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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

2009

OMB No 1545-0047

Open to Public
Inspection

M LOI	the 2	2009 calendar ye	ar, or tax year beginning 0	1-01-2009 and ending 12-31-2009)				
B Che	ck ıf ap	pplicable Please	C Name of organization American Mathematical Soci	oty		D Employer id	entification number		
┌ Add	ress cha			ety		05-02647			
┌ Nan	ne chan	nge print or	Doing Business As			E Telephone n	umber		
┌ Inıtı	al returi			box if mail is not delivered to street address	ss) Room/suite	(401) 455-			
Г Теп	nınated	Instruc- tions.	201 Charles Street			G Gross receipts	s \$ 33,676,065 		
Г Am∈	ended re	eturn	City or town, state or count	ry, and ZIP + 4		1			
┌ _{App}	lication	pending	Providence, RI 029042294						
		F Na	ime and address of principa	al officer	H(a) Is th	■ is a group retui	rn for		
						ates?	⊤Yes ▼No		
					U/b) Ana a	II -##Ii-+ iII-	ded?		
						II affiliates includ o " attach a list	t (see instructions)		
I Tax	-exemp	pt status 🔽 501(c) (3) 4 (insert no)	7(a)(1) or 527		up exemption n			
J W	ebsit e:	: www ams org							
K Forn	of ora	anization 🔽 Cornor	ation Trust Association	Other 🍽	■ Year of fo	ormation 1888	M State of legal domicile DC		
		Summary	actory react resociation;		= rear or re	materi 1900	- Fotate of legal dofficie Do		
Governance		THE SOCIETY'S	BROAD MISSION IS TO MPLISHED THROUGH P	or most significant activities FURTHER THE INTEREST OF MAT JBLICATIONS, MEETINGS, SERV					
} -									
	2	Check this box 🕨	f the organization disco	ontinued its operations or disposed	of more than	25% of its net	assets		
න් ග	3	Number of voting	members of the governing	body (Part VI, line 1a)		3	3 8		
Activities		•	_	he governing body (Part VI, line 1b)		1		
[[employees (Part V, line 2a)				5 227		
٩			olunteers (estimate if nec	m Part VIII, column (C), line 12 .			5 608 'a 37,357		
				n Form 990-T, line 34	•		b 36,357		
					Pric	or Year	Current Year		
	8	Contributions ar	nd grants (Part VIII, line 1	h)		3,785,549	3,428,086		
ā	9	Program service	e revenue (Part VIII, line 2	g)		21,218,466	21,339,654		
Revenue	10	Investment inco	ome (Part VIII, column (A)	, lines 3, 4, and 7d)		1,838,013	2,953,013		
#	11		Part VIII, column (A), lıne		0	0			
	12			ust equal Part VIII, column (A), line		26,842,028	27,720,753		
	13			column (A), lines 1-3)		447,019	516,248		
	14	Benefits paid to	or for members (Part IX, c	olumn (A), line 4)		0	0		
, de	15		compensation, employee b	enefits (Part IX, column (A), lines 5	-	16.136.160	16 517 020		
Expenses	16-	10)	duning from (Double IV only	(A) line 11 a)		16,136,169	16,517,038		
Σ Ω	16a			umn (A), line 11e)		U	0		
ă	ь 17		penses (Part IX, column (D), line	s 11a-11d, 11f-24f)		8,251,809	7,714,927		
	18			qual Part IX, column (A), line 25)		24,834,997	24,748,213		
	19	•	·	rom line 12		2,007,031	2,972,540		
ው ው			•		Beginnin	g of Current			
Not Assets or Fund Balances	_				<u> </u>	rear ear	End of Year		
Ass Ba	20					78,481,615	93,075,215		
<u> </u>	21 22			21 from line 20		20,462,738	19,126,997		
	t III	Signature B		21 110111111111111111111111111111111111		58,018,877	73,948,218		
ı dı				imined this return, including accompanying	schedules and s	statements, and to	the best of my knowledge		
				ion of preparer (other than officer) is based					
Sign Here		****** Signature of officer Date							
		$\frac{\text{EMILY D RILEY O}}{\text{Type or print nain}}$	CHIEF FINANCIAL OFFICER						
		<u> </u>	and title	D-1-	`hook of	Drama and	of upg purchas		
	Preparer's Date				Check If elf-	Preparer's ident	reparer's identifying number see instructions)		
		signature		empolyed •					
	rer's	signature	was be provided in	e	mpolyed 🕨 🦵				
Paid Prepa		Firm's name (or you if self-employed),		e	empolyed 🕨 🦵	EIN Þ			
		signature Firm's name (or you	<u> </u>	e	empolyed 🕨 🦵	EIN P			

