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

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

DLN: 93493318007128

OMB No 1545-0047

Open to Public

Department of the Treasury

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017	Interna	l Revenue Service	F Information about Form 990 and its instructions is at www	THE GOV/TOTTI	<u> </u>		Inspection				
That starting	A Fo	or the <b>2017</b> ca		2017							
Post   Summary	☐ Add	dress change me change	AMERICAN GEOPHYSICAL UNION				ication number				
Application pending   Component   Application pending   Component   Application pending   Component											
City or town, state or promite, country, and ZIP or foreign postal code   W45/INSTON, DC 20099				te	E Telephone	e number					
## ASTINATION, DC 20009    F. Name and address of principal officer CHRISTINE W MCENTEE 200 Principal officer 200 P	☐ App	olication pending									
ChristTitle W McBrite   Washington, DC 20009   Washington, DC 2000			WASHINGTON, DC 20009		<b>G</b> Gross rec	eipts \$ 59	9,042,890				
2000 FLORIDA AVE NW   WASHINTOTON, DC 200099				H(a) Is this	a group ret	urn for					
Tox-exempt status			2000 FLORIDA AVE NW				∐Yes 🗹 No				
Website: ► HTTP //SITES AGU ORG/						=5	☐ Yes ☐No				
Park   Summary		r-exempt status	✓ 501(c)(3)				•				
Part   Summary	J W	ebsite:▶ HTT	P //SITES AGU ORG/	H(c) Group	exemption i	number	<b>&gt;</b>				
1 Briefly describe the organization's mission or most significant activities   AGU SEEKS TO PROMOTE DISCOVERY IN EARTH AND SPACE SCIENCE FOR THE BENEFIT OF HUMANITY	<b>K</b> Forn	n of organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ►	<b>L</b> Year of forma	tion 1972	<b>M</b> State	of legal domicile DC				
AGU SEEKS TO PROMOTE DISCOVERY IN EARTH AND SPACE SCIENCE FOR THE BENEFIT OF HUMANITY   1	Pa	tt I Sumr	nary								
b Net unrelated business taxable income from 990-T, line 34				FIT OF HUMA	NITY						
B   Net unrelated business taxable income from Form 990-T, line 34   7b   0   0	nce										
b Net unrelated business taxable income from 990-T, line 34	ma										
b Net unrelated business taxable income from 990-T, line 34	) Ve	2 Check this	s box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed of m	ore than 25%	of its net as	sets					
b Net unrelated business taxable income from 990-T, line 34	Ğ						15				
b Net unrelated business taxable income from 990-T, line 34	<b>×</b> 5 √	<b>4</b> Number o	4	15							
b Net unrelated business taxable income from 990-T, line 34	щe	<b>5</b> Total num	5	148							
b Net unrelated business taxable income from 990-T, line 34	ctiv	<b>6</b> Total num	ber of volunteers (estimate if necessary)	•	6	21,000					
8 Contributions and grants (Part VIII, line 1h)	ď				436,489						
8 Contributions and grants (Part VIII, line 1h)		<b>b</b> Net unrela									
9 Program service revenue (Part VIII, line 2g)				Pric	or Year		Current Year				
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 35,814,284 57,796,889  13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	햪					_					
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 35,814,284 57,796,889  13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	rie/	_				_					
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	Ģ					_					
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)					<u>.</u>						
14 Benefits paid to or for members (Part IX, column (A), line 4)						_					
15   Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   14,791,237   15,380,293     16a   Professional fundraising fees (Part IX, column (A), line 11e)					569,9	_					
16a Professional fundraising fees (Part IX, column (A), line 11e)					447040						
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12	જુ				14,/91,2	_					
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12	æ					٠					
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12	Exp				21 560 0	1.4	20 574 740				
19   Revenue less expenses   Subtract line 18 from line 12	_										
Beginning of Current Year   End of Year		· ·									
20 Total assets (Part X, line 16)	_ (r)	19 Revenue	ess expenses Subtract line 18 from line 12	Reginning		_					
20 Total assets (Part X, line 16)	S C		Beginning of Current Year								
21 Total liabilities (Part X, line 26)       15,439,631       34,809,921         22 Net assets or fund balances       Subtract line 21 from line 20       89,474,972       123,705,459	ssel 3afa	20 Total asse	ets (Part X, line 16)	104,914,6	158,515,380						
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	A A				15,439,6	34,809,921					
	ΣŢ	22 Net assets	s or fund balances Subtract line 21 from line 20		89,474,9	72	123,705,459				

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, incluin knowledge and belief, it is true, correct, and complete Declaration of prepa any knowledge

Sign Here

Signature of officer CHRISTINE W MCENTEE CEO Type or print name and title Preparer's signature DEBORAH G KOSNETT

Paid Preparer **Use Only** 

Print/Type preparer's name DEBORAH G KOSNETT Firm's name TATE AND TRYON Firm's address ► 2021 L STREET NW SUITE 400 WASHINGTON, DC 20036

May the IRS discuss this return with the preparer shown above? (see instru For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2017)					Page <b>2</b>
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III .		🗹
1	Briefly describe the o	rganızatıon's mıssıon				
HUM		ES A COMMUNITY OF	EARTH AND SPA		Y IN EARTH AND SPACE SCIE LLABORATIVELY ADVANCES A	
2	the prior Form 990 o	, -		vices during the year which	ch were not listed on	☐ Yes ☑ No
3	Did the organization services?	cease conducting, or r	make significant o	changes in how it conduc	ts, any program	☐ Yes ☑ No
	If "Yes," describe the	se changes on Schedu	ıle O			
4	Section 501(c)(3) an		ons are required	to report the amount of	rgest program services, as m grants and allocations to othe	
4a	(Code See Additional Data	) (Expenses \$	11,093,995	including grants of \$	25,151 ) (Revenue \$	11,831,315 )
4b	(Code See Additional Data	) (Expenses \$	8,600,826	including grants of \$	134,310 ) (Revenue \$	)
4c	(Code	) (Expenses \$	6,521,775	including grants of \$	) (Revenue \$	40,528,078 )
	See Additional Data					
	See Additional Data					
4d	Other program service	ces (Describe in Sched	lule O)			
	(Expenses \$	5,430,260 ind	luding grants of	\$ 369,57	5 ) (Revenue \$	377,132 )
4e	Total program serv	/ice expenses ▶	31,646,8	56		

Page 3

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Form **990** (2017)

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🖼 . . . 2 Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 

4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

to provide advice on the distribution or investment of amounts in such funds or accounts? Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . .

6 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian

for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 . . . . . . . d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 11e

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 12a Did the organization obtain separate, independent audited financial statements for the tax year?

12a If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

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

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

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

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

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

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

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

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

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Form 990 (2017)

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īν	Checklist of Required Schedules	(continued)	,_
_	encentise of inequired beneautes	continuca,	

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

instructions for applicable filing thresholds, conditions, and exceptions)

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	21	Yes	

b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b							
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes						
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22							

The storme 204, and the organization attach a copy of its addited minimal statements to this return.	20b		
Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	

u	bid the organization operate one of more hospital facilities. If it is, complete schedule if it is	20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
	government on Part 1x, Column (A), line 1, 11 Tes, Complete Schedule 1, Parts 1 and 11			

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

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

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

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

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

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

orm	990 (2017)			Page
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•		Ш
	Enterthe growth and are Box 2 of France 1000 Faton 0 of eath and backles   14-1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 190  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
2a	(gambling) winnings to prize winners?	<b>1</b> c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CA , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
٠	If res, to line 3a of 3b, did the organization meronin 6000-1.	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?	<b>6</b> a		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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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
	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		
9a	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		
0	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 10b			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	orm <b>99</b>	2 (22)

orm	990 (2	2017)					Page <b>(</b>
Par	t VI	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI $$ . $$ .					<u> </u>
Se	ction	A. Governing Body and Management					
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	15		Yes	No
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O			-		
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	15			
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ess rela	ationship with any other	2		No
3		ne organization delegate control over management duties customarily performed b icers, directors or trustees, or key employees to a management company or other			3		No
4	Did th	ne organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No
6	Did th	ne organization have members or stockholders?			6	Yes	
7a		ne organization have members, stockholders, or other persons who had the power bers of the governing body?	to elec	t or appoint one or more	7a	Yes	
b		ny governance decisions of the organization reserved to (or subject to approval by	,		7b		No
8		ne organization contemporaneously document the meetings held or written actions ollowing	under	taken during the year by			
а	The g	overning body?			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			8b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> (			9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	iired b	y the Internal Revenue	e Code	⊋.)	
						Yes	No
10a	Did th	ne organization have local chapters, branches, or affiliates?			10a		No
b		es," did the organization have written policies and procedures governing the activiti Franches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has the	he organization provided a complete copy of this Form 990 to all members of its go	vernir •	ng body before filing the	11a	Yes	
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form	1 990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes	
b		officers, directors, or trustees, and key employees required to disclose annually in cts?	terests	that could give rise to	12b	Yes	
С	Did th Sched	ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy •	? If "Yes," describe in	12c	Yes	
13	Dıd tl	ne organization have a written whistleblower policy?			13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?			14	Yes	
15		ne process for determining compensation of the following persons include a review ins, comparability data, and contemporaneous substantiation of the deliberation an					
а	The o	organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Ye	es" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Dıd th taxab	ne organization invest in, contribute assets to, or participate in a joint venture or sible entity during the year?	ımılar a	arrangement with a	16a		No
b	ın joir	es," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ard th		16b		
Se	ction	C. Disclosure					
17		he States with which a copy of this Form 990 is required to be filed▶					
18	Section	on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99 able for public inspection Indicate how you made these available. Check all that ap		990-T (501(c)(3)s only)			
		Own website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in S	chedul	e O)			
19	policy	ribe in Schedule O whether (and if so, how) the organization made its governing do, and financial statements available to the public during the tax year		·			
20	State ►MIC	the name, address, and telephone number of the person who possesses the organ HAEL ANDREWS 2000 FLORIDA AVE NW WASHINGTON, DC 20009 (202) 462-69	nizatior 00	's books and records			

Form 990 (2	2017)										Page <b>7</b>
Part VII	Compensation of Officers and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part VI	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
year .	e this table for all persons require		•	•							
of compens	of the organization's <b>current</b> off ation Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on w	as p	paid			-	
	of the organization's <b>current</b> key		•								
who receive	organization's five <b>current</b> highed d reportable compensation (Box n and any related organizations										
	of the organization's <b>former</b> office e compensation from the organiz						pensat	ed e	employees who rece	ved more than \$10	0,000
	of the organization's <b>former dire</b> n, more than \$10,000 of reportab										<b>2</b>
	s in the following order  individua ed employees, and former such p		ectors,	ınstıtı	ution	nal ti	rustee	s, of	ficers, key employe	es, highest	
Check 1	this box if neither the organizatio	n nor any relate	d organ	nzatio	on co	omp	ensate	d ar	y current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, u n off or/ti	t che inles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Addition	al Data Table										
							i .				

