

COMMITTEE ON NATURAL RESOURCES
Disclosure Form
As required by and provided for in House Rule XI, clause 2(g) and
the Rules of the Committee on Natural Resources

*Examining the Spending Priorities and the Missions of the U.S. Geological Survey
and the President's FY 2012 Budget Proposal
March 9, 2011*

For Individuals:

1. Name:

2. Address:

3. Email Address:

4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

1. Name:
Craig M. Schiffries, Ph.D.

2. Name of Organization(s) You are Representing at the Hearing:
Geological Society of America

3. Business Address:

Director for Geoscience Policy
Geological Society of America
1200 New York Ave., NW, Suite 700
Washington, DC 20005

4. Business Email Address:
[Information redacted for privacy]

5. Business Phone Number:
202-669-0466

Name/Organization Craig M. Schiffries, Geological Society of America
Title/Date of Hearing Examining the Spending Priorities and the Missions of the U.S. Geological Survey and the President's FY 2012 Budget Proposal, March 9, 2011

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Ph.D., Geology, Harvard University
A.M., Geology, Harvard University
M.S., Geology and Geophysics, Yale University
B.S., Geology and Geophysics, Yale University

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Member of Geological Society of America, Mineralogical Society of America, American Geophysical Union, American Association for the Advancement of Sciences. Co-chair of USGS Coalition, an alliance of more than 70 scientific organizations united by a commitment to the continued vitality of the U.S. Geological Survey.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Director for Geoscience Policy, Geological Society of America; Co-chair, USGS Coalition; former Director of the Board on Earth Sciences and Resources, National Research Council / National Academy of Sciences; former visiting faculty member in the Department of Geology and Geophysics, Yale University; former Director of Science Policy, National Council for Science and the Environment; former Director of Government Affairs, American Geological Institute; former Congressional Science Fellow; former Carnegie Fellow, Geophysical Laboratory of the Carnegie Institution of Washington.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and/or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None. Please see attached list of federal grants and contracts awarded to the Geological Society of America.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

A biographical sketch is attached.

Name/Organization Craig M. Schiffries, Geological Society of America
Title/Date of Hearing Examining the Spending Priorities and the Missions of the U.S. Geological Survey and the President's FY 2012 Budget Proposal, March 9, 2011

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Director for Geoscience Policy
Geological Society of America

h. Any federal grants or contracts (including subgrants or subcontracts) from the *Department of the Interior (and /or other agencies invited)* that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

Please see attached list.

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

None

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Please see attachments.

**The Geological Society of America (GSA)
Federal Grants or Contracts
2007 thru February 25, 2011**

<u>Fiscal Year</u>	<u>Amount</u>	<u>Source Agency</u>	<u>Program</u>	<u>Receiving Organization</u>
2007	173,900.00	NSF	Matching Research Grant Program	GSA
	6,263.43	NSF	BioGeo Website	GSA
	15,000.00	NSF	Drought Meeting	GSA
	33,491.00	Forest Service - USDA	GeoCorps America	GSA
	60,250.00	National Park Service	GeoCorps America	GSA
	29,059.87	USGS	Congressional Science Fellow	GSA
	21,870.00	USGS	GeoInformatics	GSA
	2,475.00	BLM	GeoCorps America	GSA
	10,000.00	USGS	Sponsorship of Annual Meeting	GSA
	<u>352,309.30</u>			
2008	180,900.00	NSF	Matching Research Grant Program	GSA
	6,198.37	NSF	BioGeo Website	GSA
	10,000.00	National Park Service	Wildfires	GSA
	51,394.00	Forest Service - USDA	GeoCorps America	GSA
	43,905.00	National Park Service	GeoCorps America	GSA
	32,293.29	USGS	Congressional Science Fellow	GSA
	13,300.00	USGS	GeoInformatics	GSA
	55,601.00	BLM	GeoCorps America	GSA
	10,000.00	USGS	Sponsorship of Annual Meeting	GSA
	<u>403,591.66</u>			
2009	30,800.91	USGS	International Year of Planet Earth	GSA
	42,026.89	USGS	Congressional Science Fellow	GSA
	13,300.00	USGS	GeoInformatics	GSA
	188,100.00	NSF	Matching Research Grant Program	GSA
	9,098.92	NSF	BioGeo Website	GSA
	63,940.00	Forest Service - USDA	GeoCorps America	GSA
	209,210.00	National Park Service	GeoCorps America	GSA
	65,000.00	BLM	GeoCorps America	GSA
	<u>621,476.72</u>			

2010	105,620.00	Forest Service - USDA	GeoCorps America	GSA
	303,949.05	National Park Service	GeoCorps America	GSA
	60,325.00	BLM	GeoCorps America	GSA
	17,949.34	USGS	International Year of Planet Earth	GSA
	33,612.17	USGS	Congressional Science Fellow	GSA
	3,500.00	USGS	Annual Meeting Student Travel	GSA
	9,000.00	USGS	Annual Meeting Internet Café	GSA
	7,500.00	USGS	Annual Meeting Hall of Fame	GSA
			Matching Research Grant	
	<u>252,060.00</u>	NSF	Program	GSA
	<u>541,455.56</u>			

2011	67,023.18	Forest Service - USDA	GeoCorps America	GSA
	370,032.50	National Park Service	GeoCorps America	GSA
	73,050.00	BLM	GeoCorps America	GSA
	24,201.31	USGS	Congressional Science Fellow	GSA
	3,500.00	USGS	Annual Meeting Student Travel	GSA
	<u>6,500.00</u>	USGS	Annual Meeting Hall of Fame	GSA
	<u>544,306.99</u>			

NOTICE

GuideStar has been informed of an IRS processing error on electronically filed Forms 990 between January 1, 2009 and December 3, 2010 for filing year 2008. These processing errors have resulted in inaccurate data appearing on the scanned images of these tax returns and do not reflect the information filed with the IRS.

These errors include:

1. Organization's mission description (Part III, line 1) and the description of program achievements (Part III, line 4a) may not reflect what was originally submitted by the nonprofit organization
2. Gross Income for Special Events value transposed
 - Part VIII - The value in Line 8a may not be accurate
3. Other Salaries and Wages, Management and General Expenses is not reported
 - Part IX - Line 7c might show a blank where a value was originally reported
4. Endowments Funds, Possession by Related Organizations checkbox transposed
 - Schedule D, Part V - Line 3a (ii) checkbox values may be transposed

GuideStar is working with the IRS and reaching out directly to this organization to obtain a true and accurate copy of the 2008 Form 990. GuideStar will replace this Form 990 when the accurate return is made available.

Please direct any questions to nposervices@guidestar.org.