4d

4e

(Expenses \$

Part III Statement of Program Service Accomplishments

Other program services (Describe in Schedule O)

Total program service expenses▶\$

648,423

including grants of \$

21,614,132

- Briefly describe the organization's mission
- THE AMERICAN MATHEMATICAL SOCIETY, FOUNDED IN 1888 TO FURTHER THE INTERESTS OF MATHEMATICAL SCHOLARSHIP AND RESEARCH, SERVE THE INTERNATIONAL MATHEMATICAL COMMUNITY THROUGH ITS PUBLICATIONS, MEETINGS, ADVOCACY AND OTHER PROGRAMS, WHICH (A) PROMOTE MATHEMATICAL RESEARCH AND ITS USES, (B) ENCOURAGE AND PROMOTE THE TRANSMISSION OF MATHEMATICAL UNDERSTANDINGS AND SKILLS TO ENSURE THE CONTINUED VITALITY OF THE PROFESSION, (C) SUPPORT MATHEMATICAL EDUCATION AT ALL LEVELS, (D) ADVANCE THE STATUS OF THE PROFESSION OF MATHEMATICS, ENCOURAGING AND FACILITATING FULL PARTICIPATION OF ALL INDIVIDUALS, AND, (E) FOSTER AN AWARENESS AND APPRECIATION OF MATHEMATICS AND ITS CONNECTIONS TO OTHER DISCIPLINES AND EVERYDAY LIFE

_	the prior Form 990	or 990-EZ?	· · · ·	· · · · · · ·		Yes 🔽 No
	If "Yes," describe	these new services on Sc	hedule O			
3	Did the organization services?	on cease conducting, or m	nake significar	nt changes in how it cond		_ Yes ✓ No
	If "Yes," describe	these changes on Schedu	ıle O			
4	Section 501(c)(3)		ons and secti	on 4947(a)(1) trusts are	rgest program services by ex required to report the amoui rvice reported	
4a	(Code) (Expenses \$	15,129,893	ıncludıng grants of \$) (Revenue \$	22,008,937)
	undergraduate course database, the premis	e material, proceedings of mee er mathematical research tool, o	tings in current to containing citation	opical areas and high level resense and reviews of mathematic	eral mathematical interest, graduat earch monographs This also include al literature dating back to 1940 Ir ations The Society published 96 no	es the Mathematical Reviews 1 2009, the American
4b	(Code) (Expenses \$	4,729,172	ıncludıng grants of \$	516,248) (Revenue \$	1,118,769)
	endowment supporte high school outreach	ed conferences, surveys of the	profession, endov programs The So	vment supported prizes, award ciety has more than 30,000 inc	atical community, such as employr ds, scholarships and fellowships for dividual and institutional members,	achievements in mathematics,
4c	(Code) (Expenses \$	1,106,644	ıncludıng grants of \$) (Revenue \$	990,503)
	addıtıon, eight to nin	e sectional meetings are held ii	n the four regions	of the US each year The Jo	nd co-sponsored with the Mathema oint Mathematics Meeting, held in V eld in the spring and four in the fall	Vashington, D C in 2009, was

) (Revenue \$

Part IV	Checklist	of Red	uired	Sche	dules
---------	-----------	--------	-------	------	-------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No	Į	ļ	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b	Yes	
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 U S ? If "Yes," complete Schedule F, Part II	15	Yes	
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 U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

orm	990 (2009)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
h	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		.,	
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
Ь	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?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12-	Section 4947/aV/1) pap exempt charitable trusts. Is the organization filing Form 990 in liquid Form 19412	120		