PROJECTION PRESENTATION

CHARLOTTE, NC 282890472

compensation from the organization ▶ 20

PO BOX 890472

Page **8** 

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	one bo	ox, t n off or/t	t che inles ficer	randa :ee)	son	(D) Reportable compensation from the organization (W 2/1099-MISC)		eportable opensation m related		) ated f other sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MI3C)	2/1033-11130	,	organizati relati organiza	ed
See Additional Data Table												
_												
1b Sub-Total						▶						
c Total from continuation sheets to Pd Total (add lines 1b and 1c)						<b>▶</b>		2,848,971		0		426,074
Total number of individuals (including of reportable compensation from the compensation)	but not limited	to thos			bove		rece		100,000	-1		
											Yes	No
3 Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> 2			ee, k	ey e	mple •	oyee,	or hi	ghest compensate	ed employee on	3		No
For any individual listed on line 1a, is organization and related organization individual									om the	4	V	
<b>5</b> Did any person listed on line 1a recei									dıvıdual for	4	Yes	
services rendered to the organization		ete Sch	edule	J fo	r su	ıch pei	rson			5		No
Section B. Independent Contract  Complete this table for your five high from the organization Report competence.	est compensate									nper	nsation	
	(A) and business addre								(B) scription of services		(C Compen	
CENTERPLATE	ma basiness addre	.33						EVENT VE	NUE CATERING & ITY SERVI			,118,516
2187 ATLANTIC STREET STAMFORD, CT 06902								HOSPITAL	III SERVI			
VIRTUAL LOGIC GROUP 4362 HUNTLEY CT								IS INFRAS UPGRADE	STRUCTURE RESOURC S/MAI	ES		718,572
WOODBRIDGE, VA 22192 HICKOK COLE ARCHITECTS								INTERIOR	DESIGN			516,612
1023 31ST ST NW												
WASHINGTON, DC 20007 360 LIVE MEDIA MARKETING SERVICES 499,								499,939				
1717 RHODE ISLAND AVE NW WASHINGTON, DC 20036												
PROJECTION PRECENTATION								41/ GED1/7	250		+	

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

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

463,652

AV SERVICES

Part		<b>II</b> Statement of	Revenue									rage <b>3</b>
				a respo	onse or note to any	line in th	ns Part VIII					🗆
				·		(/	A) evenue	Rela ex fur	( <b>B)</b> Ited or empt action	(C) Unrelat busine reveni	ss	(D) Revenue excluded from tax under sections
	1:	a Federated campaigi	ns	1a				rev	renue			512-514
nts nts		<b>b</b> Membership dues		1b	1,940,334							
irai 10 u		c Fundraising events		1c	<u> </u>							
s, G An		d Related organizatio		1d	<u> </u> 							
Gift Ilar		e Government grants (co		1e	501,552							
im.		f All other contributions,	,	_ <u>re</u> _								
tior sr S		and similar amounts no above		1f	496,135							
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution	ons included									
a t		ın lınes 1a-1f \$										
<u>ة</u> ك	יַ	h <b>Total.</b> Add lines 1a-1	f		· · •	2,	938,021					
пe					Business	Code						
ven	_	PUBLICATIONS				900099	•	59,067	41,632		436,48	39
Service Revenue		MEETINGS				900099		94,109 43,459	10,494	,459		
Z A		SOCIETY ACTIVITIES				300033		+3,+37	+3	,433		+
3	d			_								
Program	f	All other program se	rvice revenue									
Prος		T <b>otal.</b> Add lines 2a-2f			52,6	06,635						
		Investment income (iii			Interest and other	1						
	9	sımılar amounts) .		•	•	<u> </u>	1,986,574					1,986,574
		Income from investme		-		<u> </u>	130.000		120.000			
	5	Royalties	(ı) Rea		(II) Personal	<u> </u>	129,890	1	129,890			
	6a	Gross rents	(I) Rea	ı	(II) Personal	1						
				9,859								
	ŀ	<b>b</b> Less rental expenses		0								
	•	c Rental income or		9,859		1						
	_	(loss)	- (1)			ļ	9,859					0.950
	•	d Net rental income of	r (loss) (ı) Securit		(II) Other		9,033					9,859
	7 <i>a</i>	Gross amount from sales of assets other than inventory	. ,	371,887		-						
	ŀ	b Less cost or other basis and sales expenses		246,001								
		Gain or (loss)		25,886		ļ	125.000					125.006
		d Net gain or (loss) . Gross income from fo			<b>•</b>		125,886	<u>'</u>				125,886
Other Revenue	Uč	(not including \$ contributions reporte See Part IV, line 18	d on line 1c)	of								
Ä		b Less direct expense: c Net income or (loss)		b sing ev	ents	]						
the		Givet income or (loss) Gross income from g		-	ents •	1						
ō		See Part IV, line 19			J							
		<b>.</b>		a		1						
		• Less direct expense: c Net income or (loss)		<b>b</b> activit	les	]						
		aGross sales of invent returns and allowand	ory, less	a								
	ŀ	<b>b</b> Less cost of goods s	sold	b		1						
	•	Net income or (loss)	from sales of	invent	tory ►							
		Miscellaneous			Business Code							
	11	<sup>La</sup> MISCELLANEOUS RE	EVENUE		900099		24					
	ŀ	b										
	•											
		d All other revenue .				-		-				
		Total. Add lines 11a			•		24					
	12	2 Total revenue. See	instructions	• •	• • • •		57,796,889	•	52,300,036		436,489	2,122,343 Form <b>990</b> (2017)

12,053

7,392

24,800

190,995

2,362

8,092

13,558

43,467

241,947

32,000

2,266

1,026,455

2,020,878

Form 990 (2017)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other orga	anızatıons must comp	olete column (A)	
Check if Schedule O contains a response or note to any	/ line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	13,915	13,915		
<b>2</b> Grants and other assistance to domestic individuals See Part IV, line 22	353,635	353,635		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	161,487	161,487		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	2,261,446	1,334,401	856,806	70,239
<b>6</b> Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	10,131,915	6,197,794	3,588,869	345,252

**9** Other employee benefits . . .

10 Payroll taxes . . . . . 11 Fees for services (non-employees)

a Management . . . . .

f Investment management fees . . .

**12** Advertising and promotion . . .

**19** Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization .

21 Payments to affiliates . . .

expenses on Schedule O )

**b** ALLOCATED OVERHEAD

e All other expenses

a HONORARIA/CONTRIBUTIONS

c PRODUCTION/PUBLICATIONS

d OUTSOURCING & LOGISTICS

e Professional fundraising services See Part IV, line 17

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

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

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

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

**b** Legal . . . . .

13 Office expenses . .

14 Information technology

**20** Interest . . . .

23 Insurance . .

15 Royalties .

**17** Travel .

16 Occupancy .

c Accounting .

8 Pension plan accruals and contributions (include section 401

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

787,608 1,358,792 840,532

9,512

109,384

78,383

404,693

79,150

691,316

29,571

1,207,139

1,211,563

1,509,530

5,086,775

1,317,855

1,283,263

1,270,115

646,214

445,464

266,795

36,484,078

210,362

62,651

4,655,013

464,993

94,605

532,607

17,110

2,405,085

73,150

486,946

359,407

29,571

1,004,754

4,571,784

72,998

61,554

1,237,968

10,839,198

620,816

445,413

266,795

31,646,856

310,562

1,256,795

283,125

9,512

92,274

78,383

404,693

6,000

202,008

839,640

1,197,135

461,309

273,044

62,651

1,244,857

148,808

13,295

23,132

2,816,344

51

-10,595,538

2,058,933

14

15

16

26

27

28

29

30

31

32

33

34

Fund Balances

Assets or

Net

21,416,401

66,097,201

44.548.874

1.122.218

7,011,990

2.705.069

21.388.615

3.704.247

34.809.921

114.863.310

123,705,459

158.515.380

Form **990** (2017)

8,080,609

761.540

158.515.380

(B)

Page **11** 

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

		beginning or year		Lift of year
1	Cash-non-interest-bearing	499	1	419
2	Savings and temporary cash investments	5,524,349	2	10,331,471
3	Pledges and grants receivable, net	30,710	3	21,261

(A)

8,826,467

47.568.124

39.084.923

1.121.654

6.388.360

1.289.295

4.025.000

3,736,976

15,439,631

81.645.897

7.098.527

89,474,972

104,914,603

730.548

104.914.603

10c

11

12 13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

:	2 Savings and temporary cash investments	5,524,349	2	10,331,471
;	B Pledges and grants receivable, net	30,710	3	21,261
4	4 Accounts receivable, net	2,347,334	4	14,202,003
!	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		_	

II of Schedule L . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Notes and loans receivable, net . . 7

Assets Inventories for sale or use . 8 775,532 410,543 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other

10a 23,694,743 basis Complete Part VI of Schedule D 2,278,342 10b **b** Less accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities See Part IV, line 11 . . . 13 Investments—program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34) . . 17 Accounts payable and accrued expenses 18 Grants payable . . . 19 Deferred revenue . . . . 20 Tax-exempt bond liabilities . . . 21 Escrow or custodial account liability Complete Part IV of Schedule D 22

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties

23 24

Other assets See Part IV, line 11 . . . . .