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2008
Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization GEOLOGICAL SOCIETY OF AMERICA INC	D Employer identification number 13-1659623
		Doing Business As	E Telephone number (303) 357-1019
		Number and street (or P O box if mail is not delivered to street address) Room/suite PO BOX 9140	G Gross receipts \$ 13,072,246
		City or town, state or country, and ZIP + 4 BOULDER, CO 80301	
F Name and address of Principal Officer JOHN W HESS PO BOX 9140 BOULDER, CO 80301		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions) H(c) Group Exemption Number	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Web site: WWW GEOSOCIETY ORG			
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other		L Year of Formation 1888	M State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE GEOLOGICAL SOCIETY OF AMERICA WAS FOUNDED TO ADVANCE THE SCIENCE OF GEOLOGY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of employees (Part V, line 2a)	5	63
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C) b Net unrelated business taxable income from Form 990-T, line 34	7a 7b	273,172 108,195
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	706,922	748,389
	9 Program service revenue (Part VIII, line 2g)	3,756,503	3,184,934
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,447,114	338,820
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,573,119	1,970,081
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,483,658	6,242,224
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,045,632	1,167,465
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,823,142	3,336,001
	16a Professional fundraising fees (Part IX, column (A), line 11e) b (Total fundraising expenses, Part IX, column (D), line 25 <u>9,182</u>)		0
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	2,107,991	3,182,049
	18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	6,976,765	7,685,515
19 Revenue less expenses Subtract line 18 from line 12	1,506,893	-1,443,291	
Net Assets or Fund Balances		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	28,616,836	21,370,151
	21 Total liabilities (Part X, line 26)	3,152,851	3,033,348
22 Net assets or fund balances Subtract line 21 from line 20	25,463,985	18,336,803	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here	***** Signature of officer	2010-01-20 Date		
	JOHN W HESS EXECUTIVE DIRECTOR Type or print name and title			
Paid Preparer's Use Only	Preparer's signature LORI B BAUER CPA	Date 2010-01-20	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4 JDS PROFESSIONAL GROUP 5670 GREENWOOD PLAZA BLVD STE 200 GREENWOOD VILLAGE, CO 80111			EIN
				Phone no (303) 771-0123

May the IRS discuss this return with the preparer shown above? (See instructions) Yes No

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission
THE GEOLOGICAL SOCIETY OF AMERICA WAS FOUNDED TO ADVANCE THE SCIENCE OF GEOLOGY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? Yes No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,869,535 including grants of \$) (Revenue \$ 1,772,018)
THE SOCIETY SPONSORS AN ANNUAL MEETING FOR MEMBERS IN THE FALL AND SMALLER MEETINGS IN THE SPRING MEMBERS ATTEND DISCUSSIONS AND CONFERENCES CONCERNING TOPICS IN THE FIELD OF GEOLOGY

4b (Code) (Expenses \$ 1,075,166 including grants of \$) (Revenue \$ 818,101)
EDUCATION AND OUTREACH PROGRAMS - INVOLVEMENT IN HEIGHTENING PUBLIC UNDERSTANDING OF AND APPRECIATION FOR GEOSCIENCES BY WORKING WITH SCIENTISTS, TEACHERS AND THE GENERAL PUBLIC, PLUS PROGRAMS AND MEETINGS RUN BY SECTIONS AND DIVISIONS

4c (Code) (Expenses \$ 686,778 including grants of \$) (Revenue \$ 594,815)
THE MEMBERSHIP SERVICES PROGRAM INCLUDES THE COST OF MAINTAINING THE SOCIETY'S MEMBERSHIP AND THE COST OF THE EMPLOYMENT SERVICE PROVIDED FOR THE BENEFIT OF MEMBERS

(Code) (Expenses \$ 1,167,465 including grants of \$ 1,167,465) (Revenue \$)
SCHOLARSHIPS FOR RESEARCH AND STUDY OF GEOLOGY TO VARIOUS RECIPIENTS AWARDED BY INDEPENDENT SELECTION MOST AWARDS ARE 2,000 OR LESS

4d Other program services (Describe in Schedule O)
(Expenses \$ 1,167,465 including grants of \$ 1,167,465) (Revenue \$)

4e Total program service expenses \$ 4,798,944 *Must equal Part IX, Line 25, column (B).*

Part IV 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)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> <input checked="" type="checkbox"/>	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I</i>		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> <input checked="" type="checkbox"/>		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> <input checked="" type="checkbox"/>	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> <input checked="" type="checkbox"/>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		No

Part IV Checklist of Required Schedules *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> 		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> 	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 419		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 63		
b	If at least one is reported in 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 this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		No
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 required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		No
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		No
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
a	Did the organization make any taxable distributions under section 4966?		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?		No
10	<i>Section 501(c)(7) organizations.</i> Enter		
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		
11	<i>Section 501(c)(12) organizations.</i> Enter		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> 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		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O	Yes	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed _____
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 own website another's website upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 THE ORGANIZATION
 PO BOX 9140
 BOULDER, CO 80301
 (303) 357-1019

Part VIII Statement of Revenue

		(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . 1a _____					
	b Membership dues 1b _____					
	c Fundraising events 1c _____					
	d Related organizations . . . 1d _____					
	e Government grants (contributions) 1e _____					
	f All other contributions, gifts, grants, and similar amounts not included above 748,389 1f _____	748,389				
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total (Add lines 1a-1f)	748,389				
Program Service Revenue	2a MEETINGS Business Code _____	1,772,018	1,772,018			
	b MEMBERSHIP DUES _____	594,815	594,815			
	c SECTIONS & DIVISIONS _____	446,336	446,336			
	d EDUCATION & OUTREACH _____	371,765	371,765			
	e _____					
	f All other program service revenue _____					
	g Total. Add lines 2a-2f ▶ \$ 3,184,934					
Other Revenue	3 Investment income (including dividends, interest other similar amounts)	650,360			650,360	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents (i) Real (ii) Personal					
		b Less rental expenses				
		c Rental income or (loss)				
		d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	4,164,306				
		b Less cost or other basis and sales expenses 4,475,846				
		c Gain or (loss) -311,540				
		d Net gain or (loss)	-311,540			-311,540
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a					
		b Less direct expenses . . . b _____				
		c Net income or (loss) from fundraising events				
9a Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a						
	b Less direct expenses . . . b _____					
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances . . . a	4,108,531					
	b Less cost of goods sold . . . b 2,354,176					
c Net income or (loss) from sales of inventory	1,754,355	1,478,845	275,510			
Miscellaneous Revenue Business Code _____						
11a SPONSORSHIPS	202,200	202,200				
b MISC	15,864	15,864				
c IRONWOOD CAPITAL PARTNERS LP 900,099	-2,338		-2,338			
d All other revenue _____						
e Total. Add lines 11a-11d \$ 215,726						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	6,242,224	4,881,843	273,172	338,820		

