7				_

Schedule D (Form 990) 2019

Page 4

1	l Total revenue, gains, and other support per audited financial statements				
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on i	nvestments	2a		
b	Donated services and use of facili	ties	2b		
C	Recoveries of prior year grants		2c	1	
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.)		5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Par		Return.	
1	Total expenses and losses per au	dited financial statements		1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:			
а	Donated services and use of facili	ties	2a		
b	Prior year adjustments		2b		
c	Other losses		2c		
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4	kc. (This must equal Form 990, Part I, line 18	.)	5	
Pai	t XIII Supplemental Info	rmation			
Prov	vide the descriptions required for P lines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b. Also complete this part to provide	4; Part IV, lines 1b and 2b; Pare any additional information.	t V, line 4;	Part X, line 2; Part
	Return Reference		Explanation		
See A	Additional Data Table				

chedule D (Form 990) 2019	
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 13-1667053

Name: American Institute of Physics Inc

T ASSETS WITH DONOR RESTRICTIONS IF THE ASSET USED TO PURCHASE THE ITEMS ARE RESTRICTED BY

Supplemental Information

DONORS.

Return Reference	Explanation
SCHEDULE D, PART III, LINE 1A:	THE NIELS BOHR LIBRARY & ARCHIVES COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND C ONTRIBUTIONS SINCE 1962, ARE NOT RECOGNIZED AS ASSETS ON THE CONSOLIDATED STATEMENTS OF FI NANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN NET ASSETS WI THOUT DONOR RESTRICTIONS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED, OR AS RELEASES OF NE

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4:	AIP HAS 15 SEPARATE FUNDS WHICH HAVE BEEN ENDOWED BY DONORS. THE EARNINGS FROM THE ENDOWME NTS HELP SUPPORT THE HISTORY CENTER, THE NIELS BOHR LIBRARY & ARCHIVES, THE SOCIETY OF PHY SICS STUDENTS, HIGH SCHOOL PHYSICS EDUCATION PROGRAMS, AND OTHER AREAS RELATED TO THE PHYS ICAL SCIENCES, WHICH ALLOWS AIP TO CONTINUE TO PRESERVE HISTORICAL DOCUMENTS RELATED TO PH YSICS, OFFER LECTURES THAT ARE OPEN TO THE PUBLIC, PRESENT AWARDS AND GRANTS FOR ACHIEVEME NTS IN PHYSICS AND HELP SUPPORT THE COMMUNITY THROUGH EDUCATION. AIP TAKES A VERY PROACTIV E ROLE IN REGARD TO OPERATIONAL AND FINANCIAL MANAGEMENT. THIS CONSISTS OF ROUTINE REVIEWS OF THE ASSET BASE, OPERATIONAL NEEDS, AND KEY RISK FACTORS. THE RESULT OF THESE EFFORTS H AS LED TO THE DESIGNATION OF AIP'S NET ASSET BASE TO BEST ALIGN OUR RESOURCES IN SUPPORT O F OUR PROGRAMS AND TO MITIGATE KEY OPERATIONAL RISKS IN ACCORDANCE WITH THE MISSION OF THE ORGANIZATION. ALL DESIGNATIONS ARE REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS AND ARE AD JUSTED BASED ON THE LATEST OPERATIONAL NEEDS AND RISK FACTORS. AIP ESTABLISHED THE FOLLOWI NG QUASI-ENDOWMENT FUNDS: GENERAL QUASI-ENDOWMENT - A BOARD DESIGNATED QUASI-ENDOWMENT CRE ATED FOR THE PURPOSE OF FUNDING AIP PROGRAM OPERATIONS. VENTURE PARTNERSHIP FUND - THE VPF WAS ESTABLISHED IN 2016 AS A BOARD-DESIGNATED QUASI-ENDOWMENT FUND ESTABLISHED TO ENCOURA GE COLLABORATIVE PARTNERSHIPS AMONG ONE OR MORE MEMBER SOCIETIES AND AIP. COLLABORATIVE PROJECTS FUNDED BY THE VPF ARE EXPECTED TO BE DRIVEN BY STRATEGY, PROMOTE GROWTH, AND INCREA SE STATURE AND INNOVATION WITHIN THE MEMBER SOCIETIES AND THE AIP FEDERATION. SUSTAINABILI TY OF THE NIELS BOHR LIBRARY & ARCHIVES & THE CENTER FOR HISTORY OF PHYSICS - A NEW QUASI-ENDOWMENT DESIGNATED BY THE BOARD OF DIRECTORS TO BEGIN A FUND TO SUPPORT THE OPERATIONS OF THE NIELS BOHR LIBRARY & ARCHIVES AND THE CENTER FOR HISTORY OF PHYSICS IN PERPETUITY.

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2:	THE AMERICAN INSTITUTE OF PHYSICS INCORPORATED HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS TAX EXEMPT UNDER SECTION 501(A) AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON NET INCOME FROM UNRELATED BUSINESS ACTIV ITIES (PRIMARILY ADVERTISING). AIP'S ACCOUNTING POLICY FOR EVALUATING UNCERTAIN TAX POSITI ONS IS TO RECOGNIZE TAX POSITIONS IF IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WOULD NO T BE SUSTAINED UPON EXAMINATION BY THE IRS. MANAGEMENT ANNUALLY REVIEWS ITS TAX POSITIONS AND HAS DETERMINED IN THE CONSOLIDATED FINANCIAL STATEMENTS. AS DECEMBER 31, 2019 AND 2018

, A PROVISION OF \$10,000 FOR STATE INCOME TAXES WAS RECORDED.

Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493311007010 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** American Institute of Physics Inc 13-1667053 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 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 employees, agents, region (by type) (such as, program service, describe for and investments region and independent fundraising, program specific type of in the region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) See Add'l Data 544,574 3a Sub-total . b Total from continuation sheets to Part I . . . 544,574 c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2019							Page 2
		ssistance to Organ ny recipient who rece						on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Oral History Interviews	5,790	Check			
		organizations listed a h the grantee or coun						1
3 Enter total num	per of other org	anizations or entities						
							Schedule	F (Form 990) 2019

Part III can be du				(-) M	(6) A 6	(-) Description	(I-) Mathadas
Гуре of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other
See Add'l Data							

Sched	dule F (Form 990) 2019		Page 4
Par	TIV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
	Corporations. (See Instructions for Form 3471)	✓ 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 6665)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	Yes	☑ No

Schedule F (Form 9	90) 2019 Page 5
Provi amou meth any a	de the information de the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; ints of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting od); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide inditional information. See instructions. Supplemental Information
Return Reference	e Explanation
SCHEDULE F, PART I, LINE 2:	GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE THE U.S: AIP HAS ESTABLISHED AND FOLLOWS DOCUMENTED POLICIES AND PROCEDURES TO MONITOR, EVALUATE AND REVIEW ALL TYPES OF

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE E PART LUNE 3E:	THE ACCOUNTING METHOD USED FOR THE EXPENDITURES SHOWN IS THE ACCRUAL BASIS

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 13-1667053

Name: American Institute of Physics Inc

55,003

Form 990 Schedule F Par	t I - Activities	Outside The U	Jnited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	1	3	Program Services	Liason Office	412,270

Grantmaking

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 reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America Grantmaking 3,669 East Asia and the Pacific Grantmaking 1,493

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region region recipients located in the reaion) Central America and the 72,139 Investments Caribbean

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 (g) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Writing Award 5,500 CHECK lEurope (Includina Iceland and (Greenland Oral History 1.493 check East Asia and Preservation the Pacific

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 of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Oral History 15,705 CHECK Europe Preservation (Including Iceland and lGreenland) ACHIEVEMENTS IN 28,008 CHECK lEurope PHYSICS AWARD (Including Iceland and Greenland)

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 (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) ORAL HISTORY 3,669 CHECK South America PRESERVATION

SCHEDULE G

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

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

American Institute of Physics Inc

Internal Revenue Service

Supplemental Information Regarding

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

organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No. 1545-0047

DLN: 93493311007010

Open to Public Inspection **Employer identification number**

13-1667053

Fundraising Activ Form 990-EZ filers	•	_			ered "Yes" on F	form 990, Part IV, line 1	17.
Indicate whether the organization	ation raised funds th	rough an	y of the fo	ollowing	activities. Check	all that apply.	
a 🗹 Mail solicitations			е	· 🗸	Solicitation of nor	n-government grants	
b 🗹 Internet and email solicit	ations		f	· 🗸 :	Solicitation of gov	ernment grants	
c Phone solicitations			g	ı 🗆 :	Special fundraisin	g events	
d 🗹 In-person solicitations							
2a Did the organization have a vor key employees listed in Fo						unining completed	es 🗆 No
b If "Yes," list the 10 highest parts to be compensated at least \$			draisers)	pursua	nt to agreements	under which the fundraise	er is
i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or crol of outions?		Gross receipts om activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Campbell and Co	Consulting	Yes	No				
One East Wacker Drive	Constitution		No			22,950	-22,950
Chicago, IL 60601						,	
		1					
otal			.▶			22,950	-22,950
List all states in which the orga licensing.	nization is registered	d or licens	sed to soli	icit cont	ributions or has l	been notified it is exempt f	rom registration or

Cat. No. 50083H

Schedule G (Form 990 or 990-EZ) 2019

	rt II Fundraising Events. Compl				
	than \$15,000 of fundraising		d gross income on Form	990-EZ, lines 1 and	6b. List events with
	gross receipts greater than \$	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
Keverkie					
200					
¥					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
N T	5 Noncash prizes				
Experises	6 Rent/facility costs				
Š	7 Food and beverages				
Zieg Zieg	Sentertainment Other direct expenses				
2	Other direct expenses	through O in column (d)			
	11 Net income summary. Subtract line 10				
Pai	rt III Gaming. Complete if the org			V, line 19, or reported	l i more than \$15,000
	on Form 990-EZ, line 6a.	1			1
E		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue					
<u>.</u>	1 Gross revenue				
TSe.	2 Cash prizes				
7	3 Noncash prizes				
វ	3 Noncash prizes				
ង ប្ដូ	4 Rent/facility costs				
ži Delo	4 Rent/facility costs				
វ រូវ ភ្ន			☐ Yes%	☐ Yes%	
វ រដ្ឋភ្ជុំ 	4 Rent/facility costs	☐ Yes%	☐ Yes % ☐ No	☐ Yes %	
<u>1</u> 1910 –	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	□ No	1_		
	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2	No	□ No	□ No ►	
	4 Rent/facility costs	No through 5 in column (d)	No	No	
	4 Rent/facility costs	No through 5 in column (d) t line 7 from line 1, column tion conducts gaming activities	No	No ▶ ▶	Ves □No
a b	4 Rent/facility costs	through 5 in column (d) through 5 in column (d)	No nn (d)	No	☐ Yes ☐ No
9 a	4 Rent/facility costs	through 5 in column (d) thine 7 from line 1, column tion conducts gaming activating activities in each column.	No nn (d)	No	
9 a	4 Rent/facility costs	through 5 in column (d) thine 7 from line 1, column cion conducts gaming activaming activities in each column censes revoked, suspend	No nn (d)	No	
) a b	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 8 Net gaming income summary. Subtract the state(s) in which the organization licensed to conduct of If "No," explain:	through 5 in column (d) thine 7 from line 1, column cion conducts gaming activaming activities in each column censes revoked, suspend	No nn (d)	No	

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ing activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· 🗆 Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$ $ angle$	anization ▶ \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ►						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	•		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spen	Ī	□ 1es		
		pt activities during the tax year 🕨	•				
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

(Form 990)

Department of the

Treasury

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.