 \boldsymbol{b} . If "Yes," enter the amount of tax-exempt interest received or accrued during the

year

12b

PROVIDENCE, RI 029042294

(401) 455-4000

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management					
			Yes	No		
4_	Fortantha number of until a mambar of the common hadro					
1a L	Enter the number of voting members of the governing body	-				
ь		-				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		No		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο		
6	Does the organization have members or stockholders?	6	Yes			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
b	Each committee with authority to act on behalf of the governing body?	8b	Yes			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal					
Re	evenue Code.)					
			Yes	No		
	Does the organization have local chapters, branches, or affiliates?	10a		No		
b	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?	10b				
11	L Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?					
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12b		No		
c	to conflicts?	12c		No		
13	Does the organization have a written whistleblower policy?	13	Yes	110		
14	Does the organization have a written document retention and destruction policy?	14	Yes			
15	Did the process for determining compensation of the following persons include a review and approval by		1 63			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		.,			
	The organization's CEO, Executive Director, or top management official	15a	Yes			
D	Other officers or key employees of the organization	15b	Yes			
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No		
b	b 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?					
Se	ection C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed ►DC					
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					
19	Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of					
20	interest policy, and financial statements available to the public. See Additional Data Table	ha	. n. = = £ : -	. •		
20	State the name, physical address, and telephone number of the person who possesses the books and records of t EMILY RILEY CFO 201 CHARLES ST	ne orga	ınızatıoı	1 F		

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	r, dırector, trustee	or key employee							
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)				I		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total	0		247,223
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization \$29			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5	Yes	
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶0			
		F	orm 990	(2009)

Page **8**

Form 990 (2009)

Form 990 (2009) Part VIII Statement of Revenue								
Part V	/++ 1	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ots	1a	Federated cam	paigns 1a					
E 전	ь	Membership du	es 1b	2,383,158				
ું. કું.	c	Fundraising eve	ents 1c					
<u>≅</u> ,≅	d		rations 1d					
έE	e	Government grants		621,277				
uatio er:	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	423,651				
ē	g	Noncash contri	butions included in					
Contributions, gifts, grants and other similar amounts	h				3,428,086			
		- Totali Add Illics		Business Code	, ,			
Program Service Revenue	2a	PUBLICATIONS		541,900	18,888,343	18,888,343		
ex. ex	ь	MEETINGS	_	541,800	990,503	953,146	37,357	
ъ. П	c	SALE OF SERVICE-	OTHER MATH PUBS	541,900	342,039	342,039	,	
E.	d	PROFESSIONAL PR	OGRAMS/SERVICES	541,900	1,118,769	1,118,769		
ð E	e							
្ន	f	All other progra	am service revenue					
ξ	g	Total. Add lines	 2a-2f		21,339,654			
	3		ome (including dividend					
			ar amounts)	⊢	2,953,013			2,953,013
	4		stment of tax-exempt bond p	· · · · · · · · · · · · · · · · · · ·	0			
	5	Royalties	(ı) Real	(II) Personal	0			
	6a	Gross Rents	(I) Keal	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental incoi	ll me or (loss)	+				
		(i) Securities		(II) O ther				
	7a	Gross amount from sales of assets other than inventory	5,702,073	635				
	Ь	Less cost or other basis and	5,955,312					
	c	sales expenses Gain or (loss)	-253,239	635				
	d	Net gaın or (los	s)	►	0			-252,604
<u> </u>	8a	Gross income f events (not inc	_					
Other Revenue		\$of contributions See Part IV , lin	s reported on line 1c)					
늅			a	0				
돌	р С		penses b (loss) from fundraising e	avents 🕨	0			
-	9a		rom gaming activities ie 19					
	b c		penses b (loss) from gaming activ	(Ities	0			
		Gross sales of returns and allo	inventory, less owances .					
	ь	Less cost of g	a oods sold b					
	С		(loss) from sales of inve		0			
	11a	Miscellaneous	s kevenue	Business Code				
	ь							
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		0			
	12	Total revenue.	See Instructions	•		21 202 207	סק סבק	2 700 400
	1				27,720,753	21,302,297	37,357	2,700,409