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) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	1,167,465	1,167,465		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	213,185	78,878	134,307	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,699,480	1,168,403		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	239,867	180,650	59,217	
10	Payroll taxes	183,469	67,743	115,726	
11	Fees for services (non-employees)				
a	Management				
b	Legal	52,559	33,055	19,504	
c	Accounting	36,042		36,042	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	835,379	357,465	477,914	
12	Advertising and promotion	36,935	14,514	13,239	9,182
13	Office expenses	349,949	92,816	257,133	
14	Information technology	116,138	37,337	78,801	
15	Royalties				
16	Occupancy	114,527	11,464	103,063	
17	Travel	570,437	405,876	164,561	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	745,404	695,148	50,256	
20	Interest	3,281		3,281	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	198,930	17,833	181,097	
23	Insurance	90,805	29,669	61,136	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	FOUNDATION SUPPORT	369,001		369,001	
b	PRINTING	295,199	169,654	125,545	
c	AV SERVICES	257,122	255,303	1,819	
d	PROFESSIONAL DEVELOPMENT	237,249	1,072	236,177	
e	CREDIT CARD FEES	234,347	95,976	138,371	
f	All other expenses	-1,361,255	-81,377	-1,279,878	
25	Total functional expenses. Add lines 1 through 24f	7,685,515	4,798,944	2,877,389	9,182
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	50,587	1	81,347
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	48,725	3	25,000
	4 Accounts receivable, net	411,538	4	454,090
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	617,055	8	392,072
	9 Prepaid expenses and deferred charges	534,323	9	433,997
	10a Land, buildings, and equipment cost basis			
		10a 5,885,803		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 3,199,090	2,820,131	10c 2,686,713
	11 Investments—publicly traded securities	24,134,477	11	17,296,932
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12	
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	28,616,836	16	21,370,151	
Liabilities	17 Accounts payable and accrued expenses	519,404	17	743,731
	18 Grants payable		18	
	19 Deferred revenue	2,402,027	19	1,979,375
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	231,420	25	310,242
	26 Total liabilities. Add lines 17 through 25	3,152,851	26	3,033,348
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	14,753,340	27	1,191,160
	28 Temporarily restricted net assets	6,826,260	28	13,261,258
	29 Permanently restricted net assets	3,884,385	29	3,884,385
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	25,463,985	33	18,336,803	
34 Total liabilities and net assets/fund balances	28,616,836	34	21,370,151	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,243,466	1,518,057	1,459,966	1,334,328	1,343,204	6,899,021
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	4,581,715	7,069,221	7,420,485	9,852,608	11,607,786	40,531,815
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total Add lines 1-5	5,825,181	8,587,278	8,880,451	11,186,936	12,950,990	47,430,836
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						47,430,836

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	5,825,181	8,587,278	8,880,451	11,186,936	12,950,990	47,430,836
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	490,815	1,002,137	1,269,725	575,392	648,022	3,986,091
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b	490,815	1,002,137	1,269,725	575,392	648,022	3,986,091
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	106,534	217,160				323,694
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	9,337	42,036	21,460	162,176	218,064	453,073
13 Total Support (Add lines 9, 10c, 11 and 12)						52,193,694
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	90.874 %
16 Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	87.700 %

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	7.637 %
18 Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	9.160 %

- 19a 33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

Facts and Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 13-1659623
Name: GEOLOGICAL SOCIETY OF AMERICA INC

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN HESS , EXEC DIR	40	X					196,241	0	16,944	
JACQUELINE E HUNTOON , COUNCILOR	3	X					0	0	0	
DR JOHN W GEISSMAN , COUNCILOR	3	X					0	0	0	
MONICA E GOWAN , COUNCILOR	3	X					0	0	0	
DR NANCY J MCMILLAN , COUNCILOR	3	X					0	0	0	
DR DAVID APPEGATE , COUNCILOR	3	X					0	0	0	
JEROME V DEGRAFF , COUNCILOR	3	X					0	0	0	
DR DIANE R SMITH , COUNCILOR	3	X					0	0	0	
DR JILL SCHNEIDERMAN , COUNCILOR	3	X					0	0	0	
G RANDY KELLER , COUNCILOR	3	X					0	0	0	
BRIAN R PRATT , COUNCILOR	3	X					0	0	0	
MURRAY WHITZMAN , COUNCILOR	3	X					0	0	0	
CLAUDIA I MORA , COUNCILOR	3	X					0	0	0	
MARGARET DAVINO , LEGAL CONSUL	2	X					0	0	0	
ADRIENNE MCNAMARA , LEGAL COUNS	2	X					0	0	0	
DR JUDITH T PARRISH , PRESIDENT	3			X			0	0	0	
DR JOHN M SHARP JR , PAST PRES	3			X			0	0	0	
JEAN M BAHR , VICE PRES	3			X			0	0	0	
ROBBIE R GRIES , TREAS	3			X			0	0	0	
MARK CLOOS , INT'L SECY	3			X			0	0	0	
CRAIG SCHIFFRIES , ADMINIS	40				X		143,380	0	0	
JON OLSEN , DEP ED	40				X		123,151	0	0	
TODD BERGGREN , DIR IT	40				X		117,785	0	0	
GARY LEWIS , DIR EDUC	40				X		105,618	0	0	
PAT KILNER , DIR MEMB	40				X		101,314	0	0	

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Department of the Treasury Internal Revenue Service

Name of the organization GEOLOGICAL SOCIETY OF AMERICA INC

Employer identification number 13-1659623

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 3 columns: Question number, Description, and Held at the End of the Year. Includes questions 1-9 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 3 columns: Question number, Description, and Amount. Includes questions 1a, 1b, 2, 2a, 2b regarding art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain why in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	17,382,740				
b Contributions					
c Investment earnings or losses	-3,793,197				
d Grants or scholarships					
e Other expenditures for facilities and programs	1,480,000				
f Administrative expenses					
g End of year balance	12,109,543				

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment
- b** Permanent endowment 32.080 %
- c** Term endowment 67.920 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	No

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		428,065		428,065
b Buildings		3,839,989	1,927,138	1,912,851
c Leasehold improvements		89,557	89,557	
d Equipment		1,528,192	1,182,395	345,797
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				2,686,713

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,242,224
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,685,515
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,443,291
4	Net unrealized gains (losses) on investments	4	-5,683,891
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-5,683,891
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-7,127,182

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,912,509
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-5,683,891
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-5,683,891
3	Subtract line 2e from line 1	3	8,596,400
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-2,354,176
c	Add lines 4a and 4b	4c	-2,354,176
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	6,242,224

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	10,039,691
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	10,039,691
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-2,354,176
c	Add lines 4a and 4b	4c	-2,354,176
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	7,685,515

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
COLLECTIONS AND RELATION TO EXEMPT PURPOSE	SCHEDULE D, PAGE 2, PART III, LINE 4	THE PENROSE COLLECTION IS TO BE HELD IN PERPETUITY FOR EXHIBIT, RESEARCH, EDUCATION, AND AS A MEMORIAL TO R A F PENROSE, JR
INTENDED USES FOR ENDOWMENT FUNDS	SCHEDULE D, PAGE 2, PART V, LINE 4	THE ENDOWMENT FUNDS SUPPORT THE EXEMPT ACTIVITIES OF THE ORGANIZATION
RECONCILIATION OF CHANGES - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 8	COST OF GOODS SOLD 2,354,176 COST OF GOODS SOLD - 2,354,176
REVENUE AMOUNTS INCLUDED ON RETURN - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 4B	COST OF GOODS SOLD -2,354,176
EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER	SCHEDULE D, PAGE 4, PART XIII, LINE 4B	COST OF GOODS SOLD -2,354,176

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

GEOLOGICAL SOCIETY OF AMERICA INC

Employer identification number

13-1659623

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

- 2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) 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
GRANTS - DETAILS ON FILE		1,167,465			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