Liabilities and other liabilities not included on lines 17-24)

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Intangible assets . . . . .

Other liabilities (including federal income tax, payables to related third parties, Complete Part X of Schedule D **Total liabilities.** Add lines 17 through 25 .

Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets

Temporarily restricted net assets

☐ Cash ☑ Accrual ☐ Other

Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12** 

13,235,547

-317,871

**✓** 

No

No

Nο

Form 990 (2017)

123,705,459

Yes

Yes

Yes

2a

2b

2c

3а

3b

7

8

9

10

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 5 6

Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

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

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

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

If the organization changed its method of accounting from a prior year or checked "Other." explain in

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

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

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

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

Other changes in net assets or fund balances (explain in Schedule O) . . . . . .

Form 990 (2017)

Schedule O

**Reconcilliation of Net Assets** 

Investment expenses . . . . .

Prior period adjustments . . . .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

Part XI

5

### Additional Data

Software ID:

Software Version:

**EIN:** 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Form 990 (2017)

Form 990, Part III, Line 4a: MEETINGS - AGU HAS A DIVERSE MEETING PORTFOLIO THAT OFFERS MEETINGS OF VARIOUS SIZES AND FORMATS. MOST MEETING PARTICIPANTS PRESENT A POSTER AND/OR A TALK ON THEIR LATEST SCIENTIFIC FINDINGS CONTRIBUTING TO ADVANCING EARTH AND SPACE SCIENCE INDIVIDUALS MUST PAY A REGISTRATION FEE TO PARTICIPATE. THE ABSTRACT SUBMISSIONS COVERING THEIR PRESENTATIONS ARE PUBLISHED AS PART OF THE SCIENTIFIC PROGRAM FOR EACH MEETING AND AVAILABLE VIA AGU'S WEBSITE THE AGU FALL MEETING IS RECOGNIZED AS THE LEADING MEETING IN THE EARTH AND SPACE SCIENCES COMMUNITY WITH PROGRAMMING FOCUSED ON INTER- AND MULTIPLE DISCIPLINARY SCIENCES AND POLICY AND SOCIETAL ISSUES. IT IS THE LARGEST MEETING IN THIS FIELD ATTRACTING MORE THAN 22,000 PARTICIPANTS, INCLUDING EXHIBITORS AND PRESS AT THE DECEMBER 2017 MEETING THE MEETING GENERATES HUNDREDS OF PRESS AND MEDIA STORIES ABOUT EARTH AND SCIENCE IN PROMINENT SOURCES THROUGH DISTRIBUTION ON THE TELEVISION, NEWS PRINT AND THROUGH OTHER ELECTRONIC OUTLETS THE CHAPMAN CONFERENCES ARE SMALL TOPICAL CONFERENCES THAT FOCUS ON CURRENT AND EMERGING SCIENCE ISSUES. THREE CHAPMAN CONFERENCES WERE HELD IN 2017 IN THREE DIFFERENT COUNTRIES WITH ATTENDANCE RANGING BETWEEN 106 119 PARTICIPANTS. THE 2017 AGU-SEG WORKSHOP WAS HELD IN JULY 2017 IN STANFORD, CALIFORNIA THIS YEARLY WORKSHOP, JOINTLY SPONSORED BY AGU AND THE SOCIETY OF EXPLORATION GEOPHYSICISTS, BRINGS 75 125 ATTENDEES TOGETHER WITH A SINGLE SCIENTIFIC TRACK AND A NARROW SCOPE OF CONTENT

# MARKETING COMMUNICATIONS AND DIGITAL MEDIA - MARKETING, COMMUNICATIONS AND DIGITAL MEDIA PROGRAMS SEEK TO 1) SERVE THE NEEDS AND INTERESTS OF AGU'S CURRENT AND PROSPECTIVE MEMBERS AS WELL AS THE BROADER EARTH AND SPACE SCIENCE COMMUNITY, AND OTHER STAKEHOLDERS, BY INFORMING THEM ABOUT AGU AND ITS PROGRAMS, INITIATIVES AND SERVICES, AND 2) BUILD AND MAINTAIN AGU'S REPUTATION AS A LEADER, COLLABORATOR AND SOUGHT AFTER

A MODERN DIGITAL PLATFORM THAT WILL SERVE THE NEEDS OF THE EARTH AND SPACE SCIENCE COMMUNITY TODAY, AND THAT WILL BE RESPONSIVE TO THEIR CHANGING NEEDS, 2) GROWTH IN MEDIA MENTIONS OF AGU SCIENCE AS WELL AS SOCIAL MEDIA ENGAGEMENT, 3) SUCCESSFUL MANAGEMENT OF MULTIPLE AND COMPLEX PROGRAM MARKETING CAMPAIGNS AND MAJOR ANNOUNCEMENTS THAT REINFORCE AGU'S LEADERSHIP, 4) GROWTH IN SIZE AND REPUTATION OF AGU'S SHARING SCIENCE NETWORK, AND SUCCESSFUL LAUNCH OF AGU'S VOICES FOR SCIENCE (COMMUNITIES OF SCIENTISTS COMMITTED TO PUBLIC OUTREACH AND

PARTNER WITHIN AND BEYOND THE EARTH AND SPACE SCIENCE COMMUNITY, 3) INFORM AND INSPIRE THE PUBLIC ABOUT THE VALUE AND IMPACT OF EARTH AND SPACE SCIENCE, PARTICULARLY AS IT RELATES TO INNOVATION, NATIONAL SECURITY, AND THE SAFETY AND WELL-BEING OF PEOPLE AND COMMUNITIES MAJOR ACCOMPLISHMENTS IN THESE AREAS DURING THE 2018 FISCAL YEAR INCLUDE 1) COMPLETION OF PHASE 1 OF A DIGITAL TRANSFORMATION THAT PROVIDES AGU WITH

ADVOCACY FOR SCIENCE), 5) STRATEGIC MARKETING, COMMUNICATIONS AND CONTENT PLANNING FOR AGU'S CENTENNIAL IN 2019, A MAJOR EVENT FOR THE

Form 990, Part III, Line 4b:

ORGANIZATION AND THE FARTH AND SPACE SCIENCE COMMUNITY

PUBLICATIONS - AGU PUBLISHES 20 JOURNALS PRESENTING PEER-REVIEWED RESEARCH PAPERS AS WELL AS NUMEROUS BOOKS THESE PUBLICATIONS COVER THE EARTH SCIENCES, PLANETARY SCIENCES, SOLAR-TERRESTRIAL AND SPACE PHYSICS, AND THE ENVIRONMENTAL SCIENCES COVERAGE OF THE PAPERS HELP MAKE THESE SCIENTIFIC STUDIES AVAILABLE TO THE PUBLIC. AND MANY OF THE PAPERS ARE USED IN IMPORTANT ASSESSMENTS SUCH AS THE IPCC ALL AGU JOURNALS AND

Form 990, Part III, Line 4c:

AVAILABLE IN OVER 150 COUNTRIES AGU PUBLISHES MORE THAN 5.700 ARTICLES ANNUALLY

SOME BOOKS ARE DISTRIBUTED ELECTRONICALLY VIA THE INTERNET, MOST STILL HAVE A MINOR PRINT COMPONENT. ONE OR MORE OF THE PUBLICATIONS REACH

EACH OF THE AGU'S MORE THAN 60,000 MEMBERS AGU PUBLICATIONS REACH MANY SCIENTISTS AND STUDENTS BEYOND THE AGU MEMBERSHIP, AS WELL AS OTHER MEMBERS OF THE PUBLIC, THROUGH MORE THAN 1,300 LIBRARIES, AND CONTENT AFTER 1997 AND OLDER THAN 24 MONTHS IS FREELY AVAILABLE PUBLICATIONS ARE

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code (Expenses \$ including grants of \$ 369,575 ) (Revenue \$ 4.529,045 SCIENCE - THE AGU SCIENCE DEPARTMENT IS RESPONSIBLE FOR AGU TALENT POOL AND PROFESSIONAL EDUCATION PROGRAMS PROVIDING SUPPORT TO AGU MEMBERS THROUGH ALL CAREER STAGES, AND FOR SERVING AS FOCAL POINT FOR SCIENTIFIC PROGRAM-RELATED ACTIVITIES WHICH CUT ACROSS AGU DISCIPLINES INCLUDING AREAS SUCH AS SCIENTIFIC ETHICS PROGRAMS, HONORS AND RECOGNITION PROGRAMS FOR AGU MEMBERS, AND FOR AGU SCIENTIFIC INITIATIVES SUCH AS THE THRIVING EARTH EXCHANGE PROGRAM (Code (Expenses \$ 901,215 including grants of \$ (Revenue \$ 377,132 )

SOCIETY ACTIVITIES, START INTERNATIONAL ACTIVITIES AND MEMBERSHIP SERVICES

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

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

and Independent Contractors

CHRIS BALLENTINE

CARLOS DENGO

LISA J GRAUMLICH

JOSHUA M GREENBERG

EILEEN E HOFMANN

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

	any hours	and	a dır	ecto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ERIC A DAVIDSON PRESIDENT	8 00	×		×				0	0	0
ROBIN ELIZABETH BELL PRESIDENT-ELECT	5 00	x		х				0	0	0
MARGARET LEINEN IMMEDIATE PAST PRESIDENT	5 00	х		х				0	0	0
LOUISE BELLEDIN	5 00									

PRESIDENT-ELECT		X	Х		0	
MARGARET LEINEN	5 00	×	Х		0	
IMMEDIATE PAST PRESIDENT		χ.	^			
LOUISE PELLERIN	5 00	×	X		0	
GENERAL SECRETARY		*	^			
SUSAN WEBB	5 00					

5 00

5 00

5 00

5 00

5 00

......