	990 (2009)				Page 10
Part					
	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
	ll other organizations must complete column (A) but are not required to		(B), (C), and (B)	(D).	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	263,339	263,339		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	202,009	202,009		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	50,900	50,900		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,416,231	832,658	583,573	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	11,443,825	10,596,446	805,594	41,785
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,065,025	997,388	63,667	3,970
9	Other employee benefits	1,681,618	1,383,135	294,780	3,703
10	Payroll taxes	910,339	816,722	†	3,197
11	Fees for services (non-employees)		,:22	12,120	
 a	Management	0			
h	Legal	20,980	14,008	6,972	_
c	Accounting	135,648	11,000	135,648	
d	Lobbying	0		133,040	
e	Professional fundraising See Part IV, line 17	0			
	Investment management fees	29,953		30.053	
f		,	200.424	29,953	
g	Other	425,900	208,434	 	4.704
12	Advertising and promotion	49,415	47,714	 	1,701
13	Office expenses	2,733,137	2,663,311	63,515	6,311
14	Information technology	0	505.400		
15	Royalties	506,183	506,183	+ + +	
16	Occupancy	591,668	501,053	' 	
17 18	Travel	550,917	363,747	187,170	
	state, or local public officials	0			
19	Conferences, conventions, and meetings	438,706	438,706		
20	Interest	64,635			64,635
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	559,969	388,141	 	
23	Insurance	157,845	130,186	27,659	
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)				
а	SERVICE CONTRACTS	277,461	167,429	110,032	
b	CC PROCESSING FEES	163,481	163,481		
c	EXPENDABLE EQUIPMENT	299,626	249,305	50,321	
d	MISCELLANEOUS	268,830	189,264	79,482	84
e	JOURNAL DIGITIZATION & EDITING	280,392	280,392	· ·	_
f	All other expenses	160,181	160,181	 	
25	Total functional expenses. Add lines 1 through 24f	24,748,213	21,614,132	 	125,386
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	2.,, 10,213	22,021,132	5,530,633	123,300
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet						
					(A) Beginning of year		(B) End of year	
	1	Cash—non-interest-bearing			1,263,610	1	474,913	
	2	Savings and temporary cash investments			16,007,397	2	14,145,500	
	3	Pledges and grants receivable, net			219,901	3	175,343	
	4	Accounts receivable, net			803,131	4	568,773	
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	rent and former officers, directors, trustees, key employees, and d employees Complete Part II of					
		Schedule L				5		
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of	4958(f)(1)) and					
		Schedule L				6		
ssets	7	Notes and loans receivable, net				7		
8	8	Inventories for sale or use			1,271,938	8	1,408,873	
⋖	9	Prepaid expenses and deferred charges			2,180,415	9	2,114,167	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	12,926,586				
	ь	Less accumulated depreciation	10b	7,833,403	4,532,533	10c	5,093,183	
	11	Investments—publicly traded securities		52,202,690	11	69,094,463		
	12	Investments—other securities See Part IV, line 11		12				
	13	Investments—program-related See Part IV, line 11		13				
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11			15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)			78,481,615	16	93,075,215	
	17	Accounts payable and accrued expenses .			3,874,379	17	3,304,254	
	18	Grants payable				18		
	19	Deferred revenue			12,243,494	19	11,279,588	
	20	Tax-exempt bond liabilities				20		
<u>ē</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .			21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	Payables to current and former officers, directors, trustees, key					
ä		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties				23		
	24	Unsecured notes and loans payable to unrelated third parties				24		
	25	Other liabilities Complete Part X of Schedule D	•		4,344,865	25	4,543,155	
	26	Total liabilities. Add lines 17 through 25			20,462,738	26	19,126,997	
Ş		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e Ti	nes 27				
Fund Balance	l	through 29, and lines 33 and 34.			40.074.047		00 0 40 405	
<u> </u>	27	Unrestricted net assets			49,371,817		63,849,195	
ă	28	Temporarily restricted net assets		4,054,666		5,346,374		
Ĭ	29	Permanently restricted net assets	_	_	4,592,394	29	4,752,649	
ヹ		Organizations that do not follow SFAS 117, check here ► are	nd com	plete				
٥	30	lines 30 through 34. Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
}	32	Retained earnings, endowment, accumulated income, or other fu				32		
	33	Total net assets or fund balances	411U S		58,018,877	33	73,948,218	
Net								
l	34	Total liabilities and net assets/fund balances			78,481,615	34	93,075,215	