▶ Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Open to Public

DLN: 93493311007010

Inspection

Name of the organization						Employer identific	ation number
American Institute of Physics Inc						13-1667053	
Part I General Inform	ation on Grants	and Assistance				·	
1 Does the organization main the selection criteria used						ce, and	☑ Yes ☐ No
2 Describe in Part IV the org	· ·						
			ind Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes	on Form 990, Part IV, line	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) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sections3 Enter total number of other							10
For Paperwork Reduction Act Notice			· · · · · ·	Cat. No. 5005			edule I (Form 990) 2019

Schedule I (Form 990) 2019

Part III

(1)

(6)

(7)

Part IV

Return Reference

Fellows (2)

Page 2

Explanation

Part III can be duplicated if additional space is needed

35

104

(b) Number of

recipients

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

25.399 23.150 6,626

students and early career rheologists as well as improving existing SoR programs and practices.

EVALUATE AND REVIEW ALL TYPES OF GRANTS, AWARDS, AND ASSISTANCE ON A REGULAR BASIS.

(c) Amount of

cash grant

192.611

40,468

6,000

3,371 FMV

society can better serve the rheology community more broadly, and; 3) improve diversity and inclusion in part by growing our membership through programs targeting

PROCEDURE FOR MONITORING USE OF GRANTS IN THE U.S.: AIP HAS ESTABLISHED AND FOLLOWS DOCUMENTED POLICIES AND PROCEDURES TO MONITOR.

(d) Amount of

noncash assistance

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

(e) Method of valuation (book,

FMV, appraisal, other)

Chairs

SCHEDULE I, PART II, LINES 1-10: 1) Provide funding to produce videos to encourage a diverse and inclusive pool of applicants to apply for Medical Physics graduate and fellowship programs in order to further increase the level of diversity and inclusion within the profession. 2) Provide continued funding to provide an introduction to the tools used in handling big data for researchers to use as the 'build' their science, 3) Provide continued funding to train teachers to be advocates at the local level for sound science education policy, 4)

2019 Meggars Project Award Recipient 5) Provide funding to produce a set of videos which will enhance and augment pre-college teachers undergraduate science of and in a vacuum. 6) Funding used to process, archive and provide access to the Ronald Drever papers. 7) Funding used to process, archive and provide access to the Jens Rud Neilsen collection, 8) Funding to support students attending the 2019 Sigma Pi Sigma Congress, 9) Provide housing for 17 undergraduate physics students selected for the Society of Physics Students summer intern program, 10) Provide funding to 1) quantify the diversity (multivariate) of our membership; 2) identify how the

Schedule I (Form 990) 2019

(3) Travel and Meeting Expenses (4) Awards for Achievements in Physics

(6) Science Writing Awards

SCHEDULE I, PART I, LINE 2:

Oral History Interview and Research Projects

Additional Data

Medicine 1631 Prince Street Alexandria, VA 22314 American Astronomical Society

1667 K St NW Ste 800 Washington, DC 20006

		Software ID: Software Version:	•				
		EIN	: 13-1667053				
		Name:	: American Institute	of Physics Inc			
Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	c Governments.		
(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) Description of non-cash assistance	(h) Purpose of grant or assistance

92,575

82,000

SEE PART IV

SEE PART IV

or government		п аррпсавіе	
American Assoc of Physicists in	23-7057224	501(c)(3)	

21-0735173

501(c)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government American Association of 52-0749775 501(c)(3) 66 6891 ISEE PART IV

Physics Teachers	32 07 43773	301(0)(3)	00,009		SEE TAKT IV
1 Physics Ellipse College Park, MD 20740					
George Washington University	53-0196584	501(c)(3)	32,737		SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

George Washington University 725 21st Street

Washington, DC 20052

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government AVS The Science & Technology 04-2392373 501(c)(3) 30.000 SEE PART IV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

College Park, MD 20740

Society of Rheology 13-6203476 501(c)(3) 27.0001 ISEE PART IV 1 Physics Ellipse

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Randolph College 54-0505941 501(c)(3) 20.400 SEE PART IV 2500 Rivermont Avenue

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1200 E California Blvd Pasadena, CA 91125

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government rt IV

SEE PART IV

6.395

Office of Research Services	73-1377584	501(c)(3)	6,801		See Part
201 Stephenson Pkwy		, , , ,			
Norman, OK 73019					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Texas Lutheran University

1000 W Court Seguin, TX 78155 74-1109748

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 93	49331	1007	010
Sch	edule J	С	ompensat	ion Information	0	MB No.	1545-0	0047
(For	n 990)	For certain Offic						
	Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.			, line 23.	2019			
Б			► Attach	to Form 990. instructions and the latest inforn		Openi		
•	tment of the Treasury al Revenue Service	F Go to www.ns.go	<u>00/1 01111990</u> 101	mistructions and the latest mion	nation.		ectio	
	ne of the organizarican Institute of Ph				Employer identifica	tion nu	ımber	
					13-1667053			
Pa	rt I Questi	ons Regarding Compens	ation				I	
1 a				f the following to or for a person liste			Yes	No
	990, Part VII, S	ection A, line 1a. Complete Par	t III to provide an 	y relevant information regarding the	se items.			
		s or charter travel		Housing allowance or residence for	•			
		companions		Payments for business use of perso				
		nification and gross-up paymen	ts 🗀	Health or social club dues or initiation Personal services (e.g., maid, chauf				
	L Discretion	nary spending account		rersonal services (e.g., maid, chadi	neur, cher)			
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked on Lir	20.122	2	Yes	
	unectors, truste	es, officers, including the CEO/	Executive Directo	r, regarding the items checked on th	ie ia:			
3				ed to establish the compensation of the check any boxes for methods	he			
				CEO/Executive Director, but explain i	in Part III.			
	✓ Compens	ation committee		Written employment contract				
		ent compensation consultant	$\overline{\mathbf{Z}}$	Compensation survey or study				
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .			4a		No
b		· ' '		ified retirement plan?		4b		No
c			,	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	plicable amounts for each item in Par	t III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.				
5				the organization pay or accrue any				
	compensation c	ontingent on the revenues of:						
а	The organization	n?				5a		No
b		anization?				5b		No
6	,	•	A line 1 - did	the organization pay or accrue any				
0		ontingent on the net earnings o		the organization pay of accrue any				
a	-	n?				6a		No
b						6 b		No
7	•	6a or 6b, describe in Part III.	am A lime 4 - 201	the approximation provide contract C	ن			
7				the organization provide any nonfixe rt III		7		No
8				red pursuant to a contract that was	-1			
				section 53.4958-4(a)(3)? If "Yes," dec				Nic
9				presumption procedure described in		8		No
7				presumption procedure described in		9		
For F	Panerwork Redu	iction Act Notice, see the In	structions for Fo	orm 990. Cat. No. 5	50053T Schedule 3	l (Forn	1 990)	2019

Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			benefits co	columns	(F) Compensation i
		compensation Bonus & incentive rep	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior	
See Additional Data Table								

Schedule J (Form 990) 2019	Page 3
Part III Supplemental Info	rmation
Provide the information, explanation,	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A:	FIRST CLASS TRAVEL - DUE TO A MEDICAL CONDITION, FIRST CLASS TRAVEL WAS MADE AVAILABLE TO ONE EMPLOYEE. GROSS-UP PAYMENTS - IF AN EMPLOYEE REACHES THE IRS LIMITATION FOR EMPLOYER RETIREMENT CONTRIBUTIONS, THE ORGANIZATION PROVIDES A GROSS UP PAYMENT EQUIVALENT TO THE DIFFERENCE BETWEEN THE MAX AMOUNT AND THE AMOUNT THAT WOULD HAVE BEEN CONTRIBUTED IF THERE WERE NO LIMITATIONS.
SCHEDULE J, PART I, LINE 3:	COMPENSATION REVIEW & APPROVAL PROCESS CEO: BOTH AIP'S BOARD OF DIRECTORS AND AIPP'S BOARD OF MANAGERS HAVE DESIGNATED A COMPENSATION COMMITTEE TO MANAGE COMPENSATION OF AIP'S CEO. THE CHARTER OF THE COMPENSATION COMMITTEE PROVIDES FOR A PROCEDURE THAT IS CONSISTENT WITH APPLICABLE LAW AND BEST PRACTICES. THE CHARTER PROVIDES THAT THE COMMITTEE "SHALL MAKE A RECOMMENDATION TO THE BOARD OF DIRECTORS WITH RESPECT TO THE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER." THE COMPENSATION COMMITTEE OBTAINS DATA AS TO COMPARABLE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER, RECOMMENDS TERMS OF THE CEO'S EMPLOYMENT AGREEMENTS, AND DETERMINES

REASONABLE COMPENSATION LEVEL. THE COMMITTEE SUBMITS TO THE BOARD A RECOMMENDATION FOR THE CEO'S COMPENSATION FOR EACH FISCAL YEAR. THE BOARD OF DIRECTORS MAKES THE FINAL DECISION ON THE CEO'S COMPENSATION.

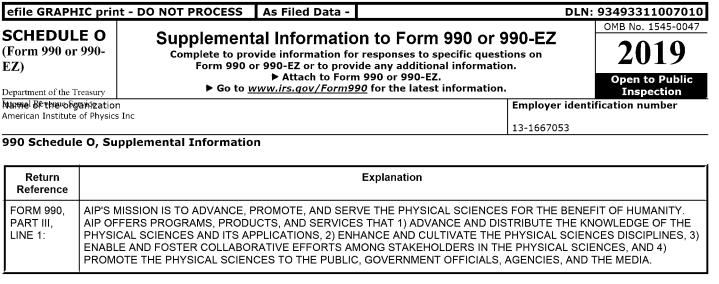
Schedule 1 (Form 990) 2019

Software ID:

Software Version:

EIN: 13-1667053

Name: American Institute of Physics Inc Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (E) Total of columns (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (F) Compensation in other deferred benefits (B)(i)-(D) column (B) (i) Base Compensation (ii) (iii) reported as deferred on compensation Bonus & incentive Other reportable prior Form 990 compensation compensation 1Michael Moloney 417,123 (i) 75,000 19,000 28,000 18,191 557,314 CEO 1Stephen Mackwell (i) 245,180 23,262 268,442 DEO 2Catherine Swartz (i) 328,759 17,756 4,203 3,412 28,000 382,130 CFAO 3John Haynes (i) 494,357 749,856 191,629 19,600 28,000 16,270 AIPP, CEÓ (ii) 4Larry Fishbein 179,572 148 15,495 1,245 196,460 Sr Dir, News and Magazines 5Roy Levenson (i) 295,511 80,364 10,612 28,000 23,480 437,967 AIPP, CFO 6Adam Chesler (i) 137,157 32,479 22,478 19,153 1,116 212,383 AIPP, Dir Global Sales 7Kevin Steiner 170,193 46,194 18,924 24,040 24,951 284,302 AIPP, Head of Global Sales 8Jason Wilde (i) 289,125 47,700 29,236 28,000 25,352 419,413 AIPP, Chief Publishing Officer 9Tracy Denien (i) 176,053 257,323 17,830 600 20,353 42,487 AIPP, Head of Info. Technology 10Sherry Render (i) 179,108 2,680 18,851 17,211 217,850 Controller 11Naomi Schmuckler 179,874 210,326 2,622 18,444 9,386 Sr Dir, Human Resources 12Peter Inchauteguiz (i) 195,900 2,800 19,696 219,702 1,306 Sr Director, Strategic Mkt 13Sara Girard (i) 165,871 14,734 2,284 24,922 18,829 226,640 AIPP, Head of Mkt and