MARGARET LEINEN IMMEDIATE PAST PRESIDENT	5 00	×	х		0	О	
LOUISE PELLERIN GENERAL SECRETARY	5 00	×	×		0	0	
SUSAN WEBB INTERNATIONAL SECRETARY	5 00	×	×		0	0	

Χ

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0

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

and a director/trustee)

organization

564,874

206,764

246,499

258,770

252,455

organizations

from the

100,454

28,676

34,654

45,201

29,787

0

any hours

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

and Independent Contractors

MCENTEE CHRISTINE

MICHAEL S ANDREWS

COO (TIL JUNE 2017)

SENIOR VICE PRESIDENT

ROYCE B HANSON

DANA D REHM

FRANK KRAUSE

CHIEF EXECUTIVE OFFICER

CHIEF FINANCIAL OFFICER

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SR VICE PRESIDENT OF PUBLICATIONS

	arry riours	"	ı a uıı	ectt	J1 / C1	usice,	,	Organización	organizacions	l lioni the .
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
BRANDON JONES DIRECTOR	5 00	x						0	0	0
KELLY KLIMA DIRECTOR	5 00	х						0	0	0
KERSTIN LEHNERT DIRECTOR	5 00	×						0	0	0
CATUDVALA MANDUCA	5 00									

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KERSTIN LEHNERT	5 00	\ <sub>\ \</sub>			0	ا	
DIRECTOR		^			3	Ĭ	
CATHRYN A MANDUCA	5 00	×			0	0	
DIRECTOR		^				Ĭ	
SOROOSH SOROOSHIAN	5 00	l 🗸			0	0	
DIRECTOR		^					

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

and a director/trustee)

Х

organization

190,509

189,982

151,596

159,285

organizations

from the

40,529

31,487

23,618

13,053

17,243

any hours

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

and Independent Contractors

VICE PRESIDENT

PATRICIA YAYA

VICE PRESIDENT

VICE PRESIDENT

RAJUL E PANDYA

DIRECTOR

TRACY J LAMONDUE

	for related organizations below dotted line)	Individual trustee or director	Institutional Truste	Officer	key employee	Highest compensatemplovee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CAMALA D KOVALICK SENIOR VICE PRESIDENT	37 50		ग		×	ted		216,228	0	29,683
LAUREN M PARR VICE PRESIDENT	37 50				×			194,985	0	31,689
DILLYMALIANC	37 50									

BILLY WILLIAMS 217,024 ................. VICE PRESIDENT 37 50 ALEXANDRA M SHULTZ

37 50

37 50

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.................

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493318007128
SC	H <b>ED</b> m 990	ULE A		Public (	Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017
		the Treasury	▶ Infe	ormation abou	► Attach to Form It Schedule A (Form			ictions is at	Open to Public Inspection
Nam	e of th	nue Service he organiza			www.ms.g	<u> </u>		Employer identific	
		EOPHYSICAL U	NION					52-0955532	
	rt I				us (All organization			See instructions.	
1 1	organiz				it is (For lines 1 thro			(A)(:)	
_		•		·	sociation of churches			(A)(I).	
2					1)(A)(ii). (Attach Sch	•	• •		
3		•	•	·	vice organization desc			-	
4			esearch orga and state _	nızatıon operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5			ition operate ( <b>iv).</b> (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>
6		A federal, s	tate, or local	government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).	
7				mally receives ( <b>vi).</b> (Complete	a substantıal part of ıt Part II )	s support from a	governmental u	nit or from the genera	al public described in
8		A communi	ty trust desc	ribed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10	<b>✓</b>	from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le mplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ition organize	ed and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	l exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or <b>se</b> (	ction 509(a)(2	). See <b>section 509(</b> a	
а		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally i		supporting organizatio ons) You must com				ted with, its
d		Type III n	on-function integrated	<b>ally integrate</b> The organizatio	d. A supporting organ n generally must satis t IV, Sections A and	Ization operated fy a distribution i	in connection wi requirement and	th its supported orgar	` '
e		Check this	, box if the org	ianization receiv	, ved a written determir	nation from the I		pe I, Type II, Type II	[ functionally
f	Enter			l organizations	integrated supporting	organization			
g				-	ipported organization(	s)		_	
	(i) N	Name of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anızatıon listed ıng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota	I	work Reduc						Schedule A (Form 9	

Page 2

Section A. Public Support Calendar vear (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ") Tax revenues levied for the

2 organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (a)2013 **(b)**2014 (c)2015 (d)2016 (e)2017 (f)Total (or fiscal year beginning in) ▶ 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets

(Explain in Part VI) 11 Total support. Add lines 7 through 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, S e 11, column (f))

3	section C. Computation of Public Support Percentage
14	Public support percentage for 2017 (line 6, column (f) divided by lin
15	Public support percentage for 2016 Schedule A, Part II, line 14

box and stop here. The organization qualifies as a publicly supported organization

15 r mor

X	on	line	13,	and	line	14	ıs	33	1/3%	0

v	on	line	13	and	line	14 1	15 3	3 1	/3%	^

15	Public support percentage for 2016 Schedule A, Part II, line 14
16a	33 1/3% support test—2017. If the organization did not check the box

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

and stop here. The organization qualifies as a publicly supported organization

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ia	33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box	<
	and stop here. The organization qualifies as a publicly supported organization	Þ
b	33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check tl	his

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- h 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

organization

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If
the organization fails to qualify under the tests listed below, please complete Part II.)
Section A. Public Support

	art IIII Support Schedule fo						
	(Complete only if you						r Part II. If
_	the organization fails t	o qualify under t	he tests listed b	elow, please co	mplete Part II.)	)	
5	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) ⊤otal
1							
-	membership fees received (Do not	4,093,488	4,195,143	2,513,039	2,746,787	2,938,021	16,486,478
	include any "unusual grants`")						
2							
	merchandise sold or services						
	performed, or facilities furnished in	12,992,652	27,547,038	27,516,431	30,466,706	52,170,146	150,692,973
	any activity that is related to the						
3	organization's tax-exempt purpose Gross receipts from activities that						
3	are not an unrelated trade or						
	business under section 513						
	Submitted and submitted to						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
_	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5	17,086,140	31,742,181	30,029,470	33,213,493	55,108,167	167,179,451
	Amounts included on lines 1, 2, and						
<i>,</i> u	3 received from disqualified persons	4,090	57,675	18,270	18,340	22,816	121,191
b	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the						0
	greater of \$5,000 or 1% of the						
	amount on line 13 for the year	4.000	57.675	10.270	10.240	22.046	121 101
	Add lines 7a and 7b	4,090	57,675	18,270	18,340	22,816	121,191
8	<b>Public support.</b> (Subtract line 7c from line 6)						167,058,260
-	ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	<b>(f)</b> ⊤otal
9		17,086,140	31,742,181	30,029,470	33,213,493	55,108,167	167,179,451
L0a				, ,			
	dividends, payments received on						
	securities loans, rents, royalties	15,781,394	2,513,179	2,046,350	2,101,346	2,126,323	24,568,592
	and income from similar sources						
h	Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	- III.	15,781,394	2,513,179	2,046,350	2,101,346	2,126,323	24,568,592
11	Net income from unrelated						
	business activities not included in						

	paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	17,086,140	31,742,181	30,029,470	33,213,493	55,108,167	167,179,451
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	4,090	57,675	18,270	18,340	22,816	121,191
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	4,090	57,675	18,270	18,340	22,816	121,191
8	<b>Public support.</b> (Subtract line 7c from line 6 )						167,058,260
Se	ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	<b>(f)</b> ⊤otal
9		(a) 2013 17,086,140	<b>(b)</b> 2014	(c) 2015 30,029,470	(d) 2016 33,213,493	` '	(f) Total
	(or fiscal year beginning in) ▶	. ,		` '	. ,	55,108,167	
9	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	17,086,140	31,742,181	30,029,470	33,213,493	55,108,167	167,179,451
9 10a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,	17,086,140	31,742,181	30,029,470	33,213,493	55,108,167 2,126,323	167,179,451
9 10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	17,086,140 15,781,394	31,742,181	30,029,470 2,046,350	33,213,493 2,101,346	55,108,167 2,126,323	167,179,451 24,568,592

b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
С	Add lines 10a and 10b	15,781,394	2,513,179	2,046,350	2,101,346	2,	126,323	24,568,592	
11	Net income from unrelated								
	business activities not included in line 10b, whether or not the								
	business is regularly carried on								
12	Other income Do not include gain								
	or loss from the sale of capital								
4.0	assets (Explain in Part VI ) <b>Total support.</b> (Add lines 9, 10c,								
13	11, and 12)	32,867,534	34,255,360	32,075,820	35,314,839	57,	234,490	191,748,043	
14	First five years. If the Form 990 is f	or the organizatio	n's first, second, t	hırd, fourth, or fıf	th tax year as a se	ction 501(	c)(3) or	ganızatıon,	
	check this box and <b>stop here</b>							▶ □	
Se	ction C. Computation of Public	Support Perce	entage						
15	Public support percentage for 2017 (I	ine 8, column (f)	divided by line 13,	column (f))		15		87 120 %	
16	Public support percentage from 2016 Schedule A, Part III, line 15					16		80 450 %	
Se	ction D. Computation of Inves	tment Income	Percentage						
17							7 12 810 %		
18	Investment income percentage from	<b>2016</b> Schedule A,	Part III, line 17			18		19 480 %	

### more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is ightharpoonsnot more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

19a 331/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

Part I. complete Sections A and C. If you checked 12c of Part I. complete Sections A. D. and E. If you checked 12d of Part I. complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		

	to, describe in the supported organization and designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied			

		~	l 1	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supported by or in connection with its supported organizations.		

