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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

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

Open to Public Inspection

AF	or th	ie 201	calendar year, or tax year beginning	, 2017, a	na enaing			, 20	
<b>B</b> c	heck if ap	pplicable:	C Name of organization  AMERICAN INSTITUTE OF PHYSICS, INC.			D Employer id	entifica	tion number	
	Addre		Doing Business As			13-1667	053		
	chang	ge e change	Number and street (or P.O. box if mail is not delivered to street address)	Ro	om/suite	E Telephone n			
	+	l return	ONE PHYSICS ELLIPSE			(301) 20		0.0	
	-	inated	City or town, state or province, country, and ZIP or foreign postal code			(301) 10			
	Amen		COLLEGE PARK, MD 20740-3843			<b>G</b> Gross receip	ts \$	75,893,	140
		cation	F Name and address of principal officer: MICHAEL MOLONE	Y		H(a) Is this a grow			X No
	pendi	ing	SAME AS C ABOVE	_		subordinates	?	<b>├</b>	No
_	Tay-ov	empt st		947(a)(1) or	F27	H(b) Are all subord		(see instructions)	
			atus: $X = 501(c)(3) = 501(c)( )$ (insert no.) 4 WWW . AIP . ORG	947 (a)(1) 01	527	H(c) Group exem			
_			nization: X Corporation Trust Association Other ▶		1 Voor of for	mation: 1931 M			NY
	art I		mmary		L Teal Of Ioi	mation. 1991 W	State 0	r legal domicile.	
			y describe the organization's mission or most significant activities:	ATP'S M	TSSTON T	S TO ADVANC	F. D	ROMOTE AN	
d)	' '		VE THE PHYSICAL SCIENCES FOR THE BENEFIT						
Governance									
š	2	Chool	this box ▶ if the organization discontinued its operations of		of more than 3	E0/ of its not spect			
ŏ				•			3		15.
			per of independent voting members of the governing body (Part VI,				4		13.
ies							5		300.
Activities &	1		number of individuals employed in calendar year 2017 (Part V, line				6		170.
Act			number of volunteers (estimate if necessary)				7a	2,822,	
-			unrelated business revenue from Part VIII, column (C), line 12					2,022	0.000.
	Б	ivet ui	nrelated business taxable income from Form 990-T, line 34		· · · · · · ·	Prior Year	7b	Current Yea	
		Contri	ibutions and grants (Dort VIII line 4h)			542,54	2	5,181,	
ine		Contri	ibutions and grants (Part VIII, line 1h)	COPY F	OR -	59,517,78		57,157,	
Revenue	9	Progra	am service revenue (Part VIII, line 2g)	UBLIC INSP	PECTION	5,910,34		11,762,	
Re		IIIVESI	tillent income (Fart VIII, column (A), lines 3, 4, and 7d)			766,62		1,791,	
			revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			66,737,29	_	75,893,	
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A),			662,35			,608.
			s and similar amounts paid (Part IX, column (A), lines 1-3)			002,33	0.	021	000.
	14		its paid to or for members (Part IX, column (A), line 4)			30,004,33		30,283,	
Expenses	15		es, other compensation, employee benefits (Part IX, column (A), line			30,001,33	0.	30,203,	$\frac{133}{0}$ .
en	Ioa	Profes	ssional fundraising fees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (D), line 25)	12 457					
EX	47					31,166,95	5	32,585,	377
			expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			61,833,64		63,490,	
			expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			4,903,64		12,403,	
- S	19	Rever	nue less expenses. Subtract line 18 from line 12			eginning of Current		End of Year	
ance a	20	Total	assets (Part X, line 16)			204,996,45		230,702,	
Net Assets or Fund Balances	21		assets (Part X, line 16) liabilities (Part X, line 26)		• • • •	38,075,30		38,752,	
met/	22		ssets or fund balances. Subtract line 21 from line 20.		• • • • -	166,921,14	_	191,949,	
	rt II		gnature Block			100//21/11			<del></del> .
			of perjury, I declare that I have examined this return, including accompany	ing schedules	and statement	s and to the hest of	mv kn	nowledge and heli	ief it is
true	e, corre	ect, and	complete. Declaration of preparer (other than officer) is based on all informa	tion of which	preparer has ar	y knowledge.			OI, It IO
Sig	jn		Signature of officer			Date			
He	re		CATHERINE G. SWARTZ	CFO					
			Type or print name and title	<u> </u>					
		1 '	Type preparer's name Preparer's signature	<del>/)                                    </del>	Date	Chaol	if PT	īN	
Paid	t	MAR			10/19/18	Check self-employ	111	01871563	
Pre	parer			ey_				381590	
Use	Only		0.401 GDEDIGDODO DDITE   11000 11GT D	N VA 3	22102			893-0600	
May	/ the II		saddress  8401 GREENSBORO DRIVE, #800 MCLE2 closs this return with the preparer shown above? (see instructions)	μ·, νΑ 2		Phone no.	, , , ,	X Yes	N.o.
<u> </u>			Reduction Act Notice, see the separate instructions.					Form 990	No (2017)
. 01	, ape	. W UIR	ווסטטטטוו אטנ וזטווטב, שכב נווב שבאמומוב ווושנו עלווטווש.					1 01111 3 3 0	(4017)

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1	Check if Schedule O contains a response or note to any line in this Part III
•	TTACHMENT 1
	d the organization undertake any significant program services during the year which were not listed on the
_	ior Form 990 or 990-EZ? Yes X No
3	'Yes," describe these new services on Schedule O. d the organization cease conducting, or make significant changes in how it conducts, any program
,	rvices?
4	escribe the organization's program service accomplishments for each of its three largest program services, as measured b
	penses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others to total expenses, and revenue, if any, for each program service reported.
4a	ode: ) (Expenses \$ 28,310,512. including grants of \$ ) (Revenue \$ 54,984,163. )
	UBLISHING RELATED. SEE SCHEDULE O
4b	ode:) (Expenses \$15,582,382. including grants of \$621,608. ) (Revenue \$2,172,867)
	YSICS PROGRAMS. SEE SCHEDULE O
4c	ode: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
1d	her program services (Describe in Schedule O.)

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	,	37	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	_		37
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			37
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			37
	If "Yes," complete Schedule G, Part III	19		X

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Part I	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	٥		Х
_	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Λ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			Х
	If "Yes," complete Schedule L, Part I	25b		Λ
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			v
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			3.5
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Х	
_			000	(0047)

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Part V Statements Regarding Other IRS Filings and Tax Compliance Yes Nο 280 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . . . . . 1a 0. **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . . . . . . <u>1b</u> c Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. . 2a Χ 2b 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) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... Χ **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a **b** If "Yes," enter the name of the foreign country:  $\blacktriangleright \underline{\texttt{CHINA}}$ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Χ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ 6a organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . . . . . . . c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ 7с X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 Sponsoring organizations maintaining donor advised funds. 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 . . . . . . . . . . . . . b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . . 10b Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . . 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state?........ Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which 

JSA 7E1040 1.000

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Х

AMERICAN INSTITUTE OF PHYSICS, INC. 13-1667053 Page 6 Form 990 (2017) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 15 Enter the number of voting members of the governing body at the end of the tax year . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 13 Enter the number of voting members included in line 1a, above, who are independent . . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 2 3 Did the organization delegate control over management duties customarily performed by or under the direct X 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . 4 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . . X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . Χ 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Χ 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 8b Х Each committee with authority to act on behalf of the governing body?................. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes Х 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Χ b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 13 X 14 14 Did the organization have a written document retention and destruction policy?............ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X Χ 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Χ 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its

17 List the states with which a copy of this Form 990 is required to be filed  $\blacktriangleright$   $\frac{\text{MD}}{\text{NY}}$ ,

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

X Own website Another's website X Upon request Other (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records: ► CATHERINE G. SWARTZ, CFO ONE PHYSICS ELLIPSE COLLEGE PARK, MD 20740-3843 301-209-3100

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos neck ss pe	rson	e than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1)JOHN REGAZZI	10.00										
CHAIR	10.00	Х		Х				23,334.	0.	0.	
(2)JOHN KENT	8.00										
DIRECTOR	0.	Х						0.	0.	0.	
(3)JUDY DUBNO	4.00										
DIRECTOR	0.	Х						0.	0.	0.	
(4)KATE KIRBY	4.00										
DIRECTOR	3.00	X							0.	0.	
(5)BETH CUNNINGHAM	4.00										
DIRECTOR	5.00	X						0.	0.	0.	
(6)FAITH MORRISON	8.00										
DIRECTOR	0.	X						0.	0.	0.	
(7)JUDITH FLIPPEN ANDERSON	25.00										
CORPORATE SECRETARY	0.	X		Х				70,000.	0.	0.	
(8)J. DANIEL BOURLAND	8.00										
DIRECTOR	0.	X						0.	0.	0.	
(9)DAVID J. HELFAND	4.00										
DIRECTOR	0.	X						0.	0.	0.	
(10)MICHAEL MORGAN	8.00										
DIRECTOR	0.	X						0.	0.	0.	
(11)MICHAEL DUNCAN	8.00										
TREASURER	0.	X		Х				0.	0.	0.	
(12)RUDOLF LUDEKE	4.00										
DIRECTOR	0.	Х						0.	0.	0.	
(13)CHERYL STEVENS	8.00										
DIRECTOR	0.	Х	Ш					0.	0.	0.	
(14)FRANCO EINAUDI	4.00							_	_	_	
DIRECTOR	0.	X						0.	0.	0.	