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

h

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

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection

Name of the organization American Mathematical Society **Employer identification number**

		05-0264797										
Par	tΙ	Reason for Public Charity Status (All organizations must complete this part.) See instruc	tions									
The o	rganı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)										
1		A church, convention of churches, or association of churches section 170(b)(1)(A)(i).										
2	\Box	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5	Г	An organization operated for the benefit of a college or university owned or operated by a governmental unit	describe	- d ın								
		section 170(b)(1)(A)(iv). (Complete Part II)										
6	\sqcap	A federal, state, or local government or governmental unit described in section $170(b)(1)(A)(v)$.										
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(vi) (Complete Part II)	e general	public								
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)										
9	굣	An organization that normally receives (1) more than 331/3% of its support from contributions, membershi	p fees, ar	nd gros	ss							
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from	om busine	esses								
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
10	\sqcap	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	_	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See sectified box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d		a)(3).	Check							
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more di other than foundation managers and other than one or more publicly supported organizations described in s section 509(a)(2)	•	•								
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supcheck this box	porting o	rganız	ation,							
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?	i									
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)		Yes	No							
		and (III) below, the governing body of the the supported organization?	11g(i)		Νo							
		(ii) a family member of a person described in (i) above?	11g(ii)		Νo							
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		Νo							

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	col (i) listed in		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga	(vii) A mount of support?	
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
_	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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.)

Se	ection A. Public Support			•			
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,276,636	3,332,401	2,926,548	3,785,549	3,428,086	16,749,22
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	19,147,040	19,725,816	20,587,566	21,218,466	21,417,800	102,096,68
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	22,423,676	23,058,217	23,514,114	25,004,015	24,845,886	118,845,90
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	1,240	42,160	5,536	3,622	5,224	57,78
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the	0	0				
c	year Add lines 7a and 7b	1,240	42,160	5,536	3,622	5,224	57,78
8	Public Support (Subtract line 7c from line 6)	,	,		,	·	118,788,12
Se	ection B. Total Support		l.			I	
	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	beginning in)	22,423,676	23,058,217	23,514,114	25,004,015	24,845,886	118,845,90
9 L0a	A mounts from line 6 Gross income from interest,	22,423,070	23,030,217	23,314,114	23,004,013	24,043,000	110,043,90
·ou	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,970,208	2,472,027	3,283,489	2,436,644	2,953,013	13,115,38
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	1,970,208	2,472,027	3,283,489	2,436,644	2,953,013	13,115,38
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11 and 12)	24,393,884	25,530,244	26,797,603	27,440,659	27,798,899	131,961,28
14	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) organ	ization, ▶
Se	ction C. Computation of Pub						
15	Public Support Percentage for 200			13 column (f))		15	90 017 %
16	Public support percentage from 20	08 Schedule A, Pa	art III, line 15			16	90 620 %

15	90 017	%
16	90 620	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17 18

17	9 939	%
18	9 340	%

19a 33 1/3% support tests—2009. 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