Department of the Treasury
Internal Revenue Service

Name of the organization
GEOLOGICAL SOCIETY OF AMERICA INC

Employer identification number
13-1659623

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|---|--|
| <input type="checkbox"/> First class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a

- a** Receive a severance payment or change of control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOHN HESS	(i)	196,241			16,944		213,185	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization
GEOLOGICAL SOCIETY OF AMERICA INC

Employer identification number

13-1659623

Identifier	Return Reference	Explanation
ALL OTHER ACHIEVEMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	SCHOLARSHIPS FOR RESEARCH AND STUDY OF GEOLOGY TO VARIOUS RECIPIENTS AWARDED BY INDEPENDENT SELECTION MOST AWARDS ARE 2,000 OR LESS

Identifier	Return Reference	Explanation
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	MEMBERS ELECT THE GOVERNING BODY OF THE ORGANIZATION

Identifier	Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	MEMBERS ARE PROVIDED WITH BALLOTS TO APPROVE THE DECISIONS OF THE GOVERNING BODY

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 10	THE BOARD HAS DESIGNATED THE CONTROLLER AND EXECUTIVE DIRECTOR TO REVIEW THE FORM 990

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	GSA COUNCILORS ARE REQUIRED TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICTS, THE EXECUTIVE DIRECTOR'S OFFICE MAINTAINS THESE FILES GSA STAFF ALL HAVE A CONFLICT OF INTEREST ON FILE AND THEY UPDATE THEM WHEN NECESSARY

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND APPROVED BY A FORMAL PROCESS BASED ON THE OVERALL BUDGET OF THE ORGANIZATION

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	ALL OFFICER COMPENSATION IS REVIEWED AND APPROVED USING A FORMAL PROCESS BASED UPON THE OVERALL BUDGET OF THE ORGANIZATION

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE FROM THE ORGANIZATION'S WEBSITE

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

**Open to Public
Inspection**

▶ **Attach to Form 990. To be completed by organizations that answer "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization
GEOLOGICAL SOCIETY OF AMERICA INC

Employer identification number
13-1659623

Part I Identification of Disregarded Entities

(A) Name, address, and EIN 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

Part II Identification of Related Tax-Exempt Organizations

(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
THE GSA FOUNDATION PO BOX 9140 BOULDER, CO80301 74-2156871	FOUNDATION	CO	501	9	N/A

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproportionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(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

Part V Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

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

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m	Yes	
1n		No
1o		No
1p	Yes	
1q	Yes	
1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) GSA FOUNDATION INC	C	644,136
(2) GSA FOUNDATION INC	M	113,688
(3) GSA FOUNDATION INC	P	54,636
(4) GSA FOUNDATION INC	Q	200,677
(5)		
(6)		

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2007
Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
 Geological Society of America Inc

Number and street (or P O box if mail is not delivered to street address) Room/suite
 PO Box 9140

City or town, state or country, and ZIP + 4
 Boulder, CO 80301

D Employer identification number
 13-1659623

E Telephone number
 (303) 357-1019

F Accounting method Cash Accrual
 Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: www.geosociety.org

J Organization type (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes" enter number of affiliates: _____

H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number: _____

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 15,053,601

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b		456,355	
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d		250,567	
	e Total (add lines 1a through 1d) (cash \$ 706,922 noncash \$ _____)	1e			706,922
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			3,129,097
	3 Membership dues and assessments	3			627,406
	4 Interest on savings and temporary cash investments	4			9,117
	5 Dividends and interest from securities	5			566,275
	6a Gross rents	6a			
	b Less rental expenses	6b			
c Net rental income or (loss) subtract line 6b from line 6a	6c				
7 Other investment income (describe _____)	7				
8a Gross amount from sales of assets other than inventory	(A) Securities			(B) Other	
			5,415,225	8a	
	b Less cost or other basis and sales expenses		3,543,503	8b	
	c Gain or (loss) (attach schedule)		1,871,722	8c	
d Net gain or (loss) Combine line 8c, columns (A) and (B)	8d			1,871,722	
9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a				
b Less direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events Subtract line 9b from line 9a	9c				
10a Gross sales of inventory, less returns and allowances	10a		4,437,383		
	b Less cost of goods sold	10b		3,026,440	
	c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c			1,410,943
11 Other revenue (from Part VII, line 103)	11			162,176	
12 Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			8,483,658	
Expenses	13 Program services (from line 44, column (B))	13		4,526,321	
	14 Management and general (from line 44, column (C))	14		2,440,807	
	15 Fundraising (from line 44, column (D))	15		9,637	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses Add lines 16 and 44, column (A)	17			6,976,765
Net Assets	18 Excess or (deficit) for the year Subtract line 17 from line 12	18		1,506,893	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		27,049,715	
	20 Other changes in net assets or fund balances (attach explanation)	20		-3,092,623	
	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	21			25,463,985

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22a Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22b Other grants and allocations (attach schedule) (cash \$ 1,045,632 noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b	1,045,632	1,045,632		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	202,422	75,605	126,817	
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b				
c Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b and c	26	3,025,039	1,480,591	1,544,448	
27 Pension plan contributions not included on lines 25a, b and c	27				
28 Employee benefits not included on lines 25a - 27	28	595,681	305,592	290,089	
29 Payroll taxes	29	234,329	114,562	119,767	
30 Professional fundraising fees	30				
31 Accounting fees	31	30,109		30,109	
32 Legal fees	32	18,788	1,747	17,041	
33 Supplies	33	41,218	12,078	29,140	
34 Telephone	34	63,848	27,506	36,342	
35 Postage and shipping	35	161,137	134,310	26,827	
36 Occupancy	36	176,068	46,214	129,854	
37 Equipment rental and maintenance	37	66,966	6,276	60,690	
38 Printing and publications	38	843,800	838,340	5,460	
39 Travel	39	526,771	367,144	159,627	
40 Conferences, conventions, and meetings	40	267,977	267,977		
41 Interest	41	11,300		11,300	
42 Depreciation, depletion, etc (attach schedule)	42	167,982	37,530	130,452	
43 Other expenses not covered above (itemize)					
a See Additional Data Table	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	6,976,765	4,526,321	2,440,807	9,637

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ <u>The Geological Society of America was founded to advance the science of geology</u> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a Scholarships for research and study of geology to various recipients awarded by independent selection. Most awards are \$2,000 or less. (Grants and allocations \$ 1,042,782) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	1,042,782
b The membership services program includes the cost of maintaining the society's membership and the cost of the employment service provided for the benefit of members. (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	739,012
c Education and outreach programs - involvement in heightening public understanding of and appreciation for geosciences by working with scientists, teachers and the general public, plus, programs and meetings run by sections and divisions. (Grants and allocations \$ 3,250) If this amount includes foreign grants, check here <input type="checkbox"/>	1,086,559
d The society sponsors an annual meeting for members in the fall and smaller meetings in the spring. Members attend discussions and conferences concerning topics in the field of geology. (Grants and allocations \$ 400) If this amount includes foreign grants, check here <input type="checkbox"/>	1,657,968
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	4,526,321