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r	Position (do not check more than one box, unless person is both an officer and a director/trustee) Or critical institutional trustee		(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Es am comp fro orga and	(F) timated oount of other oensation the anization in related inization	f on in d			
			ee			sated						
15) CHARLES CARTER	4.00											
DIRECTOR	0.	Х						0.	0.			0.
16) DAVE SURMAN	10.00											
INTERIM CHAIR	0.	Х						0.	0.			0.
17) DIAN SEIDEL	4.00											
DIRECTOR	0.	Х						0.	0.			0.
18) ROBERT BROWN	40.00											
EXECUTIVE DIRECTOR & CEO	0.	Х		Х				199,019.	0.		26,5	78.
19) CATHERINE O'RIORDAN	40.00											
INTERIM CO-CEO & COO	0.			Х				311,961.	0.		29,9	68.
20) CATHERINE SWARTZ	40.00											
INTERIM CO-CEO & CFO	0.			Х				303,159.	0.		59,9	199.
21) JOHN HAYNES	40.00											
AIPP CEO	0.				Х			651,009.	0.		39,7	198.
22) ROY LEVENSON	40.00											
AIPP CFO	0.				Х			336,249.	0.		45,2	247.
23) RANDOLPH NANNA	40.00											
PUBLISHER	0.				Х			205,517.	0.		43,1	.76.
24) KEVIN RUTHEN	40.00											
AIPP, HEAD OF SOFTWARE DEV	0.				Х			177,484.	0.		44,2	122.
25) KEVIN STEINER	40.00											
AIPP, DIR OF GLOBAL SALES	0.				Х			206,028.	0.		54,1	.14.
1b Sub-total							$\blacktriangleright$	93,334.	0.			0.
c Total from continuation sheets to Part VII, S	ection A						$\blacktriangleright$	3,588,611.	0.		22,3	
d Total (add lines 1b and 1c)							<b>&gt;</b>	3,681,945.	0.	6	22,3	75.
2 Total number of individuals (including but not reportable compensation from the organization		hose 75		d al	bove	e) who	o re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former offic	er, directo	r, or	tru	iste	e,	key e	emp	oloyee, or highest	t compensated			
employee on line 1a? If "Yes," complete Schede						-				3		X
4 For any individual listed on line 1a, is the												

4 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Χ

**Section B. Independent Contractors** 

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

(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 10

Part VII Section A. Officers, Directors, Tru (A)		<u>,</u>	1	(C			<u> </u>	(D)			
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Posit neck n ss pers	tion more	n is or/trust highest compensated e tis or/trust	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estim amou oth compe from organi and re	ization
		Ф	tee			ısated					
6) JASON WILDE	40.00										
AIPP, CHIEF PUBLISHING OFFICER	0.				Х			339,665.	0.	6	0,04
7) TRACEY DENIEN AIPP, DIR BUSINESS SOLUTIONS	40.00	-				Х		168,693.	0.	5	0,26
8) GREGORY GOOD	40.00							100,000.	0.		0,20.
DIR, CENTER FOR HIST. OF PHYS.	0.	1				Х		157,972.	0.	4	7,76
9) JEFFREY KOBILINSKY	40.00										
DIRECTOR, INFO. TECHNOLOGY	0.					X		169,111.	0.	3	9,59
0) JENNY KRIVANEK  SR DIRECTOR, DIGITAL SOLUTIONS	40.00	-				Х		191,306.	0.	4	1,75
1) SHERRY RENDER	40.00							191,300.	0.	1	<del></del>
CONTROLLER	0.	1				Х		171,438.	0.	3	9,83
		-									
		-									
		1									
1b Sub-total  c Total from continuation sheets to Part VII, Se d Total (add lines 1b and 1c)  Total number of individuals (including but not I reportable compensation from the organization	imited to t		liste	 			► ► • re	eceived more than	\$100,000 of		
Teportable compensation from the organization		, ,									es N
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedul										3	
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual.	eater than	\$15	0,0	00?	If	"Yes	5,"	complete Schedu	le J for such	4	X
5 Did any person listed on line 1a receive or	accrue co	mpen	satio	on fr	rom	any	un	related organizati	on or individual	F	
	zs, compre	ie scr	ıeuu	iie J	IUľ	SUCII	per	ouii		<u> </u>	
individual	accrue cones," comple	mpen te Sch	sationedu ende	on fr le J	rom for	any such	un per	related organization	on or individual	<b>5</b>	,

year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

### Part VIII Statement of Revenue

		Check if Schedule O contains a res	ponse or note to an	y line in this Part VI	11		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	54,692. 5,126,690.	5,181,382.			
ne			Business Code				
Program Service Revenue	2a b c d	PHYSICS PROGRAMS	511120 900099	54,984,163. 2,172,867.	52,783,348. 1,550,876.	2,200,815. 621,991.	
ran	е		_				
rog	f	All other program service revenue					
<u>ā</u>	<u>g</u> 3	Total. Add lines 2a-2f	dends, interest,	57,157,030.			5,265,827.
	4	Income from investment of tax-exempt be		0.			
	5	Royalties	•	0.			
	6a b c d 7a b	Gross rents	08.	0.			
	d	Net gain or (loss)	<u> ▶</u>	6,496,908.			6,496,908.
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18	a b				
_	С	Net income or (loss) from fundraising eve	nts	0.			
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	С	Net income or (loss) from gaming activit	es ▶	0.			
	10a	Gross sales of inventory, less returns and allowances	a				
	b b	Less: cost of goods sold Net income or (loss) from sales of inventor	<u>/ ▶</u>	0.			
		Miscellaneous Revenue	Business Code				
	11a	PASS THRU MEMBER SOCIETY	900099	2,153,917.			2,153,917.
	b	EQUITY LOSS ON ACP	900099	-361,924.			-361,924.
	С	-	_				
	d	All other revenue					
	е	Total. Add lines 11a-11d	▶ │	1,791,993.			
	12	Total revenue. See instructions.		75,893,140.	54,334,224.	2,822,806.	13,554,728.

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## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	236,044.	236,044.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	369,167.	369,167.		
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	16,397.	16,397.		
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	3,588,671.	1,872,212.	1,716,459.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	19,749,721.	12,911,379.	6,697,951.	140,391.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,994,925.	1,256,471.	718,837.	19,617.
9	Other employee benefits	3,233,397.	2,037,196.	1,163,712.	32,489.
10	` '	1,716,441.	1,081,172.	618,469.	16,800.
11	Fees for services (non-employees):  Management	3,067,688.	2,354,023.	695,279.	18,386.
	) Legal	782,978.	36,572.	746,406.	.,
	Accounting	271,098.	,	271,098.	
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	0.			
	f Investment management fees	113,807.		113,807.	
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	1,402,670.	900,640.	502,030.	
12	Advertising and promotion	3,307,265.	3,248,550.	46,070.	12,645.
	Office expenses	839,635.	252,618.	582,021.	4,996.
14	Information technology	3,965,531.	3,148,492.	793,585.	23,454.
15	Royalties	0.			
16	Occupancy	3,012,615.	95,330.	2,917,285.	
17	Travel	1,047,432.	800,631.	243,321.	3,480.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	1,382,187.	922,185.	443,839.	16,163.
	Interest	29,704.		29,704.	
21	Payments to affiliates	0.	504.405		
22	Depreciation, depletion, and amortization	1,372,420.	784,426.	587,994.	
23	Insurance	237,762.		237,762.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	EDIT MANAGEMENT	5,091,704.	5,091,704.		
	PUBLISHING PRODUCTION	2,677,256.	2,677,256.		
_	PASS THRU MEMBER SOCIETY	2,153,917.	2,153,917.		
_	PUBLISHING PRINTING	1,153,506.	1,134,661.	5,129.	13,716.
_		676,202.	511,851.	164,031.	320.
	• All other expenses    Total functional expenses. Add lines 1 through 24e	63,490,140.	43,892,894.	19,294,789.	302,457.
	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	55,120,110.	15,022,031.		332, 137.
	following SOP 98-2 (ASC 958-720)	0.			

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## Part X Balance Sheet

	III						
		Check if Schedule O contains a response of	r note	e to any line in this P	art X		
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			33,267,033.	1	27,328,247.
	2	Savings and temporary cash investments			4,089,197.	2	3,856,159.
	3	Pledges and grants receivable, net			36,598.	3	3,042,274.
	4	Accounts receivable, net			3,692,071.	4	3,652,775.
	5	Loans and other receivables from current and	forme	r officers, directors,			
		trustees, key employees, and highest co	mper	nsated employees.			
		On an alata Deat II at Oak and Ia I			0.	5	0.
	6	Loans and other receivables from other disqualified personal control of the contr					
		4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu	, and o	contributing employers			
		organizations (see instructions). Complete Part II of Sche	dule L	employees belieficially	0.	6	0.
ets	7	Notes and loans receivable, net			165,614.	7	170,534.
Assets	8	Inventories for sale or use			0.	8	0.
`	9	Prepaid expenses and deferred charges			788,664.	9	1,516,785.
	10 a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	7,192,989.	6,991,342.	10c	5,815,745.
	11	Investments - publicly traded securities			117,661,271.	11	145,326,851.
	12	Investments - other securities. See Part IV, line 11			26,714,852.	12	28,714,852.
	13	Investments - program-related. See Part IV, line 11			458,009.	13	508,009.
	14	Intangible assets			0.	14	0.
	15	Other assets. See Part IV, line 11			11,131,802.	15	10,769,878.
	16	Total assets. Add lines 1 through 15 (must equal			204,996,453.	16	230,702,109.
	17	Accounts payable and accrued expenses			8,730,407.	17	7,917,902.
	18	Grants payable			0.	18	0.
	19	Deferred revenue	20,300,610.	19	21,883,955.		
	20	Tax-exempt bond liabilities			0.	20	0.
	21	Escrow or custodial account liability. Complete Pa			0.	21	0.
Liabilities	22	Loans and other payables to current and for					
ij		trustees, key employees, highest compen			0.	-00	0.
E.	23	disqualified persons. Complete Part II of Schedule			0.	22	0.
	24	Secured mortgages and notes payable to unrelate Unsecured notes and loans payable to unrelated			0.	24	0.
	25	Other liabilities (including federal income tax,			<u> </u>	24	
	23	parties, and other liabilities not included on lines					
		of Schedule D			9,044,290.	25	8,950,946.
	26	Total liabilities. Add lines 17 through 25			38,075,307.	26	38,752,803.
		Organizations that follow SFAS 117 (ASC 958),	check				
Fund Balances		complete lines 27 through 29, and lines 33 and			150 071 777		167 075 002
<u>ala</u>	27	Unrestricted net assets			150,271,777. 5,639,249.	27	167,975,883.
Ä	28 29	Temporarily restricted net assets			11,010,120.	28	11,092,448.
Ĕ	29	Permanently restricted net assets			11,010,120.	29	11,092,440.
or F		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.	, cnec	k here ▶ and			
şts	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or equ				31	
Net Assets	32	Retained earnings, endowment, accumulated inco	ome, o	or other funds		32	
Š	33	Total net assets or fund balances			166,921,146.	33	191,949,306.
	34	Total liabilities and net assets/fund balances			204,996,453.	34	230,702,109.
							Earm <b>QQ</b> ( (2017)

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OIIII J	70 (2011)				ı aş	JC
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		75,8	93,1	40.
2	Total expenses (must equal Part IX, column (A), line 25)	2			90,1	
3	3 Revenue less expenses. Subtract line 2 from line 1				03,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1				46.
5						
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-3	86,5	96.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	19	91,9	49,3	06.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both:					
	Separate basis  X Consolidated basis  Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversio	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent acc	_	- 1	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.	•				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	lerao t	he			
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	-	-	3h		