33 1/3% support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 05-0264797

Name: American Mathematical Society

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JOHN M FRANKS TREASURER	3 0	X		X				0	0	0
Carol S Wood	2 0	Х						0	0	0
Trustee Linda Keen										
Associate Treasurer	3 0	Х		Х				0	0	0
Eric M Friedlander Trustee	2 0	Χ						0	0	0
John B Conway	2 0	Х						0	0	0
Trustee KAREN VOGTMANN	2.0	v						0	0	0
TRUSTEE	2 0	X						U	0	U
Ronald J Stern Trustee	2 0	Χ						0	0	0
George Andrews President	20 0	X		X				0	0	0
Constance W Pass Chief Financial Officer	40 0			X				135,658	0	25,708
James G Glimm Immediate Past President	2 0			Χ				0	0	0
ROBERT J DAVERMAN SECRETARY	25 0			Х				105,376	0	0
DONALD E MCCLURE Executive Director	40 0			X				269,267	0	8,829
Susan J Friedlander Associate Secretary Matthew Miller	3 0			Χ				0	0	0
Associate Secretary	3 0			Χ				0	0	0
Michel L Lapidus Associate Secretary	3 0			Х				0	0	0
Robert L Bryant Vice President	1 0			Χ				0	0	0
BERND STURMFELS VICE PRESIDENT	1 0			Х				0	0	0
Steven H Wientraub Associate Secretary	3 0			Х				0	0	0
Frank Morgan Vice President	1 0			Χ				0	0	0
Samuel M Rankın Associate Executive Director	40 0				Χ			202,574	0	34,092
Gary G Brownell DEPUTY Executive Director	40 0				X			194,473	0	25,024
Elizabeth H Huber Associate Executive Director	40 0				Χ			155,953	0	27,463
Graeme Fairweather Executive Editor	40 0				X			211,818	0	19,996
ELLEN J MAYCOCK ASSOCIATE EXECUTIVE DIRECTOR	40 0					X		138,412	0	21,449
THOMAS J BLYTHE CHIEF INFORMATION OFFICER	40 0					X		131,807	0	25,008

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

componsatea zmproyecs/	ш 2шоро		•			•				
(A) Name and Title	(B) A verage hours	1	() Ition (that a	(che		Ш		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- org	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
SERGEI GELFAND PUBLISHER	40 0					Х		129,762	0	22,987
INA METTE ACQUISITIONS EDITOR	40 0					Х		121,848	0	22,708
Gerard Loon Director	40 0					X		118,684	0	13,959

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SERVICE CONTRACTS	277,461	167,429	110,032	
CC PROCESSING FEES	163,481	163,481		
EXPENDABLE EQUIPMENT	299,626	249,305	50,321	
MISCELLANEOUS	268,830	189,264	79,482	84
JOURNAL DIGITIZATION & EDITING	280,392	280,392		

DLN: 93493316045580

OMB No 1545-0047

Open to Public Inspection

┌ Yes

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II.A. Do not complete Part II.B

Did the filing organization file Form 1120-POL for this year?

	ction 50 (c)(3) organizations that have filed Form5766 (election under section 50 ((f)) Complete Fait				
• Se	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete	Part II-B Do	not co	mplete Part	II-A
f th	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Iin	ie 35a (rega	arding	proxy tax)	, the n
₽ Se	ction 501(c)(4), (5), or (6) organizations Complete Part III				
		Employer ıd	entifica	ation numbe	r
Am	erican Mathematical Society				
		05-026479	·		
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s	ection 52	<u> 7 org</u>	<u>janizatio</u>	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Par	t I V			
2	Political expenditures	>	\$		
3	V olunteer hours		_		
Pai	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	▶	\$ _		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
b	If "Yes," describe in Part IV				
Pai	t I-C Complete if the organization is exempt under section 501(c) except s	section 5	01(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac	tivities 🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section sexempt funtion activities	527 ►	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	L7b ►	\$		

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,					
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals					
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)						
b	Total lobbying expenditures to influence a legisla								
c	Total lobbying expenditures (add lines 1a and 18								
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1	c and 1d)							
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both						
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00					
	Over \$17,000,000	\$1,000,000							
		•							
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)							
h	Subtract line 1g from line 1a If zero or less, enter	er -0-							
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -							
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No			
	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 2a through 2f on page 4.)								
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı			
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots non-taxable amount								

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a	a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		177,276	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1:			177,276	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
ь	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ľ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes". 1 Dues, assessments and similar amounts from members