Return Reference	Explanation
FORM 990, PART III, LINE 4A:	PROGRAM SERVICES: AIP PUBLISHING LLC (AIPP) IS A SINGLE MEMBER, NOT-FOR-PROFIT, LIMITED LIABILITY COMPANY OWNED BY THE AMERICAN INSTITUTE OF PHYSICS (AIP). AIPP IS A SCHOLARLY PUBLISHER IN THE PHYSICAL AND RELATED SCIENCES, PROVIDING THE GLOBAL SCIENCE COMMUNITY WITH A COMPREHENSIVE COLLECTION OF CITED, PEER-REVIEWED SCIENTIFIC PAPERS AND OTHER INFORMATION. ACCESSED BY RESEARCHERS AT NEARLY 4,000 INSTITUTIONS WORLDWIDE, AIPP'S PORTFOLIO OF 20 JOURNALS INCLUDES PRESTIGIOUS TITLES SUCH AS APPLIED PHYSICS LETTERS, JOURNAL OF APPLIED PHYSICS, THE JOURNAL OF CHEMICAL PHYSICS, AND THE AIP CONFERENCE PROCEEDINGS. AIPP SUPPORTS THE SCIENTIFIC AND EDUCATIONAL MISSION OF AIP THROUGH ITS SCHOLARLY PUBLISHING ACTIVITIES AND WORKS WITH SEVERAL OF AIP'S MEMBER SOCIETIES AND OTHER PUBLISHING PARTNERS TO HELP ADVANCE THEIR PUBLISHING MISSIONS. PHYSICS TODAY, AIP'S FLAGSHIP MAGAZINE, PROVIDES A UNIFYING INFLUENCE FOR THE PHYSICAL SCIENCES THROUGH ITS BROAD AND AUTHORITATIVE COVERAGE OF SCIENTIFIC RESEARCH, NEWS, AND OPINIONS OF RELEVANCE TO THE GLOBAL SCIENTIFIC COMMUNITY. THE MONTHLY MAGAZINE IS RECEIVED BY THE INDIVIDUAL MEMBERS OF AIP'S 10 CONSTITUENT SOCIETIES, AS WELL AS LIBRARIES, AND INSTITUTIONS AROUND THE WORLD, AND OTHER INTERESTED INDIVIDUALS. PHYSICS TODAY ALSO HAS A STRONG PRESENCE ON SOCIAL MEDIA WITH, FOR EXAMPLE, MORE THAN 3 MILLION FOLLOWERS ON FACEBOOK.

Return Reference	Explanation
FORM 990, PART III, LINE 4B:	AIP PROGRAMS: IN KEEPING WITH ITS MISSION TO ADVANCE, PROMOTE AND SERVE THE PHYSICAL SCIEN CES FOR THE BENEFIT OF HUMANITY, AIP OFFERS UNIQUE SERVICES, PRODUCTS, AND EXPERTISE IN ED UCATION AND STUDENT SERVICES, HISTORY OF PHYSICS, ARCHIVES AND LIBRARY, MEDIA AND GOVERNME NT RELATIONS, MAGAZINE PUBLISHING AND EMPLOYMENT SERVICES FOR SCIENCE AND ENGINEERING PROF ESSIONALS, STATISTICAL RESEARCH, AND INDUSTRY OUTREACH. WITH THE PURPOSE OF PROMOTING THE PROGRESS AND RELEVANCE OF THE PHYSICAL SCIENCES AND ADVANCING THEIR CONTRIBUTIONS AND RESP ONSIVENESS TO SOCIETY, AIP GENERATES, COMMUNICATES, AND POPULARIZES KNOWLEDGE, UNIQUE EXPERTISE, AND AUTHORITATIVE INFORMATION. THE SOCIETY OF PHYSICS STUDENTS (SPS) IS A SCIENTIFI C SOCIETY FOR PHYSICS UNDERGRADUATES AND THEIR MENTORS, WITH MORE THAN 4,200 MEMBERS AND 8 18 SPS CHAPTERS NATIONWIDE AND 33 INTERNATIONAL CHAPTERS. SPS EXISTS TO SUPPORT DEPARTMENT S AND THE UNDERGRADUATE PHYSICS COMMUNITY, SIGMA PI SIGMA, THE PHYSICS HONOR SOCIETY, RECO GNIZES OUTSTANDING SCHOLARS IN PHYSICS, ENCOURAGES INTEREST IN THE FIELD, AND PROMOTES AN ATTITUDE OF SERVICE AMONG ITS OVER 70,000 MEMBERS AND 580 CHAPTERS TOWARDS THE ENTIRE PHYSICS COMMUNITY AND THE PUBLIC. A PRIMARY MISSION OF SIGMA PI SIGMA IS TO SUPPORT PHYSICS STUDENTS, DEPARTMENTS, AND ALUMNI BY IMPROVING DEPARTMENT HEALTH. THE SOCIETY OF PHYSICS STUDENTS, DEPARTMENTS, AND ALUMNI BY IMPROVING DEPARTMENT HEALTH. THE SOCIETY OF PHYSICS STUDENTS AND SIGMA PROVIDE ENRICHING EXPERIENCES FOR STUDENTS INTERESTED IN THE PHYSIC SALD ENTRY OF THE WIND STUDENTS OF PHYSICS STUDENTS, DEPARTMENTS, AND ALUMNI BY IMPROVING DEPARTMENT HEALTH. THE SOCIETY OF PHYSICS STUDENTS AND SIGMA PROVIDE ENRICHING EXPERIENCES FOR STUDENTS PROGRAMS AT SCIE NTIFIC MEETINGS - OPPORTUNITIES THAT ARE VITAL TO THE PROFESSIONAL DEVELOPMENT OF THE UNDE REGRADUATE PHYSICS STUDENT. THE AIP HISTORY PROGRAMS (THE CENTER FOR HISTORY OF PHYSICS AND THE NIELS BOHR LIBRARY & ARCHIVES) WORK TO PRESERVE AND MAKE KNOWN THE HISTORY OF PHYSICS AND THE MODERN PHYSICAL SCIENC