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing	64,597	45	50,587
	46 Savings and temporary cash investments		46	
	47a Accounts receivable	474,858		
	b Less allowance for doubtful accounts	63,320	259,261	47c 411,538
	48a Pledges receivable	48,725		
	b Less allowance for doubtful accounts		71,240	48c 48,725
	49 Grants receivable			49
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)			50b
	51a Other notes and loans receivable (attach schedule)			
	b Less allowance for doubtful accounts			51c
	52 Inventories for sale or use	683,166	52	617,055
	53 Prepaid expenses and deferred charges	372,057	53	534,323
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	25,874,693	54a	24,134,477
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55a Investments—land, buildings, and equipment basis				
b Less accumulated depreciation (attach schedule)			55c	
56 Investments—other (attach schedule)			56	
57a Land, buildings, and equipment basis	5,812,855			
b Less accumulated depreciation (attach schedule)	2,992,724	2,774,664	57c 2,820,131	
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)		64,001	58	
59 Total assets (must equal line 74) Add lines 45 through 58	30,163,679	59	28,616,836	
Liabilities	60 Accounts payable and accrued expenses	798,327	60	519,404
	61 Grants payable		61	
	62 Deferred revenue	1,874,542	62	2,402,027
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)	435,000	64a	225,000
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> _____)		6,095	65 6,420
66 Total liabilities Add lines 60 through 65	3,113,964	66	3,152,851	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	15,847,719	67	14,753,340
	68 Temporarily restricted	7,317,611	68	6,826,260
	69 Permanently restricted	3,884,385	69	3,884,385
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	27,049,715	73	25,463,985
	74 Total liabilities and net assets / fund balances Add lines 66 and 73	30,163,679	74	28,616,836

Part VI Other Information (continued)

Yes No

82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)?
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2007 (See instructions) 55

91a The books are in care of The Organization Telephone no (303) 357-1019
PO Box 9140
Located at Boulder, CO ZIP + 4 80301

91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
If "Yes," enter the name of the foreign country
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year **92** _____

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Sections & divisions					492,968
b Meetings					2,284,809
c Education & outreach					351,320
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					627,406
95 Interest on savings and temporary cash investments			14	9,117	
96 Dividends and interest from securities			14	566,275	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	1,871,722	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory	541800	327,553			1,083,390
103 Other revenue a Other income					68,893
b Ironwood Passthrough Inc	900000	93,283			
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		420,836		2,447,114	4,908,786
105 Total (add line 104, columns (B), (D), and (E))					7,776,736

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities Complete only if the organization is a controlling organization as defined in section 512(b)(13)

				Yes	No
106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

				Yes	No
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

		Yes	No
108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			No

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	***** Signature of officer	2009-02-24 Date
	John W Hess Executive Director Type or print name and title	

Paid Preparer's Use Only	Preparer's signature	Dave Magruder	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4	JDS PROFESSIONAL GROUP CPAS 5670 GREENWOOD PLAZA BLVD SUITE 200 ENGLEWOOD, CO 80111			EIN
					Phone no

SCHEDULE A
(Form 990 or 990EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2007

Department of the Treasury
Internal Revenue Service

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization
Geological Society of America Inc

Employer identification number

13-1659623

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Craig Schiffries PO Box 9140 Boulder, CO 80301	Administration 40 00	102,500	3,000	0
Kay Dragon PO Box 9140 Boulder, CO 80301	Controller 40 00	106,033	7,952	0
Ann Cairns PO Box 9140 Boulder, CO 80301	Dir Comm , Mkt 40 00	101,318	7,599	0
Jon Olsen PO Box 9140 Boulder, CO 80301	Dep Exec Dir 40 00	107,826	8,187	0
Todd Berggren PO Box 9140 Boulder, CO 80301	IT Director 40 00	106,182	7,904	0
Total number of other employees paid over \$50,000	25			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Barbara Echohawk 2307 Tucson Court Longmont, CO 80501	Liaison for Sec/Div	120,900
Total number of others receiving over \$50,000 for professional services		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶\$ _____(Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	1		No
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	Yes	
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)</p>	3a	Yes	
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b	Yes	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a	Yes	
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		No
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		No
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ _____</p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ _____</p>			

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
- Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					<input type="checkbox"/>

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	889,684	913,467	691,774	783,200	3,278,125
16 Membership fees received	570,282	604,590	551,692	754,560	2,481,124
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	7,420,485	7,069,221	4,581,715	4,492,272	23,563,693
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,269,725	1,002,137	490,815	239,622	3,002,299
19 Net income from unrelated business activities not included in line 18		217,160	106,534		323,694
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	21,460	42,036	9,337	59,555	132,388
23 Total of lines 15 through 22	10,171,636	9,848,611	6,431,867	6,329,209	32,781,323
24 Line 23 minus line 17	2,751,151	2,779,390	1,850,152	1,836,937	9,217,630
25 Enter 1% of line 23	101,716	98,486	64,319	63,292	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts		26b	
c Total support for section 509(a)(1) test Enter line 24, column (e)		26c	0
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____		26d	
e Public support (line 26c minus line 26d total)		26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return.** Enter the sum of such amounts for each year
 (2006) _____ (2005) _____ (2004) _____ (2003) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year
 (2006) _____ 575,202 (2005) _____ (2004) _____ (2003) _____

c Add Amounts from column (e) for lines 15 _____ 3,278,125 16 _____ 2,481,124 17 _____ 23,563,693 20 _____ 0 21 _____ 0	27c	29,322,942
d Add Line 27a total _____ and line 27b total _____ 575,202	27d	575,202
e Public support (line 27c total minus line 27d total)	27e	28,747,740
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f	32,781,323
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	87.70 00 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	9.16 00 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

(a)
Affiliated group
totals**(b)**
To be completed
for all electing
organizations

36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	0	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38	Total lobbying expenditures (add lines 36 and 37)	38		
39	Other exempt purpose expenditures	39		
40	Total exempt purpose expenditures (add lines 38 and 39)	40		
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41		
42	Grassroots nontaxable amount (enter 25% of line 41)	42		
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount
		0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Additional Data

Software ID: 07000211
Software Version: 2007v2.10
EIN: 13-1659623
Name: Geological Society of America Inc

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a Utilities	43a	67,420		67,420	
b Taxes	43b	52,137	98	52,039	
c Support of GSAF	43c	357,368		357,368	
d Student volunteer stipends	43d	8,325	8,325		
e Software	43e	24,668	14,401	10,267	
f Small hardware	43f	13,993	242	13,751	
g Security	43g	16,198	16,198		
h Rental property costs	43h	3,820		3,820	
i Professional development	43i	10,809	5,703	5,106	
j Prior year expense	43j	-1,251	2,687	1,436	
k Other Contra accounts	43k	-2,978,537	2,978,537		
l Office equipment	43l	13,020	13,020		
m Miscellaneous	43m	47,518	36,408	11,110	
n Insurance	43n	77,780	13,582	64,198	
o Fundraising expenses	43o		9,637		9,637
p Fund disbursement	43p	2,400	2,400		
q Dues & subscriptions	43q	81,789	12,115	69,674	
r Convention center services	43r	101,381	92,180	9,201	
s Contra to DFD & PPD	43s	-469,029	468,630	-399	
t Consultant/C-Labor/Services	43t	1,238,461	976,921	261,540	
u Catering & entertainment	43u	218,588	170,023	48,565	
v Billable overhead	43v	16,620	167,209	-150,589	
w Bank fees/Credit card fees	43w	166,403		166,403	
x Bad debts	43x	11,566	11,566		
y AV services	43y	92,578	90,957	1,621	
z Allocations	43z	44,041	1,382,992	-1,338,951	
aa Advertising & promotions	43aa	91,666	73,606	18,060	
ab Admin/Investment Fees	43ab	51,204		51,204	
ac Abstracts	43ac	136,762	136,762		