#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number 13-1667053

Рa	rt I	Reason for Public Cha	rity Status (All o	organizations must c	omplet	e this pa	art.) See instructions			
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	neck only	one box.)			
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in <b>s</b>	section 1	70(b)(1)(A)(i).			
2		school described in <b>section 170(b)(1)(A)(ii)</b> . (Attach Schedule E (Form 990 or 990-EZ).) hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii)</b> .								
3		A hospital or a cooperative	hospital service o	rganization described	in <b>sectio</b>	n 170(b)	(1)(A)(iii).			
4		A medical research organiz	ation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the		
		hospital's name, city, and st	ate:							
5		An organization operated t	for the benefit of	a college or universit	y owne	d or ope	rated by a governme	ntal unit described in		
		section 170(b)(1)(A)(iv). (C								
6		A federal, state, or local go	•			•	,,,,,,,			
7		An organization that norma	ally receives a sub	stantial part of its su	pport fr	om a go	vernmental unit or fro	om the general public		
		described in section 170(b)		· · · · · · · · · · · · · · · · · · ·						
8		A community trust describe	-		-					
9		An agricultural research org	=			-				
		or university or a non-land-	grant college of ag	griculture (see instruct	ions). E	nter the i	name, city, and state of	f the college or		
		university:								
10	X	An organization that norma receipts from activities rela support from gross investmacquired by the organizatio	ted to its exempt f nent income and u n after June 30, 1	unctions - subject to on the subject to one of the subject to subj	certain e able inco ( <b>a)(2).</b> (0	exception ome (less Complete	s, and (2) no more tha s section 511 tax) from e Part III.)	n 331/3 % of its		
11		An organization organized		•	•					
12		An organization organized	•	•						
		of one or more publicly su					, , , ,			
		Check the box in lines 12a t	=				·	=		
а		☐ Type I. A supporting organical income.	•	•			• , ,			
		the supported organization				ajority of	the directors or truste	es of the		
		supporting organization.	-							
b		<b>Type II</b> . A supporting org	•							
		control or management of		=	the sam	e persor	ns that control or man	age the supported		
		organization(s). You must	•							
С		Type III functionally integ						ly integrated with,		
		its supported organization	. , .	•				(		
d		Type III non-functionally			-			- ' '		
		that is not functionally inte	-		-		•	an attentiveness		
_		requirement (see instruct	•	-				I Tymo III		
е		Check this box if the orga functionally integrated, or					* * * * * * * * * * * * * * * * * * * *	і, туре ііі		
f	En	ter the number of supported	• •			•	IOH.			
		ovide the following information	-							
9		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of		
	``	3	( )	(described on lines 1-10	listed in yo	our governing	support (see	other support (see		
				above (see instructions))	Yes	No	instructions)	instructions)		
					163	110				
(A)										
(B)										
(C)										
(D)										
(E)										
Tota	al									

Page 2 Schedule A (Form 990 or 990-EZ) 2017

	, , ,						- 3 -
Par	Support Schedule for Orga (Complete only if you checke						
	Part III. If the organization fai	ls to qualify ur	nder the tests	isted below, p	olease comple	te Part III.)	•
Sec	tion A. Public Support			•		,	-
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5 from line 4						
	tion B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4	(1) = 1 1 1	(0, = 0 ) )	(0) = 0.10	(0, 20.0	(0) = 0	(4)
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (	see instructions) .				12	
13	<b>First five years.</b> If the Form 990 is f organization, check this box and <b>stop here</b>						
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2017 (li						<u>%</u>
15	Public support percentage from 2016						<u></u>
16a	331/3% support test - 2017. If the or	-					
	box and <b>stop here.</b> The organization q						
b	331/3% support test - 2016. If the org	ganization did n	ot check a box	on line 13 or 16	a, and line 15 i	s 331/3 % or mo	re, check
	this box and stop here. The organizati	on qualifies as a	publicly suppo	rted organizatio	n		▶ □
17a	10%-facts-and-circumstances test - 2	<b>2017.</b> If the org	ganization did n	ot check a box	on line 13, 16	a, or 16b, and I	ine 14 is
	10% or more, and if the organization Part VI how the organization meets					•	•
	organization						▶ □
b	10%-facts-and-circumstances test - 15 is 10% or more, and if the organization	<b>2016.</b> If the org	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	
	Explain in Part VI how the organizati						-
	supported organization				J	,	· 🖒 🥅

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2017 Schedule A (Form 990 or 990-EZ) 2017 Page 3

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

(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.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	490,601.	456,777.	625,308.	542,542.	5,181,382.	7,296,610.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	57,955,799.	59,001,026.	57,996,069.	59,517,781.	57,157,030.	291,627,705.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						0.
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0.
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0.
6	Total. Add lines 1 through 5	58,446,400.	59,457,803.	58,621,377.	60,060,323.	62,338,412.	298,924,315.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons					5,000,000.	5,000,000.
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.
c	Add lines 7a and 7b					5,000,000.	5,000,000.
8	Public support. (Subtract line 7c from						
	line 6.)						293,924,315.
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	58,446,400.	59,457,803.	58,621,377.	60,060,323.	62,338,412.	298,924,315.
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources	4,576,181.	2,961,335.	3,815,457.	3,503,594.	5,265,827.	20,122,394.
b	Unrelated business taxable income (less		, ,				
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0.
С	Add lines 10a and 10b	4,576,181.	2,961,335.	3,815,457.	3,503,594.	5,265,827.	20,122,394.
11	Net income from unrelated business	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,	.,,	.,,	., ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	activities not included in line 10b,						
	whether or not the business is regularly						0.
40	carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.) ATCH 1	8,615,542.	8,567,770.	3,917,266.	766,626.	1,791,993.	23,659,197.
13	Total support. (Add lines 9, 10c, 11,	0,013,012.	0,30,,,,0	3731772001	700,0201	17.317333.	23,033,137.
	and 12.)	71,638,123.	70,986,908.	66,354,100.	64,330,543.	69,396,232.	342,705,906.
14	First five years. If the Form 990 is f						
	organization, check this box and <b>stop here</b>	· ·	•		•		` ` ` ` _
Sec	tion C. Computation of Public Sup						
<u> 15</u>	Public support percentage for 2017 (line 8			nn (f))		15	85.77%
16	Public support percentage from 2016 Sche		•			16	84.79%
	tion D. Computation of Investmen					10	0 2 . 1 / 0
<u> </u>	Investment income percentage for 2017 (lin			3 column (f\)		17	5.87%
	Investment income percentage for 2017 (iii	,					5.62%
18	331/3% support tests - 2017. If the org					18   sthan 331/3% a	
ısa							
L	17 is not more than 331/3%, check th	-	-	•			
D	331/3% support tests - 2016. If the orga						
20	line 18 is not more than 331/3 %, check <b>Private foundation.</b> If the organization		-				

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#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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

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

		Yes	No
g by	_		
	1		
is ed	2		
er	3a		
id ie	Ju		
	3b		
3)	3с		
If	4a		
ın on	4b		
n ed 3)	40		
	4c		
s," N n; on			
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	5c		
o d or	6		
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or h	7		
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ed	9a		
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	200		7) 2047

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				- 3
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		
	on B. Type I Supporting Organizations	110		
	J. T. T. T. J. Por T. Capper and G. Gamman.		Yes	No
4	Did the directors, trustoca, or membership of one or more supported expenizations have the newer to			
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</b>			
	<b>VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Socti	on C. Type II Supporting Organizations	2		
Secur	on C. Type ii Supporting Organizations		Yes	No
	Ware a majority of the argenization's directors or tructors during the toy year also a majority of the directors		163	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	on D. All Type III Supporting Organizations			•
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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	on 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 ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru		
2	Activities Test. Answer (a) and (b) below.		Yes	No
– a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
_		Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2017

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	S	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	Nov. 20, 1970 (expla	in in Part VI). <b>See</b>
instructions. All other Type III non-functionally integrated supporting organization	zations r	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(71) 1101 1001	(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):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y integra	ted Type III supporting	g organization (see
instructions).	-		- ,

Schedule A (Form 990 or 990-EZ) 2017

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Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)									
Secti	on D - Distributions			Current Year						
1	Amounts paid to supported organizations to accomplish ex									
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed							
	organizations, in excess of income from activity									
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations							
4	Amounts paid to acquire exempt-use assets									
5	Qualified set-aside amounts (prior IRS approval required)									
6	Other distributions (describe in Part VI). See instructions.									
7	Total annual distributions. Add lines 1 through 6.									
8	Distributions to attentive supported organizations to which	the organization is resp	onsive							
	(provide 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						
_1	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). See									
	instructions.									
3	Excess distributions carryover, if any, to 2017									
а										
b	From 2013									
С	From 2014									
d	From 2015									
е	From 2016									
f	Total of lines 3a through e									
g	Applied to underdistributions of prior years									
h	Applied to 2017 distributable amount									
i	Carryover from 2012 not applied (see instructions)									
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.									
4	Distributions for 2017 from									
	Section D, line 7: \$									
а	Applied to underdistributions of prior years									
b	Applied to 2017 distributable amount									
С	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. For result									
	greater than zero, explain in Part VI. See instructions.									
6	Remaining underdistributions for 2017. Subtract lines 3h									
	and 4b from line 1. For result greater than zero, explain in									
	Part VI. See instructions.									
7	Excess distributions carryover to 2018. Add lines 3j									
	and 4c.									
8	Breakdown of line 7:									
a	Excess from 2013									
b	Excess from 2014									
С	Excess from 2015									
d	Excess from 2016									

Schedule A (Form 990 or 990-EZ) 2017

Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017 Page 8

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.)

				AT'	TACHMENT 1	
SCHEDULE A, PART III -	OTHER INCOM	E				
DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
MEMBER SOCIETIES PASSTHRU SVCS	7,187,193.	7,276,625.	2,538,121.	2,583,787.	2,153,917.	21,739,643.
EQUITY GAIN/LOSS ON ACP INV	1,172,218.	1,287,380.	1,379,145.	-1,817,161.	-361,924.	1,659,658.
MISCELLANEOUS	256,131.	3,765.				259,896.
TOTALS	8,615,542.	8,567,770.	3,917,266.		1,791,993.	23,659,197.