Return Reference	Explanation
FORM 990, PART III, LINE 4B:	ATED SCIENCE REPORTERS FROM THEIR STAFF. INSIDE SCIENCE PRODUCES NEWS ARTICLES AND VIDEOS TO COVER A WIDE ARRAY OF SCIENTIFIC TOPICS. THE AIP MEDIA SERVICES TEAM WORKS WITH AIP PUB LISHING, AIP MEMBER SOCIETIES, AND ALLIED ORGANIZATIONS TO PRODUCE AND PROMOTE TIMELY AND ACCURATE PUBLIC DISSEMINATION OF SCIENTIFIC ADVANCES AND KNOWLEDGE. MEDIA SERVICES STAFFS PRESS ROOMS, ORGANIZES PRESS CONFERENCES AND OTHER OUTREACH EVENTS, AND PRODUCES HUNDREDS OF WRITTEN STORIES, VIDEOS, IMAGES, INFOGRAPHS AND OTHER FORMS OF PUBLIC INFORMATION FOR THE MEDIA AND GENERAL PUBLIC EVERY YEAR. THE AIP STATISTICAL RESEARCH CENTER COLLECTS AND D ISSEMINATES RELIABLE AND TIMELY DATA ON EDUCATION, CAREERS, AND DIVERSITY IN THE PHYSICAL SCIENCES. DATA ARE PUBLISHED IN THE AREAS OF ENROLLMENT, DEGREES, DEMOGRAPHICS, REPRESENTA TION OF WOMEN AND MINORITIES, EMPLOYMENT BY ECONOMIC SECTOR, AND SALARY INFORMATION FOR PH YSICS AND ASTRONOMY BACHELOR'S, MASTER'S, AND PH.D. HOLDERS. THE CENTER ALSO PROVIDES SURV EY EXPERTISE AND CONTRACTS WITH MEMBER SOCIETIES AND OUTSIDE ORGANIZATIONS TO CARRY OUT TA RGETED STUDIES. AIP VENTURE PARTNERSHIP FUND (VPF) USES A PORTION OF AIP'S STRATEGIC RESER VES AS A BOARD-DESIGNATED FUND, THE PROCEEDS OF WHICH ARE USED TO FUND INNOVATIVE PROJECTS BETWEEN ONE OR MORE MEMBER SOCIETIES AND AIP. FOR A MEMBER SOCIETY TO RECEIVE THIS GRANT, THE SOCIETY MUST SUBMIT A PROPOSAL TO THE VPF COMMITTEE. THE VPF COMMITTEE, MADE UP OF IN DEPENDENT MEMBERS, PERFORMS A THOROUGH REVIEW PROCESS TO SELECT GRANTS TO BE AWARDED.

Return Explanation

Reference	
	EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDERS: AIP IS A NON-STOCK, NON-PROFIT MEMBER CORPORATION.
LINE 6:	

990 Schedule O, Supplemental Information

Return

Reference	·
FORM 990,	HOW MEMBERS OF SHAREHOLDERS ELECT GOVERNING BOARD: THE BOARD OF DIRECTORS IS COMPOSED OF THE
PART VI,	FOLLOWING INDIVIDUALS: ONE (1) INDIVIDUAL ELECTED OR APPOINTED BY EACH MEMBER (A MEMBER SOCIETY
LINE 7A:	DIRECTOR); NO FEWER THAN TWO (2) AND NO MORE THAN FOUR (4) INDIVIDUALS, AS THE BOARD OF DIRECTORS
	SHALL DETERMINE, ELECTED BY THE BOARD OF DIRECTORS (THE AT-LARGE DIRECTORS); AND THE CHAIR OF THE
	BOARD OF DIRECTORS, THE CORPORATE SECRETARY, AND THE CHIEF EXECUTIVE OFFICER, EX OFFICIO (THE EX
	OFFICIO DIRECTORS).

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Reference

11010101100	
FORM 990,	THE MEMBER SOCIETIES ARE NOT OFTEN CALLED UPON TO TAKE ACTION IN THEIR ROLE AS THE VOTING MEMBERS
PART VI,	OF AIP. RESPONSIBILITIES OF THE MEMBER SOCIETY REPRESENTATIVES INCLUDE: -APPROVING MEMBER SOCIETY
LINE 7B:	DESIGNATED DIRECTORS TO THE AIP BOARD, OR THEIR RE-APPOINTMENT FOR A SECOND TERMAPPROVING
	AMENDMENTS TO THE BYLAWSADMITTING NEW MEMBER SOCIETIES TO THE FEDERATIONMAKING A FINAL
	DECISION IN THE EVENT THAT AIP EVER CONSIDERS A FUNDAMENTAL CHANGE IN ITS STRUCTURE, SUCH AS A
	MERGER, CONSOLIDATION, DISSOLUTION OR SALE OF SUBSTANTIALLY ALL ITS ASSETS.

990 Schedule O, Supplemental Information

Return

LINE 11B:

Reference	
FORM 990,	FORM 990 REVIEW PROCESS: THE FORM 990 IS PREPARED AND REVIEWED BY THE ORGANIZATION'S INDEPENDENT
PART VI.	ACCOUNTING FIRM WITH THE ASSISTANCE OF AIP'S MANAGEMENT. THE FORM 990 IS THEN REVIEWED BY THE AUDIT

COMMITTEE AND THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING.