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Adrienne McNamara PO Box 9140 Boulder, CO 80301	Legal Counselor 0 00	0		
Margaret Davino PO Box 9140 Boulder, CO 80301	Legal Consult 0 00	0		
Claudia I Mora PO Box 9140 Boulder, CO 80301	Councilor 0 00	0		
Murray W Hitzman PO Box 9140 Boulder, CO 80301	Councilor 0 00	0		
Brian R Pratt PO Box 9140 Boulder, CO 80301	Councilor 0 00	0		
G Randy Keller PO Box 9140 Boulder, CO 80301	Councilor 0 00	0		
Dr Diane R Smith PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Jerome V DeGraff PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Dr David Applegate PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Dr Jill S Schneiderman PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Dr Nancy J McMillan PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Dr John W Geissman PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Jacqueline E Huntoon PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Mark Cloos PO Box 9140 Boulder, CO 80301	Int'l Secretary 3 00	0		
Dr Darrel S Cowan PO Box 9140 Boulder, CO 80301	Councilor 3 00	0		
Robbie Rice Gries PO Box 9140 Boulder, CO 80301	Treasurer 3 00	0		
Dr Judith Totman Parrish PO Box 9140 Boulder, CO 80301	President 3 00	0		
Jean M Bahr PO Box 9140 Boulder, CO 80301	Vice President 3 00	0		
Dr John M Sharp Jr PO Box 9140 Boulder, CO 80301	Past President 3 00	0		
John W Hess PO Box 9140 Boulder, CO 80301	Executive Direc 40 00	186,107	16,315	

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
103(c)	Other revenue related to the exempt purpose of the Organization
102	Sale of geological publications
94	Membership dues for membership in GSA
93(c)	Revenue received from Sections and Divisions of the GSA including section meetings
93(b)	Revenue received from annual and other meetings of GSA
93(a)	Revenue and support from educating the general public and schools, including providing educational materials

TY 2007 Cash Grants Paid Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Class of Activity	Recipient's name	Address	Amount	Relationship
Grant Awards	Various	On File On File, CO 80301	1,045,632	

TY 2007 Gain/Loss from Sale of Public Securities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Gross Sales Price: 5,415,225

Basis: 3,543,503

Sales Expenses:

Total (net):

TY 2007 Investments - Securities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	Book Value	Cost/FMV
Temporary Cash Investments	388,830	F
Ltd Parntership-Hedge Funds	3,880,276	F
International Equity Funds	3,450,038	F
Floating Interest Rate Bank Fund	1,865,471	F
Corporate Stocks	10,833,696	F
Corporate Bonds	1,926,242	F
Commodity Funds	1,789,924	F

TY 2007 Land etc. Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Land	428,065		428,065
Improvements	89,557	89,557	
Buildings	3,799,288	1,818,464	1,980,824
Furniture and Fixtures	1,486,758	1,075,516	411,242
Automobiles / Transportation Equipment	9,187	9,187	

TY 2007 Other Changes in Net Assets Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	Amount
Unrealized gains on investments	-2,999,340
Unbooked passthrough income	-93,283

TY 2007 Other Expenses Included Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	Amount
Cost of Goods Sold	3,026,440

TY 2007 Other Liabilities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	Beginning of Year Amount	End of Year Amount
Gift Certificates	2,163	
Self Fnd Med Ins Reserve	2,591	
Bond Interest Payable	1,341	6,420

**TY 2007 Other Revenues
Not Included Schedule**

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	Amount
Unbooked Passthrough Income	93,283
Cost of Goods Sold	-3,026,440

TY 2007 Sales Of Inventory Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)
Advertising	327,553		327,553
Publications	4,109,830	3,026,440	1,083,390

TY 2007 Contractor Compensation Explanation

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Contractor	Explanation
Barbara Echohawk	

TY 2007 Employee Compensation Explanation

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Employee	Explanation
Craig Schiffries	
Kay Dragon	
Ann Cairns	
Jon Olsen	
Todd Berggren	

TY 2007 Other Income Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Description	2006	2005	2004	2003	Total
Other income	21,460	42,036	9,337	59,555	132,388

TY 2007 Scholarship Award Statement

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 07000211

Software Version: 2007v2.10

Statement: Selection for participation in the GSA Congressional Science Fellow Program is performed by committee based upon criteria believed beneficial to fulfillment of the following program goals: 1. Make practical contributions to more effective use of scientific knowledge in government. 2. Obtain first-hand experience and educate the earth science community about public policy process. 3. Broaden the perspective of the earth science community and the governmental community regarding the value of such mutually beneficial interactions. Candidates are expected to show exceptional competence in some area of earth sciences, possess a broad professional background, be cognizant of many matters outside their particular area and have a strong interest and some experience in applying scientific knowledge toward the solution of societal issues. Candidates are expected to be articulate, literate, adaptable and interested in working on a range of public policy issues. The Geological Society of America also supports an annual research awards program. The primary role of the program is to provide partial support of masters and doctoral thesis research for graduate students. Recipients are selected by committee based on relative merit in reference to the following guidelines; possibility of scientific breakthrough, anticipated general interest in results, research methods used, presentation of objectives and importance of proposed research and planned procedure detailed sufficiently to convey the chance for success.

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2006

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2006 calendar year, or tax year beginning 07-01-2006 and ending 06-30-2007

- B Check if applicable
Address change
Name change
Initial return
Final return
Amended return
Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Geological Society of America Inc
Number and street (or P O box if mail is not delivered to street address): PO Box 9140
City or town, state or country, and ZIP + 4: Boulder, CO 80301

D Employer identification number: 13-1659623
E Telephone number: (303) 357-1019
F Accounting method: [] Cash [x] Accrual [] Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: www.geosociety.org

J Organization type (check only one) [x] 501(c)(3) (insert no) [] 4947(a)(1) or [] 527

K Check here [] if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 11,936,674

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? [] Yes [x] No
H(b) If "Yes" enter number of affiliates
H(c) Are all affiliates included? [] Yes [] No
H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [x] No
I Group Exemption Number
M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events, Gross sales of inventory, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets at beginning and end of year.