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

2017

Name of the organization		Employer identification number
AMERICAN INSTITUTE O	F PHYSICS, INC.	13-1667053
Organization type (check one)	:	<u> </u>
Filers of:	Section:	
Form 990 or 990-EZ	$\boxed{X}$ 501(c)( $^3$ ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	ivate foundation
	501(c)(3) taxable private foundation	
Note: Only a section 501(c)(7) instructions.  General Rule	, (8), or (10) organization can check boxes for both the General	Rule and a Special Rule. See
_	filing Form 990, 990-EZ, or 990-PF that received, during the year property) from any one contributor. Complete Parts I and II. Sontributions.	<del>-</del>
Special Rules		
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that nections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule As that received from any one contributor, during the year, total of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-	A (Form 990 or 990-EZ), Part II, line contributions of the greater of <b>(1)</b>
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 9 he year, total contributions of more than \$1,000 exclusively for hal purposes, or for the prevention of cruelty to children or anim	religious, charitable, scientific,
contributor, during the contributions totaled during the year for a <b>General Rule</b> applies	described in section 501(c)(7), (8), or (10) filing Form 990 or 9 ne year, contributions exclusively for religious, charitable, etc., p more than \$1,000. If this box is checked, enter here the total on exclusively religious, charitable, etc., purpose. Don't complete to this organization because it received nonexclusively religious fore during the year	purposes, but no such contributions that were received e any of the parts unless the s, charitable, etc., contributions
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doe t answer "No" on Part IV, line 2, of its Form 990; or check the certify that it doesn't meet the filing requirements of Schedule I	box on line H of its Form 990-EZ or on its

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number 13-1667053

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\\$\\$\	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5		\$\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$\$	Person Payroll Noncash  (Complete Part II for poncash contributions)

Name of organization AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number

			13-1667053
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$6,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9_		\$ \$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number 13-1667053

art II	<b>Noncash Property</b>	(see instructions)	). Use duplicate co	pies of Part II if addition	al space is needed.
--------	-------------------------	--------------------	---------------------	-----------------------------	---------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of o	Manifestor AMERICAN INSTITUTE OF PR	.ISICS, INC.		13-1667053			
Part III	Exclusively religious, charitable, etc., c (10) that total more than \$1,000 for the the following line entry. For organization contributions of \$1,000 or less for the y Use duplicate copies of Part III if addition	e year from any one co s completing Part III, ent ear. (Enter this informat	ntributor. Com er the total of e	plete columns (a) through (e) and xclusively religious, charitable, etc.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, and 2	ZIP + 4	Relationship	o of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, and 2	ZIP + 4	Relationship	p of transferor to transferee			
(a) No							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and 2	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, and 2	ZIP + 4	Relationship of transferor to transferee				

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

**Open to Public** Inspection

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 (electi	on under section 501(n)	i): Complete Part II-B. Do no	t complete Part II-A.
	e organization answered "Yes," (see separate instructions), ther	on Form 990, Part IV, line 5 (Proxy า	Tax) (see separate in	nstructions) or Form 990-l	EZ, Part V, line 35c (Prox
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nam	e of organization			Employer ide	ntification number
AME	RICAN INSTITUTE OF E	PHYSICS, INC.		13-166	7053
Pai	rt I-A Complete if the c	organization is exempt under	section 501(c) or	is a section 527 orgai	nization.
1	Provide a description of the	organization's direct and indirect p	oolitical campaign a	ctivities in Part IV. (see ir	structions for
	definition of "political campa	nign activities")			
2		xpenditures (see instructions)			
3	Volunteer hours for political	campaign activities (see instruction	ns)		
	t I-B Complete if the c	organization is exempt under	section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 ▶ \$	
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3	).
1		expended by the filing organization			
2		ng organization's funds contributed			
		es			
3	Total exempt function expe	enditures. Add lines 1 and 2. En	ter here and on Fo	orm 1120-POL,	
	line 17b				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5		and employer identification numb			
		s. For each organization listed, en tributions received that were prom			
		nd or a political action committee (			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) EIIV	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					Hone, enter -o
(1)			_		
(2)			_		
(3)			_		
(4)			-		
(5)			-		
(6)			_		
			I	1	

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

Schedule C (Form 990 or 990-EZ) 2017

Sch	edule C (Form 990 or 990-EZ) 2017 A	MERIC	AN INSTI	TUTE OF PHYSI	CS, INC.	13-1	.667053 Page <b>2</b>
Pa	cart II-A Complete if the organization 501(h)).	anizatio	on is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ction under
A			_	affiliated group (and excess lobbying exp		ach affiliated group mem	ber's name,
В	Check ▶ if the filing organiza	ation che	ecked box A	A and "limited contro	ol" provisions app	oly.	
	Limits o (The term "expenditu		ying Expend eans amour		)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
b d d	Total lobbying expenditures to in Total lobbying expenditures to in Total lobbying expenditures (add Other exempt purpose expenditure Total exempt purpose expenditure Lobbying nontaxable amount. Ecolumns.						
	If the amount on line 1e, column (a)	or (h) is:	The lobbyin	na nontavahle amount	ie.		
	Not over \$500,000	OI (D) 13.		amount on line 1e.	15.		
	Over \$500,000 but not over \$1,000,	000		us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,50			us 10% of the excess	1		
	Over \$1,500,000 but not over \$17,0			us 5% of the excess of			
	Over \$17,000,000	00,000	\$1,000,000		γισι φι,σοσ,σοσι		
q	Grassroots nontaxable amount (	enter 25	. , ,				
	Subtract line 1g from line 1a. If z						
	Subtract line 1f from line 1c. If ze						
	If there is an amount other that					tion file Form 4720	
,	reporting section 4911 tax for th				•		Yes No
				aging Period Unde			
	(Some organizations that	made a	section 50		t have to compl		nns below.
		Lobb	ying Exper	nditures During 4-Y	ear Averaging Pe	riod	
	Calendar year (or fiscal year beginning in)	(a)	2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2017

f Grassroots lobbying expenditures

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO	T file	d For	m 576	 B	I	Page 3
	(election under section 501(h)).	(á			(k	))	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed						
des	cription of the lobbying activity.	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers?	X					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X	37				
С	Media advertisements?	37	X				
d	Mailings to members, legislators, or the public?	X	Х				
е	Publications, or published or broadcast statements?		X				
f	Grants to other organizations for lobbying purposes?	X	Λ			110	,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X				110	,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х				
i	Other activities?		21			110	,000
j	Total. Add lines 1c through 1i		х			110	, 000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		- 21				
b	If "Yes," enter the amount of any tax incurred under section 4912						
c d	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?						
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	or s	ection			
	501(c)(6).	(-)(-)	,				
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fro	m the	prior	year?	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501						
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (	b) Pa	rt III-A,	line	3, is	
	answered "Yes."						
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	ınts (	of				
	political expenses for which the section 527(f) tax was paid).						
a	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c 3			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	-	- 1	4			
5	and political expenditure next year?			5			
	t IV Supplemental Information						
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d grou	ıp list	); Part I	I-A, I	ines 1	and
2 (se	e instructions); and Part Il-B, line 1. Also, complete this part for any additional information.						
CEL	PAGE 4						
OE E	FAUL T						

Schedule C (Form 990 or 990-EZ) 2017

Page 4

#### Part IV Supplemental Information (continued)

PART II-B - DESCRIPTION OF LOBBYING ACTIVITY:

AIP'S LOBBYING EFFORTS FOCUS ON SCIENCE AND TECHNOLOGY FUNDING AND PROGRAM DIRECTIONS FOR THE NATIONAL SCIENCE FOUNDATION, NATIONAL AERONAUTICS AND SPACE ADMINISTRATION, DEPARTMENT OF ENERGY, NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY AND DEPARTMENT OF DEFENSE. WE ALSO WORK ON GOVERNMENT MANDATES AFFECTING SCHOLARLY PUBLISHING, AS WELL AS SCIENCE IN GENERAL.

#### **SCHEDULE D** (Form 990)

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

AME	RICAN INSTITUTE OF PHYSICS, INC.	13-1667053
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	
	conferring impermissible private benefit?	
Pa	rt    Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	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 land for public use (e.g., recreation or education)	of a 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	
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termin	ated by the organization during the
	tax year >	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspecti	-
^	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	anacryotian accoments during the year
7		onservation easements during the year
8	▶\$  Does each conservation easement reported on line 2(d) above satisfy the requirements of section	on 170(h)(/)(R)(i)
Ū		
9	and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and	l expense statement and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financi	
	organization's accounting for conservation easements.	
Pa	rt 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.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r	revenue statement and balance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r works of art, historical treasures, or other similar assets held for public exhibition, educ public service, provide, in Part XIII, the text of the footnote to its financial statements that design of the control of	cation, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	
b	works of art, historical treasures, or other similar assets held for public exhibition, educ	
	public service, provide the following amounts relating to these items:	cation, or receases in randomines of
	(i) Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	S:
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	

Schedule D (Form 990) 2017 Page **2** 

Par	t III Organizations Maintainin	g Collections of	Art, Histo	rical Tr	easure	s, or O	ther Simila	ar Asse	ts (cont	inued)
3	Using the organization's acquisitio	n, accession, and c	ther record	s, check	any of	the follo	wing that a	re a sigr	ificant us	se of its
	collection items (check all that appl	y):								
а	Public exhibition		d	Loan o	r exchai	nge progra	ams			
b	Scholarly research		е	Other _						
С	Preservation for future gener									
4	Provide a description of the organ	nization's collections	and explai	n how th	ney furt	ner the o	rganization's	s exemp	t purpose	in Part
_	XIII.	11. 14								
5	During the year, did the organizatio							_	¬ <sub>v</sub>	V N-
Par	assets to be sold to raise funds rath t IV		ained as pan	t or the o	rganizai	ion's colle	ection?		Yes	X No
Pai	Complete if the organization of the property of the complete if the organization of the property of the proper		s" on Form	990, Pa	rt IV, lir	ne 9, or r	eported an	amoun	t on Forr	n
1a	Is the organization an agent, truste	e, custodian or othe	er intermedia	ary for co	ntributio	ons or oth	er assets not	t		
	included on Form 990, Part X?							[	Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	lete the follo	owing tabl	le: _					
							Aı	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance				[	1f	Lananust Bal	L:11:L-0	V	N.
	Did the organization include an ame	•	•	•				_	Yes	No
Par	If "Yes," explain the arrangement in tV Endowment Funds.	TPAIL AIII. CHECK HE	ere ii trie ext	Diariation	nas bee	n provided	J OH Part Alli			
rai	Complete if the organizati	on answered "Yes	" on Form	990 Pa	rt IV lir	ne 10				
	Complete ii tile erganizati	(a) Current year	<b>(b)</b> Prior			years back	(d) Three ye	ears back	(e) Four v	ears back
1.0	Paginning of year balance	17,347,568.	16,654			28,652				31,169
1a	Beginning of year balance Contributions	2,882,328.		,565.		46,811		5,215.		9,828
b C	Net investment earnings, gains,									
·	and losses	3,439,156.	1,216	,351.	-4	60,358	. 969	,441.	2,7	86,632
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs	636,276.	591	,790.	10,3	60,663	. 441	L,450.	3	03,182
f	Administrative expenses									
g	End of year balance	23,032,776.	17,347	,568.	16,6	54,442	. 27,228	3,652.	26,6	24,447
2 a	Provide the estimated percentage Board designated or quasi-endowm	ent ▶ 25.0000	end balance _%	(line 1g,	column (	(a)) held a	s:			
	Permanent endowment ▶ 48.0									
С	Temporarily restricted endowment									
_	The percentages on lines 2a, 2b, a	•								
За	Are there endowment funds not in t	the possession of th	ne organizati	ion that a	are held	and adm	inistered for	tne	V	es No
	organization by: (i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
b	If "Yes" on line 3a(ii), are the relate								3b	
4	Describe in Part XIII the intended u	•	•							
Par	t VI Land, Buildings, and Equi Complete if the organization	pment. tion answered "Ye	s" on Form			ne 11a. :	See Form 9	990, Par	t X, line	10.
	Description of property	(a) Cost or (invest	other basis	(b) Cost or	other bas her)		ccumulated preciation	(0	<b>i)</b> Book valu	е
1a	Land	,		(01)	,	uel	Joiation			
b	Buildings									
С	Leasehold improvements			4,8	63,088	3. 1,	830,089.		3,03	2,999.
d	Equipment			1,1	77,133		940,272.			6,861.
е	Other				68,513		422,628.		2,54	5,885.
Tota	I. Add lines 1a through 1e. (Column	(d) must equal Forn	n 990, Part X	ζ, column	(B), line	10c.)	▶		5,81	5,745.