	· ·				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections				
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> 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				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported				

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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

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

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

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

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

Did the organization 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

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes."

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

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

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

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

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

amendment to the organizing document)

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

the organization had excess business holdings)

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

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

8

10a

	art IV Supporting Organizations (continued)		<u>'</u>	age 3
ı C	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	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	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization			
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	Section D. All Type III Supporting Organizations			
	ection b. An Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
_	Section 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 instruction	ons)		
	a 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	ınstru	ctions)	
			/	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b 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.	ΣU		
	<ul> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.</li> </ul>	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 <b>Part VI.</b> the role played by the organization in this regard	3b		

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	izations	Page
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.	ust on I	Nov 20, 1970 (explain in	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	tegrat		ganization (see

<b>7 Total annual distributions.</b> Add lines 1 through 6						
Distributions to attentive supported organizations to videtails in Part VI) See instructions						
9 Distributable amount for 2017 from Section C, line 6	9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017			
1 Distributable amount for 2017 from Section C, line						

8 Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line     6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI)			

details in <b>Part VI</b> ) See instructions	nen trie organization is respon	Sive (provide	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI)     See instructions			
3 Excess distributions carryover, if any, to 2017			
а			

Schedule A (Form 990 or 990-EZ) (2017)

**b** From 2013. . . . . . . . **c** From 2014. . . . . . **d** From 2015. . . . . . . e From 2016. . . . . . f Total of lines 3a through e

instructions)

See instructions

31 and 4c 8 Breakdown of line 7

\$

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, 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 2017 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 2018. Add lines

a Excess from 2013. . . . . . **b** Excess from 2014. . . . c Excess from 2015. . . . . **d** Excess from 2016. . . . . e Excess from 2017. . . . .

## Additional Data

# Software ID: Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Page 8

Schedule A (Form 990 or 990-EZ) 2017

Part VI Supplemental Information Provide the explanations required by Part II. line 10. Part II. line 17a or 17b

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)

Instructions)

Facts And Circumstances Test

SCHEDULE C

## Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

5

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Inspection

DLN: 93493318007128

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number AMERICAN GEOPHYSICAL UNION 52-0955532 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 2 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 3 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2

if the amount on line ie, column (a) or	(b) is:  i ne lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e	[
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	]
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	j
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	]
Over \$17,000,000	\$1,000,000	j
Grassroots nontaxable amount (enter 25% of line 1f)		250,000
Subtract line 1g from line 1a If zero or less, enter -0-		0
Subtract line 1f from line 1c If zero or less, enter -0-		0
If there is an amount other than zero on either section 4911 tax for this year?	er line 1h or line 1i, did the organization file Form 47.	20 reporting Yes No

Lobbying Expenditures During 4-Year Averaging Period

1,000,000

112,792

250,000

3,157

**(b)** 2015

1,000,000

44,879

250,000

901

(a) 2014

(d) 2017

1,000,000

31,798

250,000

1,572 Schedule C (Form 990 or 990-EZ) 2017

(e) Total

4,000,000

6.000.000

210,829

1,000,000

1,500,000

(c) 2016

1,000,000

21,360

250,000

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

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

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

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

Grassroots lobbying expenditures

Lobbying ceiling amount

activity

Volunteers?

1

(b)

Amount

(a)

No

Yes

### Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

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

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

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

SCHEDULE D Supplemental Fina

## **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.

2017

**DLN: 93493318007128**OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

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

Name of the organization **Employer identification number** AMERICAN GEOPHYSICAL UNION 52-0955532 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 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 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

 ${f d}$  Equipment .

Part 3	Organizations Ma											
3	Organizacions M	aintaining Collections o	of Art, Hi	storical T	reas	ures, o	r Other !	Similar As	sets (	continu	ed)	
	Using the organization's acquitems (check all that apply)	uisition, accession, and other	records, c	theck any of	the fo	ollowing	that are a	sıgnıfıcant u	se of its	collect	tion	
а	Public exhibition			d 🗌	Loar	or exch	ange prog	rams				
b	Scholarly research			e 🗌	Othe	er						
С	Preservation for future	e generations										
	Provide a description of the open XIII	organization's collections and	l explain ho	ow they furt	her th	e organı	zation's ex	empt purpos	se in			
	During the year, did the organisets to be sold to raise fur							lar	☐ Ye	s [	□No	,
Part		<b>odial Arrangements.</b> ganization answered "Yes	" on Form	n 990, Part	: IV,	ıne 9, c	r reporte	d an amou	nt on F	orm 9	90, F	'art
	Is the organization an agent included on Form 990, Part )		ıntermedia	iry for contri	bution	ns or oth	er assets r	iot	☐ Ye	s [	□No	,
b	If "Yes," explain the arrange	ement in Part XIII and comple	ete the follo	owing table				Aı	nount			-
	Beginning balance	mene in rare Alli and compre	te the folk	owing table			1c					•
_	Additions during the year						1d					
	Distributions during the year						1e					
	Ending balance						1f					
	Did the organization include	an amount on Form 990, Par	t X, line 2:	1, for escrov	v or cı	ustodial	account lia	bility?	☐ Ye	s [	□No	
b	If "Yes," explain the arrange	ment in Part XIII. Check here	e if the exc	lanation has	s beer	n provide	ed in Part X	TTT				
Par		ds. Complete if the organ								•		
		(a)Currer		(b)Prior yea			ears back	(d)Three yea		(e)Fou	r years	back
<b>1a</b> B	Beginning of year balance .		764,380		5,256		602,625					
<b>b</b> C	Contributions		30,992	84	4,268		49,902	(	502,625			
c N	let investment earnings, gain	ns, and losses	103,537	4.	5,316		9,729					
d G	Grants or scholarships		23,051	2:	1,000							
	Other expenditures for facilities and programs	es										
fΑ	Administrative expenses .		458		460		6,000					
g E	End of year balance		875,400	764	4,380		656,256	6	02,625			
2	Provide the estimated percei	ntage of the current year end	balance (	lıne 1g, colu	mn (a	a)) held a	s					<u> </u>
а	Board designated or quasi-e	ndowment 🟲										
b	Permanent endowment <b>&gt;</b>	86 990 %										
С	Temporarily restricted endov	vment ▶ 13 010 %										
	The percentages on lines 2a, Are there endowment funds			on that are h	eld ar	nd admir	ustered for	the				
	organization by								_		'es	No
	(i) unrelated organizations									a(i)	_	No
	(ii) related organizations .  If "Yes" on 3a(ii), are the rel		equired or	 Schadula P						ı(ii) 3b	-	No
	Describe in Part XIII the inte	-							<u> </u>			
	VI Land, Buildings,	and Equipment.										
	Complete If the ord Description of property	ganization answered "Yes (a) Cost or other basis		n 990, Part r other basis (			. See For			ne 10. d) Book	value	
L	Description of property	(investment)	(D) COSCO	, outer pasis (	ouiei)	(c) AC	camalaceu u	opi coladion	,	DOOK	, value	
1- 1	and			1 7	05,021	-					1	705,021
	and			•	73,722							173,722
- D B	Buildings			19,1	, ,,, , , ,	1					19,	1/3,/22

1,233,789

1,582,211

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

537,658

21,416,401

0

696,131

1,582,211

Schedule D (Form 990) 2017			Page <b>3</b>
Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he organization answ	ered "Yes" on Form 9	90, Part IV, line 11b.
(a) Description of security or category	(b) Book value		od of valuation
(including name of security)  (1) Financial derivatives		Cost or end-c	f-year market value
(2) Closely-held equity interests			
(3) Other(A) TRUST INVESTMENTS	44,548,874		F
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	44,548,874		
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on I	Form 990, Part IV, lır	ne 11c. See Form 990,	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Meth	od of valuation f-year market value
(1)		Cost of end-c	, year market value
(2)			
(3)			_
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization answered	d 'Van' on Form 200. Par	+ TV line 11d Can Farm	000 Park V luna 15
Other Assets. Complete if the organization answered (a) Description		t IV, ime IId See Form	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )			. •
<b>Other Liabilities.</b> Complete if the organization a See Form 990, Part X, line 25.	answered 'Yes' on For	rm 990, Part IV, line 1	1e or 11f.
1. (a) Description of liability	(b) Bo	ook value	
(1) Federal income taxes		3.000	
SECURITY DEPOSITS  ACCRUED POSTRETIREMENT BENEFITS		2,000 3,702,247	
(3)		3,7,62,217	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>	3,704,247	
2. Liability for uncertain tax positions. In Part XIII, provide the text of			_
organization's liability for uncertain tax positions under FIN 48 (ASC $$	740) Check here if the	lext or the foothote has b	een provided in Part XIII

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2c d 2d -317.871 12,917,676

2a

2b

2e е 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b . 4a Other (Describe in Part XIII ) . . . . . . 4h b

Add lines **4a** and **4b** . . . . . . . 4c c 5

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . 5

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

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

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

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

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . . .

Schedule D (Form 990) 2017

Part XI

b

1

2

5

C Other (Describe in Part XIII ) . . . . . Add lines 2a through 2d . .

d

Donated services and use of facilities . .

Prior year adjustments . . . . .

Return Reference

See Additional Data Table

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

Investment expenses not included on Form 990, Part VIII, line 7b . . .

4 b

Add lines **4a** and **4b** . . . . . . . . . . . .