Explanation

FORM 990, PART VI, LINE 12C: THE CONSOLIDATED AIP CONSISTS OF THE PARENT CORPORATION (AIP), ITS WHOLLY OWNED SUBSIDIARY AIP PUBLISHING LLC (AIPP), AND ITS WHOLLY OWNED SUBSIDIARY THE AIP FOUNDATION. DUE TO THE NATURE OF THE RELATIONSHIP BETWEEN AIP AND AIPP, EACH ORGANIZATION MAINTAINS AND MANAGES ITS OWN CONFLICT OF INTEREST (COI) POLICY. AT AIP, ANNUALLY, A CONFLICT OF INTEREST (COI) DISCLOSURE IS COMPLETED BY ALL AIP COVERED PERSONS. THE CHAIR OF THE AUDIT COMMITTEE AND THE CORPORATE SECRETARY REVIEW THE DISCLOSURES, EVALUATE IF THERE ARE CONFLICTS OF INTEREST THAT NEED TO BE MANAGED, AND REPORT THEIR FINDINGS TO THE AUDIT COMMITTEE. THE AUDIT COMMITTEE THEN DETERMINES THE NEXT STEPS WITH RESPECT TO MANAGING ANY CONFLICTS OF INTEREST. THE FINAL RESULTS OF THE DISCLOSURE REVIEWS AND ANY MANAGEMENT PLANS ARE REPORTED TO INDIVIDUAL DIRECTORS AND TO THE BOARD. AIP'S COI POLICY IS MADE AVAILABLE TO THE PUBLIC THROUGH AIP'S WEBSITE. AT AIPP, ANNUALLY, ALL MEMBERS OF THE BOARD OF MANAGERS AND ALL OFFICERS OF THE COMPANY CONFIRM THAT THEY HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH AIPP'S COI POLICY. ALL OTHER AIPP EMPLOYEES ARE NOT REQUIRED TO CONFIRM ANNUALLY. THE CFO OF AIPP CERTIFIES ANNUALLY TO THE CFO OF AIP THAT AIPP IS REGULARLY AND CONSISTENTLY MONITORING AND ENFORCING COMPLIANCE WITH THE AIPP COI POLICY. AIPP DOES NOT MAKE ITS COI POLICY AVAILABLE TO THE PUBLIC.	Return Reference	Explanation
	PART VI,	PUBLISHING LLC (AIPP), AND ITS WHOLLY OWNED SUBSIDIARY THE AIP FOUNDATION. DUE TO THE NATURE OF THE RELATIONSHIP BETWEEN AIP AND AIPP, EACH ORGANIZATION MAINTAINS AND MANAGES ITS OWN CONFLICT OF INTEREST (COI) POLICY. AT AIP, ANNUALLY, A CONFLICT OF INTEREST (COI) DISCLOSURE IS COMPLETED BY ALL AIP COVERED PERSONS (OFFICERS, DIRECTORS, AND KEY PERSONS). NO AIPP EMPLOYEES ARE AIP COVERED PERSONS. THE CHAIR OF THE AUDIT COMMITTEE AND THE CORPORATE SECRETARY REVIEW THE DISCLOSURES, EVALUATE IF THERE ARE CONFLICTS OF INTEREST THAT NEED TO BE MANAGED, AND REPORT THEIR FINDINGS TO THE AUDIT COMMITTEE. THE AUDIT COMMITTEE THEN DETERMINES THE NEXT STEPS WITH RESPECT TO MANAGING ANY CONFLICTS OF INTEREST. THE FINAL RESULTS OF THE DISCLOSURE REVIEWS AND ANY MANAGEMENT PLANS ARE REPORTED TO INDIVIDUAL DIRECTORS AND TO THE BOARD. AIP'S COI POLICY IS MADE AVAILABLE TO THE PUBLIC THROUGH AIP'S WEBSITE. AT AIPP, ANNUALLY, ALL MEMBERS OF THE BOARD OF MANAGERS AND ALL OFFICERS OF THE COMPANY CONFIRM THAT THEY HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH AIPP'S COI POLICY. ALL OTHER AIPP EMPLOYEES ARE NOT REQUIRED TO CONFIRM ANNUALLY. THE CFO OF AIPP CERTIFIES ANNUALLY TO THE CFO OF AIP THAT AIPP IS REGULARLY AND CONSISTENTLY MONITORING AND ENFORCING COMPLIANCE WITH THE AIPP COI POLICY. AIPP DOES NOT MAKE ITS COI POLICY AVAILABLE TO THE

Return

Reference	
FORM 990,	CEO: BOTH AIP'S BOARD OF DIRECTORS AND AIPP'S BOARD OF MANAGERS HAVE DESIGNATED A COMPENSATION
PART VI,	COMMITTEE TO MANAGE COMPENSATION OF AIP'S CEO. THE CHARTER OF THE COMPENSATION COMMITTEE
LINE 15A:	PROVIDES FOR A PROCEDURE THAT IS CONSISTENT WITH APPLICABLE LAW AND BEST PRACTICES. THE CHARTER
	PROVIDES THAT THE COMMITTEE SHALL MAKE A RECOMMENDATION TO THE BOARD OF DIRECTORS WITH RESPECT
	TO THE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER. THE COMPENSATION COMMITTEE OBTAINS DATA AS
	TO COMPARABLE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER, RECOMMENDS TERMS OF THE CEO'S
	EMPLOYMENT AGREEMENT, AND DETERMINES REASONABLE COMPENSATION LEVEL. THE COMMITTEE SUBMITS TO
	THE BOARD A RECOMMENDATION FOR THE CEO'S COMPENSATION FOR EACH FISCAL YEAR. THE BOARD OF
	DIRECTORS MAKES THE FINAL DECISION ON THE CEO'S COMPENSATION.

Explanation

Return Explanation
Reference

FORM 990, PART VI, TO PERIODICALLY REVIEW AND APPROVAL PROCESS: OFFICERS: A COMPENSATION CONSULTING FIRM IS RETAINED TO PERIODICALLY REVIEW THE COMPENSATION RANGES OF THE OFFICERS. THE SENIOR DIRECTOR OF HUMAN RESOURCES PRESENTS THIS INFORMATION TO THE COMPENSATION COMMITTEE FOR INFORMATION PURPOSES ONLY

Return Explanation
Reference

FORM 990, OTHER ORGANIZATION DOCUMENTS MADE AVAILABLE TO THE PUBLIC: THE AIP WEBSITE HAS A GOVERNANCE SECTION THAT INCLUDES CORPORATION BYLAWS. ALSO ON THE WEBSITE ARE ANNUAL REPORTS THAT INCLUDE FINANCIAL HIGHLIGHTS FOR AIP. THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND FORM 990 ARE ALSO AVAILABLE ON THE WEBSITE.