Schedule D (Form 990) 2017 Page 3

Schedule D (Form 990) 2017		Page
Part VII Investments - Other Securities.	l "Yes" on Form 990	), Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		,
(2) Closely-held equity interests		
(3) Other		
(A) OPPORTUNISTIC INVESTMENTS	28,714,852.	FMV
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	28,714,852.	
Part VIII Investments - Program Related.	"Vas" an Farm 000	Dort IV line 44e Coe Form 000 Port V line 42
		O, Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
_ (1)		
_(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX Other Assets.		
	l "Yes" on Form 990	D, Part IV, line 11d. See Form 990, Part X, line 15.
	scription	(b) Book value
(1)	oonphon .	(b) Book value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ine 15.)	
Part X Other Liabilities.		
Complete if the organization answered line 25.	l "Yes" on Form 990	O, Part IV, line 11e or 11f. See Form 990, Part X,
1. (a) Description of liability	(b) Book valu	ue
(1) Federal income taxes		
(2) POST RETIREMENT MEDICAL PLAN	6,726,	
(3) DUE TO MEMBER SOCIETY	2,224,	946.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)	<b>.</b> 0.050 /	0.4.6
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	<b>▶</b> 8,950,9	フサひ・1

Schedule D (Form 990) 2017

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

	e D (Form 990) 2017		Page <b>4</b>
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Returnation Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	1	
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII.)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	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		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	XIII Supplemental Information.		
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part III, lines 1a and 4b and 2b; Part III, lines 1a and 2b; Part	art V, li	ne 4; Part X, line
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation.	
SEE	PAGE 5		

Schedule D (Form 990) 2017

#### Part XIII Supplemental Information (continued)

#### PART III, LINE 1A:

THE NIELS BOHR LIBRARY AND ARCHIVES COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE 1962, ARE NOT RECOGNIZED AS ASSETS ON THE CONSOLIDATED BALANCE SHEETS. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED, OR AS TEMPORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS.

#### PART V, LINE 4:

AIP HAS 13 SEPARATE FUNDS WHICH HAVE BEEN ENDOWED BY DONORS. THE EARNINGS FROM THE ENDOWMENTS HELP SUPPORT THE HISTORY CENTER, THE NIELS BOHR LIBRARY AND ARCHIVES, AND SOCIETY OF PHYSICS STUDENTS, HIGH SCHOOL PHYSICS EDUCATION PROGRAMS, AND OTHER AREAS RELATED TO THE PHYSICAL SCIENCES, WHICH ALLOWS AIP TO CONTINUE TO PRESERVE HISTORICAL DOCUMENTS RELATED TO PHYSICS, OFFER LECTURES WHICH ARE OPEN TO THE PUBLIC, PRESENT AWARDS AND GRANTS FOR ACHIEVEMENTS IN PHYSICS AND HELP SUPPORT THE COMMUNITY THROUGH EDUCATION.

#### PART X, LINE 2:

AIP'S ACCOUNTING POLICY FOR EVALUATING UNCERTAIN TAX POSITIONS IS TO RECOGNIZE TAX POSITIONS IF IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE IRS. MANAGEMENT ANNUALLY REVIEWS ITS TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2017

#### **SCHEDULE F** (Form 990)

### Statement of Activities Outside the United States

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

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

13-1667053

Employer identification number

AME	RICAN INSTITUTE OF PHYS	SICS, INC.			13-16670	53				
Part	General Information o Form 990, Part IV, line 14		outside the U	nited States. Complete i	if the organization answer	red "Yes" on				
	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  X Yes No									
	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.									
3	Activities per Region. (The follow (a) Region	ving Part I, line  (b) Number of offices in the region	3 table can be (c) Number of employees, agents, and independent contractors in the region	e duplicated if additional sp (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in the region				
(1)	EUROPE			GRANTMAKING		8,741.				
(2)	NORTH AMERICA			GRANTMAKING		7,656.				
(3)	SOUTH ASIA	1.	2.	PROGRAM SERVICES	LIAISON OFFICE	349,359.				
(4)	CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		4,067,587.				
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
3a b	Sub-total continuation	1.	2.			4,433,343.				
С	sheets to Part I  Totals (add lines 3a and 3b)	1.	2.			4,433,343.				

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

JSA

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Page 2 Schedule F (Form 990) 2017

Part	Grants and Other Assi Part IV, line 15, for any							d "Yes" on F	orm 990, X
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2	Enter total number of recipient of by the IRS, or for which the grant	organizations listed abov	ve that are recognized as	charities by the	foreign country, re	cognized as ta	x-exempt		
_3_	Enter total number of other orga	nizations or entities.		· · · · · · · · · ·	"		>	Cahadula F	/Form 000\ 2017

Schedule F (Form 990) 2017

# Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) RESEARCH	EUROPE/ICELAND/GREENLAND	4.	7,656.	CHECK			
(2) RESEARCH	NORTH AMERICA	6.	8,741.	CHECK			
(3)							
_(4)							
_(5)							
_(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2017

Part IV Foreign Forms Page 4

ган	i oreign i ornis				
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)	X	Yes		No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		Yes	X	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)	X	Yes		No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X	Yes		No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X	Yes		No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)		Yes	X	No

Schedule F (Form 990) 2017

Schedule F (Form 990) 2017 Page **5** 

### Part V Supplem

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

PART I, LINE 2:

GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE U.S.

AIP HAS ESTABLISHED AND FOLLOWS DOCUMENTED POLICIES AND PROCEDURES TO

MONITOR, EVALUATE AND REVIEW ALL TYPES OF GRANTS, AWARDS AND ASSISTANCE

ON A REGULAR BASIS.

PART I, LINE 3F:

THE ACCOUNTING METHOD USED FOR THE EXPENDITURES SHOWN IS THE ACCRUAL

BASIS.

#### SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Inspection

2017
Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Employer identification number Name of the organization AMERICAN INSTITUTE OF PHYSICS, INC. 13-1667053 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of 1 (a) Name and address of organization (b) EIN (h) Purpose of grant (if applicable) cash assistance noncash assistance or assistance or government grant (1) AMERICAN ASTRONOMICAL SOCIETY 1667 K STREET NE WASHINGTON, DC 20006 21-0735173 501C(3) 16,315. SEE PART IV (2) AMERICAN PHYSICAL SOCIETY 1 PHYSICS ELLIPSE COLLEGE PARK, MD 20740 13-1656610 501C(3) 20,000. SEE PART IV (3) GEORGE WASHINGTON UNIVERSITY 725 21ST STREET, NW WASHINGTON, DC 20052 53-0196584 501C(3) 48,106. SEE PART IV (4) OSA 2010 MASSACHUSETTS AVE WASHINGTON, DC 20036 53-0289696 501C(3) 9,343. SEE PART IV (5) THE SOCIETY OF RHEOLOGY 100 BUREAU DR GAITHERSBURG, MD 20899 13-6503476 501C(3) 6.783. SEE PART IV (6) OHIO STATE UNIVERSITY 1960 KENNY ROAD COLUMBUS, OH 43210 31-1145986 501C(3) 12,500 SEE PART IV (7) TRUSTEE OF PURDUE UNIVERSITY 2101 E COLISEUM BLVD FORT WAYNE, IN 46805 35-6002041 501C(3) 24,805. SEE PART IV (8) UNIVERSITY OF MOUNT UNION 1972 CLARK AVE ALLIANCE, OH 44601 34-0714687 501C(3) 12,500. SEE PART IV (9) UNIVERSITY OF THE SCIENCES 600 43RS ST, BOX 64 PHILADELPHIA, PA 19104 23-1352668 501C(3) 12,500. SEE PART IV (10) CARNEGIE INSTITUTION 1530 P STREET, NW WASHINGTON, DC 20005 53-0196523 501C(3) 10,000. SEE PART IV (11) JEFFERSON SCIENCE ASSOCIATES 20-3974952 9,981. 12000 JEFFERSON AVE NEWPORT NEWS, VA 23606 SEE PART IV (12) MUSEUM OF INNOVATION AND SCIENCE ARCHIVES 15 NOTT TERRACE HTS SCHENECTADY, NY 12308 14-1275432 501C(3) 9,986. SEE PART IV 11. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . 1.

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

Schedule I (Form 990) (2017)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 TRAVEL AND MEETING EXPENSES	63.	17,835.			
2 SCHOLARSHIPS AND AWARDS SPS MEMBERS	27.	45,950.	1,025.	FMV	BOOKS SHIRTS
3 AWARDS AND ACHIEVMENTS IN PHYSICS	3.	28,000.			
4 ORAL HISTORY INTERVIEW AND RESEARCH PROJECTS	7.	14,839.			
5 SCIENCE WRITING AWARDS	4.	12,000.	1,591.	FMV	CHAIRS
6 CONGRESSIONAL AND US DEPARTMENT FELLOW	5.	247,927.			
7					

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

PART II, COLUMN H, LINES 1-12:

- 1) PROVIDE FUNDING TO HELP INITIATE A PROVISION OF AN UNIQUE NEW MEMBER SERVICE FOR PARTICIPATING MEMBER SOCIETIES, ONE THAT DRIVES DIRECTLY TOWARDS THEIR STRATEGIC GOALS TO SUPPORT GRADUATE STUDENT PROFESSIONAL DEVELOPMENT AND HAS CASCADING IMPLICATIONS FOR THE VOLUME AND QUALITY OF OUTREACH PERFORMED BY THEIR MEMBERS.
- 2) PROVIDE FUNDING FOR A STUDY ON THE IMPACTS OF INDUSTRIAL PHYSICS ON THE U.S. ECONOMY AND U.S. TECHNOLOGY EXCELLENCE.
- 3) PROVIDE HOUSING TO APPROXIMATELY 14 UNDERGRADUATE PHYSICS STUDENTS SELECTED FOR THE SOCIETY OF PHYSICS STUDENTS SUMMER INTERN PROGRAM.