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

Explanation

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

4a 4b

2a 2h

2c

2d

5

2e

3

4c

13,235,547

Page 4

70,714,565

57,796,889

57.796.889

36,484,078

36,484,078

36.484.078

Schedule D (Form 990) 2017

Ω

chedule D (Form 990) 2017	Page <b>5</b>
Part XIII Supplemental Information (conti	
Return Reference	Explanation
	Schedule D (Form 990) 2017

## **Additional Data**

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

Name: AMERICAN GEOPHYSICAL UNION

**Supplemental Information** 

Software ID:

Return Reference Explanation PART V, LINE 4 THE ENDOWMENT FUNDS HAVE BEEN ESTABLISHED FOR THE PURPOSE OF RECOGNIZING AND SUPPORTING ΕX CELLENCE IN SPECIFIC AREAS OF SCIENTIFIC RESEARCH

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	NET GAIN ON INTEREST RATE COLLAR 18,006 CHANGE IN POST-RETIREMENT BENEFITS -335,877

efile GRAPHIC prin	t - DO NOT P	ROCESS	As Filed Data ·	n - DLN: 9349331800712					
SCHEDULE F (Form 990)	State	ment of	Activities (	Outside the United States					
(1 om 000)	► Comple	ete if the organi		Yes" to Form 990, Part IV, line 14b, 15, or 16.					
Department of the Treasury Internal Revenue Service	► Informat	ion about Sched	dule F (Form 990) a	and its instructions is at wi	vw.irs.gov/form990	Open to Public Inspection			
Name of the organization					Employ	er identification number			
AMERICAN GEOPHYSICA	LUNION				52-0955	5532			
	Information of the control of the co		Outside the U	<b>Inited States.</b> Comple	te if the organiza	ation answered "Yes" to			
_	the grantees' e	eligibility for th		substantiate the amount stance, and the selection	-	l □ Yes 🗹 N			
2 For grantmaker outside the Unite		Part V the orga	anızatıon's proce	dures for monitoring the	use of its grants	and other assistance			
3 Activites per Regio	n (The following	g Part I, line 3	table can be dupli	cated if additional space is	needed )				
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in program service, de specific type o service(s) in reg	escribe for and investments of in region			
(1) See Add'l Data				-					
( 2)									
(3)									
(4)									
( 5)									
3a Sub-total b Total from continua Part I	ition sheets to	(	0 0			885,7 <sup>-</sup> 3,602,2			
c Totals (add lines 3			o o for Form 990		No 50082W	4,488,0. Schedule F (Form 990) 2017			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

Schedule F (Form 990) 2017

Part III can be duplicated if additional space is needed.

Page 3

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data							
( 2)							
(3)							

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

(4) (5)

(6)				
(7)				
(8)				
(9)				
( 10)				
(11)				
( 12)				
( 13)				
( 14)				
( 15)				

(10)			1	
(11)			1	
( 12)				
( 13)			1	
( 14)				
( 15)				
( 16)				

( 13)				
( 14)				
( 15)				
( 16)				
( 17)				
( 18)				

Sche	dule F (Form 990) 2017		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> 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, do not file with Form 990)	□Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐Yes	<b>☑</b> 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	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	<b>☑</b> 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, do not file with Form 990)	<b>✓</b> Yes	□No

Schedule F (For	n 990) 2017 Page <b>5</b>
Pr ar m	proplemental Information  by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; nounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting ethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide y additional information (see instructions).
Return Reference	Explanation

S

### **Additional Data**

EAST ASIA AND THE PACIFIC -

AUSTRALIA, BRUNEI, BURMA,

CAMBODIA,

### Software ID: Software Version:

**EIN:** 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

HONORARIA,

REIMBURSEMENTS

195,899

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	PROGRAM SERVICE ACTIVITIES	REIMBURSEMENTS	53,097

0 PROGRAM SERVICE

ACTIVITIES

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (a) Region (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EUROPE (INCLUDING ICELAND HONORARIA. 448.086 0 PROGRAM SERVICE & GREENLAND) - ALBANIA, **IACTIVITIES** REIMBURSEMENTS, ANDORRA, AUSTRIA, BELGIUM TRAVEL GRANT MIDDLE EAST AND NORTH 0 IGRANTMAKING TRAVEL GRANTS 6,549 AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT.

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (a) Region (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) TRAVEL GRANTS 4.900 RUSSIA AND NEIGHBORING 0 IGRANTMAKING STATES - ARMENIA, AZERBIJAN, BELARUS, SOUTH AMERICA -0 PROGRAM SERVICE REIMBURSEMENTS, 99,811 ARGENTINA, BOLIVIA, BRAZIL, **IACTIVITIES** TRAVEL GRANT CHILE, COLUMBIA, ECUADOR.

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (a) Region (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 69.288 SOUTH ASIA - AFGHANISTAN. 0 PROGRAM SERVICE REIMBURSEMENTS BANGLADESH, BHUTAN, **ACTIVITIES** INDIA, MALDIVES, NEPAL, SUB-SAHARAN AFRICA -0 PROGRAM SERVICE HONORARIA, 8,169 **IACTIVITIES** ANGOLA, BENIN, BOTSWANA, REIMBURSEMENTS BURKINA FASO.

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 region agents in service(s) in region region services, grants to recipients located in the region) EUROPE (INCLUDING ICELAND 0 INVESTMENTS 3,589,470 & GREENLAND) - ALBANIA. ANDORRA, AUSTRIA, BELGIUM NORTH AMERICA 0 PROGRAM SERVICE HONORARIA, 12,765 **ACTIVITIES** REIMBURSEMENTS

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
FALL MEETING TRAVEL GRANT	NORTH AMERICA	12	7,000	WIRE TRANSFER						
FALL MEETING TRAVEL GRANT	CENTRAL AMERICA AND THE CARIBBEAN	1	1,000	WIRE TRANSFER						

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
FALL MEETING AND CHAPMAN TRAVEL GRANT	EAST ASIA AND THE PACIFIC	32	33,631	WIRE TRANSFER					
FALL MEETING AND CHAPMAN TRAVEL GRANT	EUROPE (INCLUDING ICELAND & GREENLAND)	31	30,133	WIRE TRANSFER					

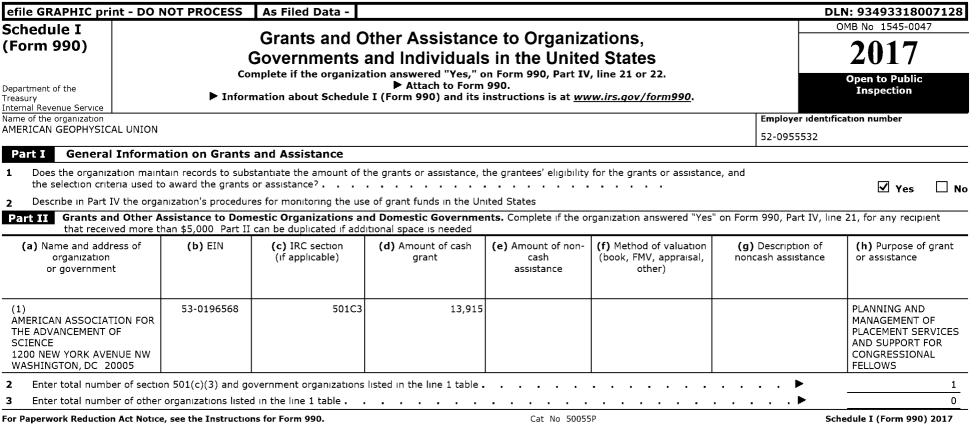
Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of (c)Number or assistance cash grant disbursement non-cash non-cash valuation (book, recipients FMV, appraisal, assistance assistance other) FALL MEETING 6.549 WIRE TRANSFER MIDDLE EAST TRAVEL GRANT IAND NORTH AFRICA 4.900 WIRE TRANSFER FALL MEETING AND RUSSIA AND CHAPMAN TRAVEL INEIGHBORING GRANT STATES

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
FALL MEETING TRAVEL GRANT	SOUTH AMERICA	10	10,000	WIRE TRANSFER					
FALL MEETING AND CHAPMAN TRAVEL GRANT	SOUTH ASIA	66	62,595	WIRE TRANSFER					

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. FMV, appraisal, recipients assistance assistance other) FALL MEETING 5,679 WIRE TRANSFER SUB-SAHARAN

TRAVEL GRANT

AFRICA



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

Schedule I (Form 990) 2017

(1) CHAPMAN TRAVEL GRANT 6.495 (2) CONGRESSIONAL SCIENCE FELLOWS 115.895 (3) 14 27,000 DATA VISUALIZATION AND STORYTELLING COMPETITION GRANT 164 163.772

(4) FALL MEETING TRAVEL GRANT (5) HORTON GRANT 31,473 9.000

(6) OTHER TRAVEL GRANTS (6) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Explanation

(7) Return Reference THE EXPENSES INCLUDED IN THE BUDGETS ARE REVIEWED PRIOR TO MAKING AN OFFER OF AN AWARD AND THE PRESENTATION OF A CONTRACT POTENTIAL AWARDEES ARE ASKED TO REVISE THEIR BUDGETS, WHERE NECESSARY, AND TO PRESENT AN ANNOTATED BUDGET NARRATIVE EXPLAINING PROPOSED EXPENSES PRIOR TO TRANSFERRING ANY FUNDS. WE CONFIRM THAT THE RECIPIENT IS NOT LISTED ON EITHER THE TREASURY DEPARTMENT OFFICE OF TERRORISM AND