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22a Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22b Other grants and allocations (attach schedule) (cash \$ 1,023,046 noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b	1,023,046	1,023,046		
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	204,316	76,312	128,004	
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b				
c Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26 Salaries and wages of employees not included on lines 25a, b and c	26	2,078,134	776,282	1,301,852	
27 Pension plan contributions not included on lines 25a, b and c	27	213,607		213,607	
28 Employee benefits not included on lines 25a - 27	28	246,214	192,162	54,052	
29 Payroll taxes	29	162,437	63,019	99,418	
30 Professional fundraising fees	30				
31 Accounting fees	31	29,997		29,997	
32 Legal fees	32	24,819	6,368	18,451	
33 Supplies	33				
34 Telephone	34	4,088	4,088		
35 Postage and shipping	35	108,253	86,284	21,969	
36 Occupancy	36	47,917	42,881	5,036	
37 Equipment rental and maintenance	37	53,426	13,892	39,534	
38 Printing and publications	38	180,080	171,134	8,946	
39 Travel	39	564,652	421,595	143,057	
40 Conferences, conventions, and meetings	40	335,665	335,665		
41 Interest	41	18,537		18,537	
42 Depreciation, depletion, etc (attach schedule)	42	153,022	17,166	135,856	
43 Other expenses not covered above (itemize)					
a See Additional Data Table	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	7,225,527	5,141,251	2,075,609	8,667

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ The Geological Society of America was founded to advance the science of geology All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a Scholarships for research and study of geology to various recipients awarded by independent selection. Most awards are \$2,000 or less. (Grants and allocations \$ 1,023,046) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	1,023,046
b The membership services program includes the cost of maintaining the society's membership and the cost of the employment service provided for the benefit of members. (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	743,316
c Education and outreach programs - involvement in heightening public understanding of and appreciation for geosciences by working with scientists, teachers and the general public, plus, programs and meetings run by sections and divisions. (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	1,156,262
d The society sponsors an annual meeting for members in the fall and smaller meetings in the spring. Members attend discussions and conferences concerning topics in the field of geology. (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	2,218,627
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	5,141,251

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		74,341	45	64,597	
	46 Savings and temporary cash investments			46		
	47a Accounts receivable	47a	326,717			
	b Less allowance for doubtful accounts	47b	67,456	165,599	47c	259,261
	48a Pledges receivable	48a	71,240			
	b Less allowance for doubtful accounts	48b			48c	71,240
	49 Grants receivable				49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)				50b	
	51a Other notes and loans receivable (attach schedule)	51a				
	b Less allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use		901,323		52	683,166
	53 Prepaid expenses and deferred charges		448,493		53	372,057
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		22,480,661		54a	25,874,693
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV				54b	
55a Investments—land, buildings, and equipment basis	55a					
b Less accumulated depreciation (attach schedule)	55b			55c		
56 Investments—other (attach schedule)				56		
57a Land, buildings, and equipment basis	57a	5,617,924				
b Less accumulated depreciation (attach schedule)	57b	2,843,260	2,886,334	57c	2,774,664	
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)			155,223	58	64,001	
59 Total assets (must equal line 74) Add lines 45 through 58		27,111,974		59	30,163,679	
Liabilities	60 Accounts payable and accrued expenses		605,196	60	798,327	
	61 Grants payable			61		
	62 Deferred revenue		1,873,143	62	1,874,542	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63		
	64a Tax-exempt bond liabilities (attach schedule)		606,288	64a	435,000	
	b Mortgages and other notes payable (attach schedule)			64b		
	65 Other liabilities (describe <input type="checkbox"/> _____)		6,411	65	6,095	
66 Total liabilities Add lines 60 through 65		3,091,038		66	3,113,964	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted		13,788,179	67	15,847,719	
	68 Temporarily restricted		6,348,372	68	7,317,611	
	69 Permanently restricted		3,884,385	69	3,884,385	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70 Capital stock, trust principal, or current funds			70		
	71 Paid-in or capital surplus, or land, building, and equipment fund			71		
	72 Retained earnings, endowment, accumulated income, or other funds			72		
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)		24,020,936	73	27,049,715	
	74 Total liabilities and net assets / fund balances Add lines 66 and 73		27,111,974	74	30,163,679	

Part VI Other Information (continued)

Form 990 (2006) Part VI Other Information (continued)
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)?
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2006
91a The books are in care of
91b 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?

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year **92**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Sections & divisions					529,890
b Meetings					2,206,517
c Education & outreach					398,789
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					570,282
95 Interest on savings and temporary cash investments			14	22,185	
96 Dividends and interest from securities			14	1,247,540	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property			16	15,600	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	740,374	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory	541800	259,971			1,336,157
103 Other revenue a <u>Other income</u>					21,460
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		259,971		2,025,699	5,063,095
105 Total (add line 104, columns (B), (D), and (E))					7,348,765

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI **Information Regarding Transfers To and From Controlled Entities** *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	Yes	No
		No

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

***** Signature of officer	2008-09-22 Date
John W Hess Secretary Type or print name and title	

Paid Preparer's Use Only	Preparer's signature Lynn Barczuk	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 JDS PROFESSIONAL GROUP CPAS 5670 GREENWOOD PLAZA BLVD SUITE 200 ENGLEWOOD, CO 80111			EIN Phone no (303) 771-0123

**SCHEDULE A
(Form 990 or
990EZ)**

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2006

Department of the
Treasury
Internal Revenue
Service

Name of the organization
Geological Society of America Inc

Employer identification number

13-1659623

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Pat Kilner PO Box 9140 Boulder, CO 80301	Membership Dir 40	86,626	12,465	0
Kay Dragon PO Box 9140 Boulder, CO 80301	Dir of Finance 40	86,659	16,722	0
Gary Lewis PO Box 9140 Boulder, CO 80301	E&O Director 40	89,290	16,766	0
Jon Olsen PO Box 9140 Boulder, CO 80301	Publication Dir 40	92,032	12,776	0
Todd Berggren PO Box 9140 Boulder, CO 80301	IT Director 40	99,935	20,842	0
Total number of other employees paid over \$50,000	13			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Barbara Echohawk 2307 Tucson Court Longmont, CO 80501	Liaison for Sec/Div	70,200
Total number of others receiving over \$50,000 for professional services		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		

Part III Statements About Activities (See page 2 of the instructions.)**Yes** **No**

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ►\$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		No
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing property?		No
b	Lending of money or other extension of credit?		No
c	Furnishing of goods, services, or facilities?		No
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	Yes	
e	Transfer of any part of its income or assets?		No
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	Yes	
b	Did the organization have a section 403(b) annuity plan for its employees?	Yes	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement		No
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		No
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	Yes	
b	Did the organization make any taxable distributions under section 4966?		No
c	Did the organization make a distribution to a donor, donor advisor, or related person?		No
d	Enter the total number of donor advised funds owned at the end of the tax year ► _____		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____		
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____		

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	913,467	691,774	783,200	604,564	2,993,005
16 Membership fees received	604,590	551,692	754,560	632,880	2,543,722
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	7,069,221	4,581,715	4,492,272	1,469,253	17,612,461
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,002,137	490,815	239,622	377,144	2,109,718
19 Net income from unrelated business activities not included in line 18	217,160	106,534		8,845	332,539
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	42,036	9,337	59,555	9,690	120,618
23 Total of lines 15 through 22	9,848,611	6,431,867	6,329,209	3,102,376	25,712,063
24 Line 23 minus line 17	2,779,390	1,850,152	1,836,937	1,633,123	8,099,602
25 Enter 1% of line 23	98,486	64,319	63,292	31,024	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts		26b	
c Total support for section 509(a)(1) test Enter line 24, column (e)		26c	0
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____		26d	
e Public support (line 26c minus line 26d total)		26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return.** Enter the sum of such amounts for each year
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 17,612,461 20 _____ 0 21 _____ 0	27c	23,149,188
d Add Line 27a total _____ and line 27b total _____	27d	
e Public support (line 27c total minus line 27d total)	27e	23,149,188
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f	25,712,063
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	9003 00 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	821 00 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)		
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount
		0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Additional Data