Schedule I (Form 990) (2017)

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 2	2.
	Part III can be duplicated if additional space is needed.	

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
_1					
2					
3					
_4					
_5					
6					
7					

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

4) PROVIDE FUNDING TO SPONSOR EVENTS WHICH BUILD AND STRENGTHEN THE

RELATIONSHIPS OF SCIENCE JOURNALISTS, IN TURN TO RAISE THE PROFILE OF THE PHYSICAL SCIENCES IN THE MEDIA.

- 5) PROVIDE FUNDING TO DISSEMINATE A SERIES OF K-12 OUTREACH ACTIVITIES BASED ON THE FIELD OF RHEOLOGY.
- 6) PROVIDE FUNDING FOR A PROJECT TITLED: BRINGING THE HOUR OF CODE TO HIGH SCHOOL PHYSICS CLASSROOM. THE PROJECT WILL PROVIDE DEVELOPMENT OPPORTUNITIES FOR HIGH SCHOOL TEACHERS.
- 7) PROVIDE FUNDING FOR A PROJECT TITLED: PHYSICS FESTIVAL FOR STUDENT AND TEACHER TEAMS. THE FUNDING WILL PROVIDE DIRECT SUPPORT FOR PARTICIPATING

Schedule I (Form 990) (2017)

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

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
_ 5					
6					
7					

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

HIGH SCHOOL TEACHERS.

- 8) PROVIDE FUNDING FOR A PROJECT TITLED: BRINGING THE HOUR OF CODE TO HIGH SCHOOL PHYSICS CLASSROOM. THE PROJECT WILL PROVIDE DEVELOPMENT OPPORTUNITIES FOR HIGH SCHOOL TEACHERS.
- 9) PROVIDE FUNDING FOR A PROJECT TITLED: PROMOTING RESEARCH EXPERIENCES
  IN HIGH SCHOOLS THROUGH THE PARTICIPATION IN THE INTERNATIONAL YOUTH
  PHYSICISTS TOURNAMENT.
- 10) PROVIDE FUNDING TO ARCHIVE THE PAPERS OF OLIVER H. GISH AND MAKE THEM ACCESSIBLE FOR RESEARCH. THE PAPERS DOCUMENT A LIFELONG PROFESSIONAL ACTIVITY OF A NOTABLE PHYSICAL SCIENTIST AND THEY ALSO PROVIDE INSIGHTS

Schedule I (Form 990) (2017)

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
j					
3					
•					

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

INTO THE ORGANIZATION OF AMERICAN AND INTERNATIONAL GEOPHYSICS DURING THE

DECADES OF ITS TRANSFORMATION INTO A MODERN DISCIPLINE.

11) PROVIDE FUNDING TO ARCHIVE THE PAPERS FROM 11 DIFFERENT COLLECTIONS,

WHICH WILL ADD TO THE CORE COLLECTION FOR THEIR ARCHIVES AND ENCOURAGE

CONTINUED EXPANSION AND DEVELOPMENT, THEREBY PRESERVING MATERIAL

IMPORTANT TO UNDERSTANDING THE HISTORY OF THE LABORATORY.

12) PROVIDE FUNDING FOR AN ARCHIVE PROJECT WHICH CREATED 15 NEW FINDING

AIDS THAT HIGHLIGHT INDUSTRIAL PHYSICS AND INDUSTRIAL SCIENCE COLLECTIONS

IN THE MUSEUM'S ARCHIVES.

Schedule I (Form 990) (2017)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
_1					
2					
3					
4					
5					
6					
7					

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

PART I, LINE 2:

PROCEDURE FOR MONITORING USE OF GRANTS FUNDS IN U.S.

AIP HAS ESTABLISHED AND FOLLOWS DOCUMENTED POLICIES AND PROCEDURES TO

MONITOR, EVALUATE AND REVIEW ALL TYPES OF GRANTS, AWARDS, AND ASSISTANCE

ON A REGULAR BASIS.

#### **SCHEDULE J** (Form 990)

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**Questions Regarding Compensation** 

Employer identification number

13-1667053 AMERICAN INSTITUTE OF PHYSICS, INC.

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1b	Х	
2	explain	10		
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
		2	Х	
	1a?		21	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization:	4-		X
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only costion 504/a\/2\ 504/a\/4\ and 504/a\/20\ argonizations must complete lines 5.0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of:			X
а	The organization?	5a		X
b	Any related organization?	5b		
^	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the net earnings of:	<b>6</b> -		v
a	The organization?	6a		X
b	Any related organization?	6b		Λ
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	_		Х
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			v
•	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported 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 aren't 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.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ROBERT BROWN	(i)	161,277.	7,725.	30,017.	19,822.	6,756.	225,597.	0.
1 EXECUTIVE DIRECTOR & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
CATHERINE O'RIORDAN	(i)	308,250.	0.	3,711.	27,000.	2,968.	341,929.	0.
2 <sup>INTERIM</sup> CO-CEO & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
CATHERINE SWARTZ	(i)	299,578.	0.	3,581.	27,000.	32,999.	363,158.	0.
3 INTERIM CO-CEO & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
JOHN HAYNES	(i)	452,718.	179,691.	18,600.	27,000.	12,798.	690,807.	0.
4 <sup>AIPP CEO</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
ROY LEVENSON	(i)	274,960.	54,450.	6,839.	27,000.	18,247.	381,496.	0.
5 <sup>AIPP CFO</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
RANDOLPH NANNA	(i)	203,582.	1,935.	0.	20,685.	22,491.	248,693.	0.
6 PUBLISHER	(ii)	0.	0.	0.	0.	0.	0.	0.
KEVIN RUTHEN	(i)	168,414.	8,470.	600.	18,488.	25,734.	221,706.	0.
7AIPP, HEAD OF SOFTWARE DEV	(ii)	0.	0.	0.	0.	0.	0.	0.
KEVIN STEINER	(i)	159,458.	46,450.	120.	21,445.	32,669.	260,142.	0.
8 AIPP, DIR OF GLOBAL SALES	(ii)	0.	0.	0.	0.	0.	0.	0.
JASON WILDE	(i)	271,527.	61,060.	7,078.	27,000.	33,043.	399,708.	0.
<b>9</b> Alpp, Chief Publishing Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
TRACEY DENIEN	(i)	164,393.	3,700.	600.	17,587.	32,682.	218,962.	0.
_10 AIPP, DIR BUSINESS SOLUTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
GREGORY GOOD	(i)	145,904.	1,548.	10,520.	15,156.	32,608.	205,736.	0.
11 DIR, CENTER FOR HIST. OF PHYS.	(ii)	0.	0.	0.	0.	0.	0.	0.
JEFFREY KOBILINSKY	(i)	164,918.	3,881.	312.	17,358.	22,241.	208,710.	0.
12DIRECTOR, INFO. TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
JENNY KRIVANEK	(i)	189,758.	1,548.	0.	19,432.	22,327.	233,065.	0.
13 <sup>SR</sup> DIRECTOR, DIGITAL SOLUTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
SHERRY RENDER	(i)	164,890.	6,548.	0.	17,592.	22,247.	211,277.	0.
14 <sup>CONTROLLER</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

#### Part | 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.

PART I, LINE 1A:

FIRST CLASS TRAVEL - DUE TO A MEDICAL CONDITION, FIRST CLASS TRAVEL WAS MADE AVAILABLE TO ONE EMPLOYEE.

GROSS-UP PAYMENTS- IF AN EMPLOYEE REACHES THE IRS LIMITATION FOR EMPLOYER RETIREMENT CONTRIBUTIONS, THE ORGANIZATION PROVIDES A GROSS UP PAYMENT EQUIVALENT TO THE DIFFERENCE BETWEEN THE MAX AMOUNT AND THE AMOUNT THAT WOULD HAVE BEEN CONTRIBUTED IF THERE WERE NO LIMITATIONS.

PART I, LINE 3:

COMPENSATION REVIEW & APPROVAL PROCESS

CEO: AIP'S BOARD OF DIRECTORS HAS DESIGNATED A COMPENSATION COMMITTEE TO MANAGE COMPENSATION OF AIP'S CEO. THE CHARTER OF THE COMPENSATION

COMMITTEE PROVIDES FOR A PROCEDURE THAT IS CONSISTENT WITH APPLICABLE LAW AND BEST PRACTICES. THE CHARTER PROVIDES THAT THE COMMITTEE "SHALL MAKE A RECOMMENDATION TO THE BOARD OF DIRECTORS WITH RESPECT TO THE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER." THE COMPENSATION COMMITTEE OBTAINS DATA AS TO COMPARABLE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER, RECOMMENDS TERMS OF THE CEO'S EMPLOYMENT AGREEMENTS, DETERMINES REASONABLE

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

#### Part | 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.

COMPENSATION LEVEL, OR COMPENSATION RANGE, AND SUBMITS TO THE BOARD A

RECOMMENDATION FOR THE CEO'S COMPENSATION FOR EACH FISCAL YEAR. THE BOARD

OF DIRECTORS MAKES THE FINAL DECISION ON THE CEO'S COMPENSATION.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

AMERICAN INSTITUTE OF PHYSICS, INC. 13-1667053

FORM 990, PART III, LINE 4A:

PROGRAM SERVICES AIP PUBLISHING LLC (AIPP) IS A SINGLE MEMBER,

NOT-FOR-PROFIT, LIMITED LIABILITY COMPANY OWNED BY THE AMERICAN INSTITUTE

OF PHYSICS (AIP). AIPP IS A SCHOLARLY PUBLISHER IN THE PHYSICAL AND

RELATED SCIENCES, PROVIDING THE GLOBAL SCIENCE COMMUNITY WITH A

COMPREHENSIVE COLLECTION OF CITED, PEER-REVIEWED SCIENTIFIC PAPERS AND

OTHER INFORMATION. ACCESSED BY RESEARCHERS AT NEARLY 4,000 INSTITUTIONS

WORLDWIDE, AIPP'S PORTFOLIO OF 19 JOURNALS INCLUDES PRESTIGIOUS TITLES

SUCH AS APPLIED PHYSICS LETTERS, JOURNAL OF APPLIED PHYSICS, THE JOURNAL

OF CHEMICAL PHYSICS, AND THE AIP CONFERENCE PROCEEDINGS. AIPP SUPPORTS

THE SCIENTIFIC AND EDUCATIONAL MISSION OF AIP THROUGH ITS SCHOLARLY

PUBLISHING ACTIVITIES AND ALSO WORKS WITH SEVERAL OF AIP'S MEMBER

SOCIETIES AND OTHER PUBLISHING PARTNERS TO HELP THEM ADVANCE THEIR

PHYSICS TODAY PROVIDES A UNIFYING INFLUENCE FOR THE PHYSICAL SCIENCES BY PROVIDING BROAD AND AUTHORITATIVE COVERAGE OF SCIENTIFIC RESEARCH, NEWS, AND OPINIONS OF RELEVANCE TO THE GLOBAL SCIENTIFIC COMMUNITY. THE MAGAZINE IS RECEIVED BY THE INDIVIDUAL MEMBERS OF AIP'S TEN MEMBER SOCIETIES, MANY LIBRARIES AND INSTITUTIONS AROUND THE WORLD, AND OTHER INTERESTED INDIVIDUALS. THE PHYSICS TODAY WEBSITE HAS ADDITIONAL MATERIAL AND IS UPDATED DAILY. IN ADDITION, PHYSICS TODAY HAS A STRONG PRESENCE ON SOCIAL MEDIA WITH, FOR EXAMPLE, MORE THAN 3 MILLION FOLLOWERS ON FACEBOOK.