FINANCIAL SANCTIONS LIST OR THE GSA EXCLUDED PARTIES LIST SYSTEM THE PRINCIPAL INVESTIGATOR AND THE INSTITUTION'S FINANCIAL OFFICER ARE PRESENTED WITH COPIES OF FINANCIAL REGULATIONS. AS WELL AS REFERENCES WITH ADDITIONAL INFORMATION THE AWARDEES ARE INSTRUCTED THAT UPON SIGNATURE IT IS EXPECTED THAT THEY WILL ABIDE BY ALL STIPULATIONS OF THE CONTRACT AS WELL AS THE ACCOMPANYING INFORMATION. ESPECIALLY IN REGARD TO REPORTING REQUIREMENTS. THE NAME OF THE CONTRACT OFFICER IS INCLUDED IN ALL CORRESPONDENCE AND RECIPIENTS ARE REQUIRED TO REMAIN IN CONTACT WITH THE CONTRACT OFFICER THROUGHOUT THE TIME OF THE GRANT AWARD AWARDEES ARE ALSO REQUIRED TO REPORT ON CHANGES IN PROPOSED EXPENSES IF THOSE CHANGES EXCEED 20% OF THE FUNDS IN ANY INDIVIDUAL CATEGORY, DETAILED FINANCIAL REPORTS, INCLUDING BACKUP

PART I, LINE 2 DOCUMENTATION, ARE REQUIRED AT SUITABLE INTERVALS DURING THE PROJECTS THE GRANT AWARDS ARE MADE IN INSTALLMENTS BASED ON A PRE-DETERMINED PAYMENT SCHEDULE FINAL PAYMENTS ARE MADE ONLY AFTER REVIEW OF THE FINANCIAL STATEMENTS AND TECHNICAL REPORTS AND ARE BASED ON ACTUAL EXPENSES AND CONFIRMATION THAT THE AWARDEE HAS MET CONTRACT OBLIGATIONS

Page **2** 

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Data	a -	DLN: 934	9331	8007	128
Sch	edule J	Com	pensati	ion Information	OM	1B No	1545-0	0047
(Fori	n 990)		rtain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees e if the organization answered "Yes" on Form 990, Part IV, line 23.  Attach to Form 990.					7
•	tment of the Treasury	► Information about	Schedule J	(Form 990) and its instructions gov/form990.	is at C		to Pul ectio	
	al Revenue Service ne of the organiza	tion	www.iis.	. <u>gov/101111990</u> .	Employer identificat			
AME	RICAN GEOPHYSICA	L UNION			52-0955532			
Pa	rt I Questi	ons Regarding Compensation	<u> </u>		32 0333332			
	(						Yes	No
1a				f the following to or for a person liste ly relevant information regarding the				
		or charter travel		Housing allowance or residence for	personal use			
	✓ Travel for	companions		Payments for business use of perso				
		ification and gross-up payments		Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	feur, chef)			
b		es in line 1a are checked, did the o ll of the expenses described above?		ollow a written policy regarding paym iplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all	- 1-3	2	Yes	
	directors, truste	es, officers, including the CEO/Exect	utive Directo	r, regarding the items checked in line	e la/			
3				ed to establish the compensation of the	ne			
		EO/Executive Director Check all tha d organization to establish compens		not check any boxes for methods CEO/Executive Director, but explain i	ın Part III			
		-	_	•				
	· ·	tion committee	<b>⊻</b>	Written employment contract				
		ent compensation consultant of other organizations	✓	Compensation survey or study  Approval by the board or compensa	tion committee			
	E 101111 990	or other organizations		Approval by the board of compensa	don committee			
4	During the year related organiza		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-control	payment?			4a		No
b	Participate in, o	receive payment from, a suppleme	ntal nonqual	ıfıed retırement plan?		4b		No
C						4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and pro	ovide the app	plicable amounts for each item in Part	t 111			
	Only 501(c)(3	, 501(c)(4), and 501(c)(29) org	anizations	must complete lines 5-9.				
5	For persons liste	d on Form 990, Part VII, Section A, ontingent on the revenues of	=					
_						F		N.a
a b	The organization  Any related organization					5a 5b		No_ No
	, _	5a or 5b, describe in Part III						110
6		d on Form 990, Part VII, Section A, entingent on the net earnings of	line 1a, did	the organization pay or accrue any				
а	The organization	7				6a		No
b	Any related orga					6b		No
	If "Yes," on line	6a or 6b, describe in Part III						
7		d on Form 990, Part VII, Section A, escribed in lines 5 and 6? If "Yes," d		the organization provide any nonfixe rt III	d	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow th	e rebuttable	presumption procedure described in	Regulations section	9		140
For I	Danerwork Redi	ction Act Notice, see the Instruc	tions for Fo	orm 990 Cat No 5	50053T Schedule 1	(Form	990)	2017

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC (C) Retirement (D) Nontaxable (E) Total of (F) and other benefits columns Compensation in compensation deferred (B)(i)-(D) column (B) (i) Base (ii) (iii) Other reported as compensation compensation Bonus & incentive reportable deferred on prior compensation compensation Form 990 See Additional Data Table

I					
				Schedule J (F	orm 990) 2017

Schedule 3 (Form 990) 2017	rage <b>3</b>						
Part IIII Supplemental Info	Part III Supplemental Information						
Provide the information, explanation	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation						
PART I, LINE 1A	AGU MAY PROVIDE BUSINESS OR FIRST CLASS TRAVEL (ON A CASE-BY-CASE BASIS) FOR THE AGU PRESIDENT WHEN MULTIPLE TRIPS (IN EXCESS OF 6 HOURS) TO ATTEND AGU BUSINESS MEETINGS ARE REQUIRED ADDITIONALLY, THE CEO'S EMPLOYMENT AGREEMENT ALLOWS FOR BUSINESS OR FIRST CLASS TRAVEL FOR TRIPS IN EXCESS OF 5 HOURS AGU DOES NOT INCLUDE THE COST OF FIRST CLASS OR BUSINESS TRAVEL AS TAXABLE INCOME TO THE CEO OR PRESIDENT AGU WILL PAY ANNUALLY ALL REASONABLE EXPENSES OF THE CEO'S SPOUSE TO ACCOMPANY HER TO THE FALL MEETING AND ONE OTHER AGU MEETING OF HER CHOICE WHICH IS TAXABLE INCOME TO THE CEO						
PART I, LINE 7	THE EXECUTIVE COMMITTEE, IN ITS SOLE DISCRETION, MAY PAY EXECUTIVE AN ANNUAL PERFORMANCE BONUS OF UP TO TEN PERCENT (10%) OF HER SALARY						

Schedule 1 (Form 990) 2017

BASED ON HER ACHIEVING EXPLICIT PERFORMANCE GOALS MANUALLY SET FORTH ANNUALLY BY THE EXECUTIVE AND THE EXECUTIVE COMMITTEE DURING THE REVIEW PERIOD

Schedule J (Form 990) 2017

# lionai L

1MICHAEL S ANDREWS

2FRANK KRAUSE

COO (TIL JUNE 2017)

3ROYCE B HANSON

4DANA D REHM

SR VICE PRESIDENT OF PUBLICATIONS

SENIOR VICE PRESIDENT

5CAMALA D KOVALICK

**6LAUREN M PARR** 

VICE PRESIDENT

**7**BILLY WILLIAMS

VICE PRESIDENT

VICE PRESIDENT

9PATRICIA YAYA

VICE PRESIDENT

VICE PRESIDENT

11RAJUL E PANDYA

DIRECTOR

8ALEXANDRA M SHULTZ

10TRACY J LAMONDUE

SENIOR VICE PRESIDENT

CHIEF FINANCIAL OFFICER

(1)

(II)

(ı)

l(11)

(ı)

(i)

l(11)

(1)

Software Version: EIN: 52-0955532

195,505

196,952

251,455

225,935

202,593

189,363

202,585

186,602

187,097

150,319

156,817

Software ID:

Name: AMERICAN GEOPHYSICAL UNION

4,259

27,047

2,315

21,520

8,635

622

11,439

907

885

1,277

468

22,906

26,195

30,235

29,787

24,180

22,517

24,527

21,151

20,975

7,148

16,243

(E) Total of columns

(B)(i)-(D)

9,111

9,525

16,733

4,556

9,304

13,452

18,027

11,765

4,052

6,281

2,243

667,245

238,781

282,219

305,738

286,798

249,712

230,954

259,578

223,425

215,009

165,025

177,771

(F) Compensation in column (B)

reported as deferred on prior Form 990

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

(A) Name and Title

(B) Breakdown of W-2 and/or 1099-MISC compensation

(C) Retirement and

(D) Nontaxable

		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	
1MCENTEE CHRISTINE CHIEF EXECUTIVE OFFICER	(ı)	494,900	48,410	21,564	84,198	18,173	Г
		0					ı

7,000

22,500

5,000

5,000

5,000

5,000

3,000

3,000

2,000

2,000

ef	ile GRAPHIC print - DO NO	T PROCESS As	Filed Data -									934933		
	hedule K orm 990)	Suj	pplemental	Information o	n Tax-E	xempt	Bonds	corintions				No 1545 <b>201</b>		
Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.									7 <b>U</b> I	/				
	artment of the Treasury	▶Informatio		► Attach to Form 99 K (Form 990) and its	0.			rm990.				en to Pu Inspectio		
Nam	rnal Revenue Service e e of the organization	r Information	Tabout Selledule	K (1 01111 330) una 163	mstruction.	3 13 at <u>ww</u>	11111 31 GO 1 7 1 O	<u></u>	Emplo	yer ıden		n number		
AME	ERICAN GEOPHYSICAL UNION								52-09	55532				
P	art I Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	rice	(f) Descript	ion of purpose	(g) De	efeased	beh	) On alf of		Pool ncing
									Yes	No	Yes	No No	Yes	No
A	DISTRICT OF COLUMBIA	53-6001131		03-01-2017	37,6			RECT PLACEMENT NG RENOVATION	Tes	Х	les	X	163	X
Pa	art III Proceeds	1				<u> </u>			'					
						A		В	C	:			D	
1	Amount of bonds retired													
2	Amount of bonds legally defeas													
3	Total proceeds of issue					37,650,00	00							
4	Gross proceeds in reserve fund													
5	Capitalized interest from proce					241,39	94							
6	Proceeds in refunding escrows													
<u>7</u>	Issuance costs from proceeds													
8	Credit enhancement from proc													
9	Working capital expenditures f													
10	Capital expenditures from proc													
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completion			• •		17	V		<b>v</b>	N1 -			1	NI -
	Were the bonds issued as part	of a company water adversaria	useus?		Yes	No	Yes	No	Yes	No		Yes	+ '	No
14	<u> </u>				_ ^								+	
15	Were the bonds issued as part					Х							-	
16	Has the final allocation of proce					Х								
17	Does the organization maintair proceeds?	n adequate books and	records to support t	the final allocation of	×									
Pa	rt IIII Private Business U	se												
						A		В	V				D	<u> </u>
1	Was the organization a partner financed by tax-exempt bonds				Yes	No X	Yes	No	Yes	No		Yes		No
2	Are there any lease arrangeme property?	ents that may result in	private business us	e of bond-financed		Х								
For	Panerwork Reduction Act Not	ice, see the Instruct	ions for Form 990		Cat	t No. 5019	3 F			S	chedul	e K (For	m 990	11 2017