Software ID: 06000146
Software Version: 2006v4.1
EIN: 13-1659623
Name: Geological Society of America Inc

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a Workers compensation	43a	16,320		16,320	
b Utilities	43b	138,038	33,724	104,314	
c Support of GSAF	43c	371,683		371,683	
d Software	43d	10,711		10,711	
e Small hardware	43e	9,744		9,744	
f Service dept overhead	43f	24,078	20,574	3,504	
g Professional development	43g	13,157	3,195	9,962	
h Overhead allocation	43h	-549,139	847,069	-1,396,208	
i Operating lease expense	43i	95,317		95,317	
j Office supplies	43j	33,399	8,371	25,028	
k Office equipment	43k	15,302	15,302		
l Miscellaneous	43l	82,076	48,365	33,711	
m Management fees	43m	18,968		18,968	
n Maintenance & repair	43n	24,112		24,112	
o Insurance	43o	75,113	11,956	63,157	
p Gifts & decorations	43p	17,011	6,376	10,635	
q Dues & subscriptions	43q	68,546	4,304	64,242	
r Decorator services	43r	113,188	113,188		
s Credit card fees	43s	136,723	3,642	133,081	
t Cost of misc products	43t	89,825	88,149	1,676	
u Contract services	43u	712,395	486,014	226,381	
v Contra to DFD & PPD	43v	-278,799	278,799		
w Consultant fees	43w	76,194	18,126	58,068	
x Catering & entertainment	43x	267,858	234,637	33,221	
y Billable overhead	43y	14,201	110,921	-96,720	
z Bad debts	43z	16,049	16,049		
aa AV services	43aa	94,028	94,028		
ab Advertising & promotions	43ab	57,000	26,166	22,167	8,667
ac Administration fees	43ac	14,219		14,219	

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Dr Diane R Smith PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Jerome V DeGraff PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr David Applegate PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr Jill S Schneiderman PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr Nancy J McMillan PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr John W Geissman PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr Elena Centeno-Garcia PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr Jonathan G Price PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Dr Darrel S Cowan PO Box 9140 Boulder, CO 80301	Councilor 3	0		
Robbie Rice Gries PO Box 9140 Boulder, CO 80301	Treasurer 3	0		

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Dr Judith Totman Parrish PO Box 9140 Boulder, CO 80301	Vice President 3	0		
Dr Stephen G Wells PO Box 9140 Boulder, CO 80301	Past President 3	0		
Dr John M Sharp Jr PO Box 9140 Boulder, CO 80301	President 3	0		
John W Hess PO Box 9140 Boulder, CO 80301	E D/Secretary 40	178,782	25,534	

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
103(b)	Other revenue related to the exempt purpose of the Organization
102	Sale of geological publications
94	Membership dues for membership in GSA
93(c)	Revenue received from Sections and Divisions of the GSA including section meetings
93(b)	Revenue received from annual and other meetings of GSA
93(a)	Revenue and support from educating the general public and schools, including providing educational materials

TY 2006 Cash Grants Paid Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Class of Activity	Recipient's name	Address	Amount	Relationship
Grant Awards	Various	On File On File, CO 80301	1,023,046	

TY 2006 Gain/Loss from Sale of Public Securities Schedule**Name:** Geological Society of America Inc**EIN:** 13-1659623**Software ID:** 06000146**Software Version:** 2006v4.1**Gross Sales Price:** 1,695,197**Basis:** 954,823**Sales Expenses:****Total (net):**

TY 2006 Investments - Securities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Book Value	Cost/FMV
Temporary Cash Investments	544,119	F
Ltd Parntership-Hedge Funds	2,805,094	F
International Equity Funds	4,030,370	F
Floating Interest Rate Bank Fund	2,015,196	F
Corporate Stocks	12,612,400	F
Corporate Bonds	1,939,631	F
Commodity Funds	1,927,883	F

TY 2006 Land etc. Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Land	428,065		428,065
Improvements	89,557	89,557	
Buildings	3,775,406	1,711,752	2,063,654
Furniture and Fixtures	1,315,709	1,032,764	282,945
Automobiles / Transportation Equipment	9,187	9,187	

TY 2006 Other Assets Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Beginning of Year Amount	End of Year Amount
Due From GSA Foundation	155,223	64,001

TY 2006 Other Changes in Net Assets Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Amount
Unrealized gains on investments	1,944,617

TY 2006 Other Expenses Included Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Amount
Cost of Goods Sold	2,672,162

TY 2006 Other Liabilities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Beginning of Year Amount	End of Year Amount
Gift Certificates	2,015	2,163
Self Fnd Med Ins Reserve	2,590	2,591
Bond Interest Payable	1,806	1,341

**TY 2006 Other Revenues
Not Included Schedule**

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	Amount
Cost of Goods Sold	-2,672,162

TY 2006 Sales Of Inventory Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)
Advertising	259,971		259,971
Publications	4,008,319	2,672,162	1,336,157

TY 2006 Tax-Exempt Bond Liabilities Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Item No.	1
Name of Issue	
Purpose	Building Expansion
Amount Outstanding	435000
Unexpended Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	
Repayment Terms	
Interest Rate	
Security	

TY 2006 Contractor Compensation Explanation

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Contractor	Explanation
Barbara Echohawk	

TY 2006 Employee Compensation Explanation

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Employee	Explanation
Pat Kilner	
Kay Dragon	
Gary Lewis	
Jon Olsen	
Todd Berggren	

TY 2006 Other Income Schedule

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Description	2003	2002	2001	2000	Total
Other income	42,036	9,337	59,555	9,690	120,618

TY 2006 Scholarship Award Statement

Name: Geological Society of America Inc

EIN: 13-1659623

Software ID: 06000146

Software Version: 2006v4.1

Statement: Selection for participation in the GSA Congressional Science Fellow Program is performed by committee based upon criteria believed beneficial to fulfillment of the following program goals: 1. Make practical contributions to more effective use of scientific knowledge in government. 2. Obtain first-hand experience and educate the earth science community about public policy process. 3. Broaden the perspective of the earth science community and the governmental community regarding the value of such mutually beneficial interactions. Candidates are expected to show exceptional competence in some area of earth sciences, possess a broad professional background, be cognizant of many matters outside their particular area and have a strong interest and some experience in applying scientific knowledge toward the solution of societal issues. Candidates are expected to be articulate, literate, adaptable and interested in working on a range of public policy issues. The Geological Society of America also supports an annual research awards program. The primary role of the program is to provide partial support of masters and doctoral thesis research for graduate students. Recipients are selected by committee based on relative merit in reference to the following guidelines; possibility of scientific breakthrough, anticipated general interest in results, research methods used, presentation of objectives and importance of proposed research and planned procedure detailed sufficiently to convey the chance for success.