Name of the organization

AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number

13-1667053

FORM 990, PART III, LINE 4B:

PROGRAM SERVICES

AIP PROGRAMS: IN KEEPING WITH ITS MISSION, AIP OFFERS AUTHORITATIVE INFORMATION, EDUCATION AND RELATED ACTIVITIES, AIP OFFERS UNIQUE SERVICES, PRODUCTS, AND EXPERTISE IN:

EDUCATION AND STUDENT SERVICES, HISTORY OF PHYSICS, ARCHIVAL LIBRARY,
MEDIA AND GOVERNMENT RELATIONS, AND EMPLOYMENT SERVICES FOR SCIENCE AND
ENGINEERING PROFESSIONALS, STATISTICAL RESEARCH, AND INDUSTRY OUTREACH.

WITH THE PURPOSE OF PROMOTING THE PROGRESS AND RELEVANCE OF PHYSICAL SCIENCES AND ADVANCE THEIR CONTRIBUTIONS AND RESPONSIVENESS TO SOCIETY, AIP GENERATES, COMMUNICATES AND POPULARIZES KNOWLEDGE, UNIQUE EXPERTISE AND AUTHORITATIVE INFORMATION.

THE SOCIETY OF PHYSICS STUDENTS (SPS) IS A SCIENTIFIC SOCIETY FOR PHYSICS UNDERGRADUATES AND THEIR MENTORS, WITH MORE THAN 4200 MEMBERS AND 818 SPS CHAPTERS NATIONWIDE AND SEVERAL INTERNATIONAL CHAPTERS. SPS EXISTS TO SUPPORT DEPARTMENTS AND THE UNDERGRADUATE PHYSICS COMMUNITY.

SIGMA PI SIGMA, THE PHYSICS HONOR SOCIETY, RECOGNIZES OUTSTANDING

SCHOLARS IN PHYSICS, ENCOURAGES INTEREST IN THE FIELD, AND PROMOTES AN

ATTITUDE OF SERVICE AMONG ITS OVER 70,000 MEMBERS AND 580 CHAPTERS

TOWARDS THE ENTIRE PHYSICS COMMUNITY AND THE PUBLIC. A PRIMARY MISSION OF

SIGMA PI SIGMA IS TO SUPPORT THE STUDENTS, DEPARTMENTS, AND PHYSICS

ALUMNI BY IMPROVING DEPARTMENT HEALTH. THE SOCIETY OF PHYSICS STUDENTS

AND SIGMA PI SIGMA PROVIDE ENRICHING EXPERIENCES FOR STUDENTS INTERESTED IN THE PHYSICAL SCIENCES THROUGH INTERNSHIPS, SCHOLARSHIPS, FELLOWSHIPS AND STUDENT PROGRAMS AT SCIENTIFIC MEETINGS - OPPORTUNITIES THAT ARE VITAL TO THE PROFESSIONAL DEVELOPMENT OF THE UNDERGRADUATE PHYSICS STUDENT.

THE AIP HISTORY PROGRAMS (THE CENTER FOR THE HISTORY OF PHYSICS AND THE NIELS BOHR LIBRARY & ARCHIVES) WORK TO PRESERVES AND MAKE KNOWN THE HISTORICAL RECORD OF THE PHYSICAL SCIENCES THROUGH DOCUMENTATION, ARCHIVAL COLLECTIONS AND EDUCATIONAL INITIATIVES. AIP HISTORY PROGRAMS ENSURE THAT THE HERITAGE OF MODERN PHYSICS IS SAFEGUARDED AND ITS STORY ACCURATELY TOLD. THE HISTORY OF PHYSICS OFFERS A RICH FRAMEWORK OF EXCITING PAST ACHIEVEMENTS AND VALUABLE GUIDANCE FOR CURRENT AND FUTURE GENERATIONS OF PHYSICISTS. IN 2017, THE PHYSICS HERITAGE AND PROMISE CAMPAIGN WAS ESTABLISHED. ONE OF THE MAIN GOALS OF THIS CAMPAIGN IS TO HELP SUPPORT THE ACQUISITION OF THE WENNER COLLECTION, A RARE BOOK LIBRARY CONTAINING THE FIRST PUBLISHED ACCOUNTS OF MANY OF THE MOST IMPORTANT DISCOVERIES DURING THE PAST 350 YEARS.

INSIDE SCIENCE IS AN EDITORIALLY INDEPENDENT, NEWS OUTLET THAT PRODUCES

QUALITY, ACCURATE STEM (SCIENCE-TECHNOLOGY-EDUCATION-MATHEMATICS) NEWS.

THE CONTENT IS AVAILABLE FOR SYNDICATION BY MAINSTREAM NEWS ORGANIZATION,

INCLUDING THOSE WITH REDUCED OR NON-EXISTENT SCIENCE REPORTERS, IN THE

ERA OF DIMINISHED REVENUE IN THE FOR-PROFIT NEWS ORGANIZATIONS. INSIDE

SCIENCE INCLUDES FOUR AREAS: NEWS ARTICLES, VIDEOS, GUEST COLUMNS AND AN

Name of the organization

AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number

13-1667053

EDITOR'S BLOG.

THE AIP MEDIA SERVICES TEAM WORKS WITH AIP PUBLISHING, AIP MEMBER

SOCIETIES AND ALLIED ORGANIZATIONS TO PRODUCE AND PROMOTE TIMELY AND

ACCURATE PUBLIC DISSEMINATION OF SCIENTIFIC ADVANCES AND KNOWLEDGE. MEDIA

SERVICE STAFF AND PRESS ROOMS, ORGANIZE PRESS CONFERENCES AND OTHER

OUTREACH EVENTS AND PRODUCE HUNDREDS OF WRITTEN STORIES, VIDEOS, IMAGES,

INFOGRAPHS AND OTHER FORMS OF PUBLIC INFORMATION FOR THE MEDIA AND

GENERAL PUBLIC EVERY YEAR.

THE AIP STATISTICAL RESEARCH CENTER COLLECTS AND DISSEMINATES RELIABLE
AND TIMELY DATA ON EDUCATION AND EMPLOYMENT IN THE PHYSICAL SCIENCES.

DATA ARE PUBLISHED IN THE AREAS OF ENROLLMENT, DEGREES, DEMOGRAPHICS,
REPRESENTATION OF WOMEN AND MINORITIES, EMPLOYMENT BY ECONOMIC SECTOR,
AND SALARY INFORMATION FOR BACHELOR'S, MASTER'S AND PHD DEGREE HOLDERS.

THE CENTER ALSO PROVIDES SURVEY EXPERTISE AND CONTRACTS WITH MEMBER

SOCIETIES AND OUTSIDE ORGANIZATIONS TO CARRY OUT TARGETED STUDIES.

AIP INDUSTRIAL PHYSICS FORUM (IPF) BRINGS TOGETHER INDUSTRIAL AND APPLIED SCIENTISTS, WITH RESEARCH MANAGERS AND LEADERS FROM INDUSTRY, ACADEMIA, AND GOVERNMENT, WITH THE GOAL OF ADVANCING THE CONTRIBUTIONS OF THE PHYSICAL SCIENCES AND PHYSICAL SCIENTISTS TO ECONOMIC GROWTH. IPF MEETINGS FEATURE INVITED SPEAKER SESSIONS THAT COMPLIMENT AIP MEMBER SOCIETY MEETINGS. EXPERTS DISCUSS NEW APPLICATIONS OF PHYSICS, PRODUCT DEVELOPMENTS, AND OTHER OPPORTUNITIES FOR SCIENCE IN TODAY'S ECONOMIC

ENVIRONMENT. THE IPF OFFERS PARTICIPANTS OPPORTUNITIES TO LEARN ABOUT INNOVATIONS IN THE FIELD, TO INTERFACE WITH THE PEOPLE DRIVING THEM, AND TO STRATEGIZE ABOUT DIRECTIONS FOR FUTURE ECONOMIC AND SCIENTIFIC PROGRESS.

AIP VENTURE PARTNERSHIP FUND (VPF) USES A PORTION OF ITS STRATEGIC

RESERVES AS A BOARD-DESIGNATED FUND, THE PROCEEDS OF WHICH ARE USED TO

FUND INNOVATIVE PROJECTS BETWEEN ONE OR MORE MEMBER SOCIETIES AND AIP.

FUNDING FOR THE PROJECTS IS AWARDED COMPETITIVELY BY AN INDEPENDENT

SELECTION COMMITTEE. PROJECTS LAST UP TO TWO YEARS. THE ANNUAL AMOUNT OF

THE FUND IS \$250,000.

FORM 990, PART VI, LINE 6:

EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDERS

AIP IS A NON-STOCK, NON-PROFIT MEMBER CORPORATION.

FORM 990, PART VI, LINE 7A:

HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

THE BOARD OF DIRECTORS IS COMPOSED OF THE FOLLOWING INDIVDUALS: ONE (1)

INDIVIDUAL IS ELECTED OR APPOINTED BY EACH MEMBER (A MEMBER SOCIETY

DIRECTOR). NOT FEWER THAN TWO (2) AND NOT MORE THAN FOUR (4) INDIVIDUALS,

AS THE BOARD OF DIRECTORS SHALL DETERMINE, ELECTED BY THE BOARD OF

DIRECTORS (THE AT-LARGE DIRECTORS). THE CHAIR OF THE BOARD OF DIRECTORS,

THE CORPORATE SECRETARY, AND THE CHIEF EXECUTIVE OFFICER, EX-OFFICIO (THE

EX-OFFICIO DIRECTORS).