5

9

Part IV

Arbitrage

No

Page 2

			Δ	I	В	(	С	Г	)
		Yes	No	Yes	No	Yes	No	Yes	No
3а	Are there any management or service contracts that may result in private business use of bond-financed property?		×						
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х						

Χ

Χ

Yes

No

C

No

Yes

Schedule K (Form 990) 2017

Yes

Χ

No

Χ

Χ

Х

Χ

Х

Δ

Yes

Χ

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

Enter the percentage of financed property used in a private business use by entities other than

unrelated trade or business activity carried on by your organization, another section 501(c)(3)

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

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

a section 501(c)(3) organization or a state or local government . . . . . Enter the percentage of financed property used in a private business use as a result of

organization, or a state or local government . . . . . . . . . . . . . . . . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

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

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

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

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

Was the hedge superintegrated? . . . . . Was the hedge terminated? . . . . . . . . .

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

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

Has the organization or the governmental issuer entered into a qualified

В

No

Χ

Х

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

Explanation

THROUGH THE 2017 DEBT FINANCING OF THE NEW BUILDING IN MARCH, AGU PAID OFF THE REMARKET BONDS

Yes

Χ

No

Yes

Yes

No

No

Yes

Nο

Page 3

No

No

D

Yes

Yes

		4
	Yes	No
Were gross proceeds invested in a guaranteed investment contract		.,

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

Schedule K (Form 990) 2017

(GIC)?

period?

Part V

Part VI

BOND ISSUE

Return Reference

SCHEDULE K, PART I, PRIOR

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

IFROM 2006

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Return Reference	Explanation
HEDULE K, PART II, LINE	THE BONDS WERE ORIGINALLY ISSUED IN 2017

\_\_\_\_

efile GRAPH	IC print - DO NOT PROCESS   As Filed Data -	DLN	: 93493318007128				
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to speci Form 990 or 990-EZ or to provide any additional in Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and www.irs.gov/form990.	of tion to Form 990 or 990-EZ In for responses to specific questions on provide any additional information. Form 990 or 990-EZ. Form 990 or 990-EZ) and its instructions is at					
Name of the organization AMERICAN GEOPHYSICAL UNION  990 Schedule O, Supplemental Information							
Return Reference	Explanation						
FORM 990, PART VI, SECTION A, LINE 1	THERE SHALL BE AN EXECUTIVE COMMITTEE COMPOSED OF THE PRESE PAST PRESIDENT, GENERAL SECRETARY, AND THE INTERNATIONAL SEOR SHALL BE A NONVOTING EX-OFFICIO MEMBER. THE EXECUTIVE COMENTY TO CONDUCT THE AFFAIRS OF THE UNION BETWEEN MEETINGS OF THE CUTIVE COMMITTEE MAY NOT CONTRADICT BOARD POLICY OR DECISION MITTEE MUST BE REPORTED TO THE BOARD WITHIN TEN DAYS. THE BET BY CONFERENCE CALL OR OTHER ELECTRONIC MEANS PROVIDED THE AKTO ONE ANOTHER AT THE SAME TIME. THE EXECUTIVE COMMITTEE SENT SIGNED BY ALL MEMBERS.	ECRETARY THE EXECU- IMITTEE SHALL HAVE TH HE BOARD, PROVIDED TH INS ACTIONS OF THE EX XECUTIVE COMMITTEE IN HAT ALL PERSONS MAY	FIVE DIRECT E AUTHORIT HAT THE EXE ECUTIVE CO MAY ALSO ME HEAR AND SPE				

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THERE SHALL BE THE FOLLOWING MEMBERSHIP CATEGORIES A MEMBER - INDIVIDUALS WHO ARE PROFES SIONALLY ENGAGED IN OR ASSOCIATED WITH EARTH AND SPACE SCIENCE ARE ELIGIBLE TO BECOME MEMBERS OF THE UNION MEMBERS SHALL BE ENTITLED TO ALL RIGHTS AND PRIVILEGES OF MEMBERSHIP, IN CLUDING THE RIGHT TO RECEIVE PUBLICATIONS AND OTHER MATERIALS, SUBSCRIBE TO UNION JOURNALS, PURCHASE UNION PUBLICATIONS AT MEMBER RATES AS ESTABLISHED BY THE BOARD OF DIRECTORS, SE RVE AS ELECTED OFFICERS OF THE UNION, SECTIONS AND FOCUS GROUPS, AND VOTE ON MATTERS BROUG HT BEFORE THE MEMBERSHIP, B FELLOW - A MEMBER WHO HAS ATTAINED ACKNOWLEDGED EMINENCE IN E ARTH AND SPACE SCIENCE, AND WHO HAS BEEN ELECTED BY A COMMITTEE OF FELLOWS APPOINTED BY THE PRESIDENT SHALL BE INDUCTED AS A FELLOW A MEMBER OF THE UNION WHO IS A RECIPIENT OF AN AGU MEDAL SHALL AUTOMATICALLY BE MADE A FELLOW THE NUMBER OF FELLOWS ELECTED IN EACH ANNU AL CLASS SHALL NOT EXCEED 0 1% OF THE TOTAL MEMBERSHIP AT THE END OF THE YEAR PRECEDING IN STALLATION OF THAT CLASS, C HONORARY FELLOW - A PERSON WHO HAS PROVIDED SERVICES TO THE U NION OR MADE EXCEPTIONAL CONTRIBUTIONS TO THE FIELDS OF EARTH AND SPACE SCIENCE MAY BE ELE CTED AN HONORARY FELLOW BY THE COUNCIL, D ASSOCIATE - AN INDIVIDUAL WHO DESIRES IDENTIFIC ATION WITH THE UNION AND WISHES TO SUPPORT ITS OBJECTIVES BUT DOES NOT MEET THE QUALIFICAT IONS OF MEMBERSHIP MAY BECOME AN ASSOCIATE ASSOCIATE MEMBERS MAY NOT VOTE OR HOLD OFFICE, BUT SHALL OTHERWISE HAVE ALL OF THE RIGHTS OF MEMBERSHIP, AND E AFFILIATE - A CORPORATIO N, ACADEMIC INSTITUTION, OR OTHER ORGANIZATION INTERESTED IN EARTH AND SPACE SCIENCE MAY D ESIGNATE A REPRESENTATIVE TO BECOME AN AFFILIATE. THE DESIGNATED REPRESENTATIVE SHALL ENJO Y THE PRIVILEGES OF A MEMBER

Return Explanation
Reference

FORM 990, ALL ELIGIBLE MEMBERS MAY VOTE TO ELECT THE UNION OFFICERS (PRESIDENT, INTERNATIONAL SECRET PART VI, ARY AND GENERAL SECRETARY/TREASURER) AND CAN VOTE IN UP TO THREE SECTIONS OF THEIR CHOICE SECTION A, TO ELECT SECTION PRESIDENTS

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 11B

Return

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

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	15A - CEO COMPENSATION IS ESTABLISHED USING THE METHODS INDICATED ON SCHEDULE J, PART I, L INE 3 COMPENSATION OF THE EXECUTIVE DIRECTOR WAS LAST REVIEWED BY THE EXECUTIVE COMMITTEE OF THE AGU BOARD IN MARCH 2017 15B - COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES IS DETERMINED USING AN INDEPENDENT COMPENSATION CONSULTANT, COMPENSATION SURVEYS, AND FORM 99 0 COMPARISON DATA COMPENSATION APPROVAL FOR AGU OFFICERS AND KEY EMPLOYEES IS THE RESPONS IBILITY OF THE CEO THE CEO SHARES THE COMPARABLE MARKET DATA ON SALARY RANGES WITH THE EX ECUTIVE COMMITTEE

Return Explanation
Reference

LINE 19

FORM 990, AGU'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC ONLI PART VI, NE AT WWW AGU ORG AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST SECTION C.

Return Explanation

FORM 990,	OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 2,405,085 MANAGEMENT AND GENERAL EXPENS
PART IX,	ES 2,058,933 FUNDRAISING EXPENSES 190,995 TOTAL EXPENSES 4,655,013
LINE 11G	

Return Explanation
Reference

PART IX,
LINE 24

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

Return Explanation
Reference

LINE 9

FORM 990, NET GAIN ON INTEREST RATE COLLAR 18,006 CHANGE IN POST-RETIREMENT BENEFITS -335,877
PART XI,

Return Explanation Reference

FORM 990 THE OVERSIGHT PROCESS REMAINS UNCHANGED FROM THE PRIOR YEAR PART IX

LINE 2C

990 Schedule O, Supplemental Information