990 Schedule O, Supplemental Information

Return

Reference	
	OTHER CHANGES IN NET ASSETS OR FUND BALANCES: FASB ADOPTION POST-RETIREMENT MEDICAL PLAN: \$(936,980) ROUNDING OFF: \$1,748 OTHER CHANGES: \$10,000
LINE 9:	

Explanation

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	AIPP PRODUCES A SINGLE AUDIT REPORT PREPARED BY THE SAME AUDIT FIRM USED BY AIP. THE SINGLE AUDIT
PART XII,	REPORT IS INCORPORATED INTO THE CONSOLIDATED STATEMENTS OF AIP.
LINE 2C:	l l

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data SCHEDULE R | Related

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

OMB No. 1545-0047

DLN: 93493311007010

Open to Public Inspection

Employer identification number

13-1667053

Internal Revenue Service
Name of the organization
American Institute of Physics Inc

Department of the Treasury

(Form 990)

► Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity (1) AIP PUBLISHING LLC **PUBLISHING** NY 62,344,000 67,858,000 AIP 1305 WALT WHITMAN RD STE 300 MELVILLE, NY 11747 46-1881138 Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (f) **(g)** Section 512(b) (e) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Primary activity Direct controlling or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1) AMERICAN CENTER FOR PHYSICS OFFICE SPACE MD 501(C)(3) 12B na No 1 PHYSICS ELLIPSE COLLEGE PARK, MD 20740 52-1712905 (2)AIP Foundation DE 501(C)(3) 12A AIP Fundraising Yes 1 PHYSICS ELLIPSE College Park, MD 20740 83-4485064 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2019

one or more related organizations	s treated as a partnership		, 					1 ,			T 75	1	. 1		
(a) Name, address, and EIN ol related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	income(r unrela excluded tax ur sections	inant elated, ted, d from ider 5 512-	(f) Share of total income		(† Dispropi allocai	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k Percer owner	ntage
					514	+)			Yes	No		Yes	\vdash		
(1) NEW CRYSTALLOGRAPHY JOURNAL LLC		PUBLISHING	DE	NA	Related		-26,905	59,384		No			No	50.0	000 %
1305 WALT WHITMAN RD STE 300 MELVILLE, NY 11747 90-0988084															
Part IV Identification of Related Orgal because it had one or more related							ization an	 swered "Ye	s" on	Form	 990, Part I	l V, lin	e 34		
(a) Name, address, and EIN of related organization	(b) Primary activity	Le dom	gal icile r foreign		(d) rect controlling entity	Type (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total income		(g) e of end year assets	-of- Perc	(h) entage ership		(i Section (13) cor enti	512(b) ntrol l ed
(1)AIP GLOBAL INC	INTL. OFFICE	D		AII	PP	C COF	RP	24,890		122,0	042 100.0	000 %		Yes	NO
1305 WALT WHITMAN RD STE 300 MELVILLE, NY 11747 27-0602778															
											Schodulo				

Schedule R (Form 990)	2019		Pa	ge 3
Part V Transact	ions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete	ne 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year,	did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) int	erest, (ii)annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or ca	oital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or ca	oital contribution from related organization(s)	1c		No
d Loans or loan gu	arantees to or for related organization(s)	1 d		No
e Loans or loan gu	arantees by related organization(s)	1e		No
f Dividends from re	lated organization(s)	1 f		No
	related organization(s)	1 g		No
		1h		No
	s with related organization(s)	1i		No
	equipment, or other assets to related organization(s)	1j		No
k Lease of facilities	, equipment, or other assets from related organization(s)	1k	Yes	
I Performance of se	rvices or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of se	rvices or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilitie	s, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid e	mployees with related organization(s)	10	Yes	
p Reimbursement	paid to related organization(s) for expenses	1 p	Yes	
q Reimbursement	aid by related organization(s) for expenses	1 q		No
r Other transfer of	cash or property to related organization(s)	1r		No
s Other transfer of	cash or property from related organization(s)	1s		No

f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Yes	
o Sharing of paid employees with related organization(s)				1o Yes	
p Reimbursement paid to related organization(s) for expenses				1p Yes	
q Reimbursement paid by related organization(s) for expenses				1q	No
r Other transfer of cash or property to related organization(s)				1r	No
f s Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered re	elationships and tra	nsaction thresholds.	-	
= 1. 1 1 1 1 1 1 1	, meraamig coverea i				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount involved	
(a)	(b) Transaction	(c)		ount involved	
(a) Name of related organization	(b) Transaction	(c) Amount involved 412,270	Method of determining amo	ount involved	
(a) Name of related organization (1)AIP GLOBAL INC	(b) Transaction type (a-s)	(c) Amount involved 412,270 82,000	Method of determining amo	ount involved	

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate ?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
			1			ı				Schedul	e R (Form	990	0) 2019

Schedule R (Form 990) 2019 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. (see instructions). Return Reference Explanation SCHEDULE R, PART III, LINE 1, NAME, ADDRESS & EIN OF RELATED ORGANIZATION NEW CRYSTALLOGRAPHY JOURNAL, LLC 1305 WALT WHITMAN ROAD, SUITE 300 MELVILLE, NY 11747 EIN: COLUMN A: 90-0988084

Return Reference	Explanation
, ,	FOR THE CALENDAR YEAR 2019, AIP PUBLISHING LLC, A DISREGARDED ENTITY WITH RESPECT TO AIP, OWNED 100% OF AIP GLOBAL.