FORM 990, PART VI, LINE 7B:

THE MEMBER SOCIETIES ARE NOT OFTEN CALLED UPON TO TAKE ACTION IN THEIR ROLE AS THE VOTING MEMBERS OF AIP. HOWEVER, THE ACTIONS THAT MEMBERS DO TAKE CONCERN THE MOST FUNDAMENTAL DECISIONS ABOUT THE ORGANIZATION, SUCH AS:

- APPROVING MEMBER SOCIETY DESIGNATED DIRECTORS TO THE AIP BOARD, OR THEIR REAPPOINTMENT FOR A SECOND TERM.
- APPROVING AMENDMENTS TO THE BYLAWS.
- ADMITTING NEW MEMBER SOCIETIES TO THE FEDERATION.
- MAKING A FINAL DECISION IN THE EVENT THAT AIP EVER CONSIDERS A FUNDAMENTAL CHANGE IN ITS STRUCTURE SUCH AS A MERGER, CONSOLIDATION, DISSOLUTION, OR SALE OF SUBSTANTIALLY ALL ITS ASSETS.

FORM 990, PART VI, LINE 11B:

FORM 990 REVIEW PROCESS

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

FORM 990, PART VI, LINE 12C:

THE CONSOLIDATED AIP CONSISTS OF THE PARENT CORPORATION (AIP) AND ITS

WHOLLY OWNED SUBSIDIARY AIP PUBLISHING, LLC (AIPP). DUE TO THE NATURE OF

THE RELATIONSHIP BETWEEN AIP AND AIPP, EACH ORGANIZATION MAINTAINS AND

MANAGES ITS OWN CONFLICT OF INTEREST (COI) POLICY.

AT AIP, ANNUALLY, A CONFLICT OF INTEREST (COI) DISCLOSURE IS COMPLETED BY ALL AIP COVERED PERSONS (OFFICERS, DIRECTORS AND KEY PERSONS). NO AIPP EMPLOYEES ARE AIP COVERED PERSONS. THE CHAIR OF THE AUDIT COMMITTEE AND THE CORPORATE SECRETARY REVIEW THE DISCLOSURES, EVALUATE IF THERE ARE CONFLICTS OF INTEREST THAT NEED TO BE MANAGED, AND REPORT THEIR FINDINGS TO THE AUDIT COMMITTEE. THE AUDIT COMMITTEE THEN DETERMINES THE NEXT STEPS WITH RESPECT TO MANAGING ANY CONFLICTS OF INTEREST. THE FINAL RESULTS OF THE DISCLOSURE REVIEWS AND ANY MANAGEMENT PLANS ARE REPORTED TO INDIVIDUAL DIRECTORS AND TO THE BOARD. AIP'S COI POLICY IS MADE AVAILABLE TO THE PUBLIC THROUGH AIP'S WEBSITE.

AT AIPP, ANNUALLY, ALL MEMBERS OF THEIR BOARD OF MANAGERS AND ALL OFFICERS OF THE COMPANY CONFIRM THAT THEY HAVE READ AND UNDERSTAND AND AGREE TO COMPLY WITH AIPP'S COI POLICY. ALL OTHER AIPP EMPLOYEES ARE NOT REQUIRED TO CONFIRM ANNUALLY. THE CFO OF AIPP CERTIFIES ANNUALLY TO THE CFO OF AIP THAT AIPP IS REGULARLY AND CONSISTENTLY MONITORING AND ENFORCING COMPLIANCE WITH THE AIPP COI POLICY. AIPP DOES NOT MAKE IT'S COI POLICY AVAILABLE TO THE PUBLIC.

FORM 990, PART VI, LINE 15A:

COMPENSATION REVIEW & APPROVAL PROCESS

AIP'S BOARD OF DIRECTORS HAS DESIGNATED FOR ITS STANDING COMPENSATION

COMMITTEE TO MANAGE COMPENSATION OF AIP'S CEO. THE CHARTER OF THE

COMPENSATION COMMITTEE PROVIDES FOR A PROCEDURE THAT IS CONSISTENT WITH

APPLICABLE LAW AND BEST PRACTICES. THE CHARTER PROVIDES THAT THE

COMMITTEE "SHALL MAKE A RECOMMENDATION TO THE BOARD OF DIRECTORS WITH

13-1667053

AMERICAN INSTITUTE OF PHYSICS, INC.

RESPECT TO THE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER." THE

COMPENSATION COMMITTEE OBTAINS DATA AS TO COMPARABLE COMPENSATION FOR THE

CHIEF EXECUTIVE OFFICER, RECOMMENDS TERMS OF THE CEO'S EMPLOYMENT

AGREEMENTS, DETERMINES REASONABLE COMPENSATION LEVEL, OR COMPENSATION

RANGE, AND SUBMITS TO THE BOARD A RECOMMENDATION FOR THE CEO'S

COMPENSATION FOR EACH FISCAL YEAR. THE BOARD OF DIRECTORS MAKES THE FINAL

DECISION ON THE CEO'S COMPENSATION.

FORM 990, PART VI, LINE 15B:

COMPENSATION REVIEW & APPROVAL PROCESS

OFFICERS: A COMPENSATION CONSULTING FIRM IS RETAINED TO REVIEW THE

CURRENT COMPENSATION OF THE OFFICERS AND KEY EMPLOYEES. THE CEO PRESENTS

THIS INFORMATION TO THE COMPENSATION COMMITTEE FOR INFORMATION PURPOSES

ONLY.

FORM 990, PART VI, LINE 19:

OTHER ORGANIZATION DOCUMENTS MADE AVAILABLE TO THE PUBLIC

THE AIP WEBSITE HAS A GOVERNANCE SECTION THAT INCLUDES CORPORATION

BYLAWS. ALSO, ON THE WEBSITE ARE ANNUAL REPORTS THAT INCLUDE FINANCIAL

HIGHLIGHTS FOR AIP. THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND

FORM 990 ARE ALSO AVAILABLE ON THE WEBSITE.

FORM 990, PART XI, LINE 9:

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FASB ADOPTION POST RETIREMENT PLAN \$-386,596

Name of the organization

AMERICAN INSTITUTE OF PHYSICS, INC.

Employer identification number

13-1667053

ATTACHMENT 1

#### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AIP'S MISSION IS TO ADVANCE, PROMOTE AND SERVE THE PHYSICAL SCIENCES

FOR THE BENEFIT OF HUMANITY. AIP OFFERS PROGRAMS, PRODUCTS, AND

SERVICES THAT 1) ADVANCE AND DISTRIBUTE THE KNOWLEDGE OF THE PHYSICAL

SCIENCES AND ITS APPLICATIONS, 2) ENHANCE AND CULTIVATE THE PHYSICAL

SCIENCES DISCIPLINES, 3) ENABLE AND FOSTER COLLABORATIVE EFFORTS

AMONG STAKEHOLDERS IN THE PHYSICAL SCIENCES; AND 4) PROMOTE THE

PHYSICAL SCIENCES TO THE PUBLIC, GOVERNMENT OFFICIALS, AGENCIES, AND

THE MEDIA.

ATTACHMENT	2	

#### 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ORIGIN EDITORIAL, LLC PO BOX 861 PLYMOUTH, MA 02362	EDITORIAL OPERATIONS	1,520,758.
BDO USA LLP 8401 GREENSBORO DRIVE, SUITE 800 MCLEAN, VA 22102	AUDIT AND TAX	149,147.
BRYAN CAVE 1155 F STREET WASHINGTON, DC 20004	LEGAL FEES	447,936.
GREEN KEY TEMP, LLC 475 PARK AVE, S NEW YORK, NY 10016	TEMPORARY AGENCY	320,870.
JACKSON LEWIS, PC PO BOX 416019 BOSTON, MA 02241	LEGAL FEES	164,664.

#### SCHEDULE R (Form 990)

### **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organizationEmployer identification numberAMERICAN INSTITUTE OF PHYSICS, INC.13-1667053

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) AIP PUBLISHING LLC 13-1667053					
1305 WALT WHITMAN RD STE 300 MELVILLE, NY 11747	PUBLISHING	NY	51,830,000.	61,041,000.	AIP
(2)					
(3)					
_(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr	rolled
						Yes	No
(1) AMERICAN CENTER FOR PHYSICS 52-1712905							İ
1 PHYSICS ELLIPSE COLLEGE PARK, MD 20740	OFFICE SPACE	MD	501(C)(3)	12B	N/A		X
(2)							
							<u> </u>
_(3)	_						
_(4)	_						ł
_(5)							ł
							<u> </u>
_(6)							
_(7)							İ
							ł

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

Schedule R (Form 990) 2017

Schedule R (Form 990) 2017

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportiona allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen man	(j) eral or naging tner?	(k) Percentage ownership
		,		,			Yes	No		Yes	No	
(1) NEW CRYSTALLOGRAPHY JOURNAL, L												
1305 WALT WHITMAN RD, STE 300	PUBLISHING	DE	N/A		-51,073.	30,171.		х		Х		50.0000
(2)	_											
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		o)(13) rolled
(4)									Yes	No
(1) AIP GLOBAL, INC 27-06  1305 WALT WHITMAN RD, STE 300 MELVILLE, NY 11747	502778	INTL. OFFICE	DE	AIPP	C CORP	46,065.	56,349.	100.0000	x	
(2)										
(3)										_
(4)										
(5)										_
(6)										
(7)										

JSA

7E1308 1.000

Schedule R (Form 990) 2017

Schedule R (I	Form 990) 2017	Page 3
Part V	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	

	<b>3</b>		, ,				
Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more rela	lated organizations lis	sted in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х
b	Gift, grant, or capital contribution to related organization(s)				1b		Х
С	Gift, grant, or capital contribution from related organization(s)				1c		Х
d	Loans or loan guarantees to or for related organization(s)				1d		Х
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s).				1f		Х
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	X	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11	Х	
m	Performance of services or membership or fundraising solicitations by related organization(s).				1m	X	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		Х
	Sharing of paid employees with related organization(s)				10	X	
р	Reimbursement paid to related organization(s) for expenses				1p	X	
q	Reimbursement paid by related organization(s) for expenses				1q		X
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s).		<u> </u>		1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this	s line, including cove	ered relationships and transa	ction thre	shold	s.	
	(a) Name of related organization	<b>(b)</b> Transaction	(c) Amount involved	Method	(d)	rminir	
	Name of related organization	type (a-s)	Amount involved		nt invo		ıg
(1)	AIP GLOBAL, INC	P	304,179.	COST			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) AIP GLOBAL, INC	Р	304,179.	COST
(2)			
(3)			
(4)			
(5)			
(6)			

JSA 7E1309 2.000

Schedule R (Form 990) 2017

13-1667053

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501 organiz	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	man part	i) eral or aging ner?	ownership	
			sections 512-514)	Yes	No			Yes	No		Yes	No		
(2)														
(3)														
(4)														
(5)														
(6)														
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(10)														

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#### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART III, LINE 1, COLUMN A:

NAME, ADDRESS & EIN OF RELATED ORGANIZATION

NEW CRYSTALLOGRAPHY JOURNAL, LLC

1305 WALT WHITMAN ROAD, SUITE 300

MELVILLE, NY 11747

EIN: 90-0988084

PART IV, LINE 1, COLUMN D:

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