_	bacs, assessments and similar amounts from members	_	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
ь	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		
	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
OBBYING EXPENSES	PART II-B, LINE 1G	THE SOCIETY MAINTAINS AN OFFICE OF GOVERNMENTAL AFFAIRS IN WASHINGTON, DC WITH TWO STAFF MEMBERS
		THE PRINCIPAL MISSION OF THE OFFICE IS TO (1) STAY
		ABREAST OF EVENTS, LEGISLATION, AND POLICY
		INITIATIVES THAT WOULD HAVE AN IMPACT ON THE
		SCIENCES IN GENERAL, WHETHER IN AREAS OF
		EDUCATION, FUNDING RESEARCH, ETC, (2) TO ACT AS A
		RESOURCE TO THE U.S. GOVERNMENT IN AREAS SUCH AS
		FUNDING OF SCIENTIFIC EDUCATION OR RESEARCH IN
		GENERAL OR IN MATHEMATICS, THE IMPORTANCE OF
		SCIENCE AND MATHEMATICS, AND (3) TO PROVIDE
		INFORMATION OUT TO THE MEMBERSHIP AND THE WIDER
		MATHEMATICAL COMMUNITY ABOUT GOVERNMENT
		INITIATIVES AND POLICIES EFFORTS ARE OFTEN MADE
		IN CONJUNCTION WITH OTHER PROFESSIONAL
		SCIENTIFIC ORGANIZATIONS SIMILAR TO THE SOCIETY
		WE EDUCATE OUR COMMUNITY ABOUT THE GOVERNMENT
		AND THE VARIOUS GROUPS WITHIN GOVERNMENT
		(CONGRESS, THEIR STAFF, VARIOUS AGENCIES) ABOUT
		THE MATHEMATICAL COMMUNITY NO SPECIFIC
		LEGISLATION IS LOBBIED FOR OR AGAINST, OTHER THAN
		THE FUNDING OF THE VARIOUS AGENCIES THAT
		SUPPORT THE MATHEMATICAL COMMUNITY (NSF, DOE,
		ETC)

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As Filed Data -

DLN: 93493316045580

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization
American Mathematical Society

Employer identification number

05-0264797

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" to Form 9	(a) Donor advised funds		(b) Funds and	other accounts
1	Total number at end of year			• • • • • • • • • • • • • • • • • • • •	
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
1	Aggregate value at end of year				
;	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	5	nor adv	ısed	□ Yes □ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit	d donor advisors in writing that grant fund nefit of the donor or donor advisor, or for a	any othe	er purpose	┌ Yes ┌ No
Pai	t II Conservation Easements. Complete	e if the organization answered "Yes"	to Fori	n 990, Part :	IV, line 7.
1 2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	tion or pleasure)	ı certifie	d historic stru	•
	easement on the last day of the tax year				
	Total number of concernation occurrents		<u> </u>	Held at th	e End of the Year
а	Total number of conservation easements	_	2a		
b	Total acreage restricted by conservation easement		2b		
C	Number of conservation easements on a certified hi	, ,	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
	Number of conservation easements modified, transf the taxable year ▶	erred, released, extinguished, or termina	ted by t	he organizatio	n during
ļ	Number of states where property subject to conserv	vation easement is located ►			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds	ng the periodic monitoring, inspection, ha	ndling o	f violations, ar	nd Yes No
5	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation ease	ments d	luring the year	<u> </u>
7	A mount of expenses incurred in monitoring, inspect	ıng, and enforcıng conservation easemen	ts durın	g the year ► \$	
3	Does each conservation easement reported on line $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of se	ection		┌ Yes
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of				
	the organization's accounting for conservation ease				
ar	t III Organizations Maintaining Collection Complete if the organization answered	ments ons of Art, Historical Treasures	, or Ot	her Similaı	Assets.
	t IIII Organizations Maintaining Collection	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea	nent and rch in fu	l balance shee	t works of
	Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea nancial statements that describes these S 116, to report in its revenue statement public exhibition, education, or research	nent and rch in fu items and bal	I balance shee Irtherance of p ance sheet wo	t works of oublic service, orks of art,
La	Complete if the organization answered If the organization elected, as permitted under SFAs art, historical treasures, or other similar assets heliprovide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFAs historical treasures, or other similar assets held for	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea nancial statements that describes these S 116, to report in its revenue statement public exhibition, education, or research is	nent and rch in fu items and bal	I balance shee urtherance of p ance sheet wo erance of publ	t works of oublic service, orks of art,
1a	Complete if the organization answered If the organization elected, as permitted under SFA: art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi If the organization elected, as permitted under SFA: historical treasures, or other similar assets held for provide the following amounts relating to these item	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea nancial statements that describes these S 116, to report in its revenue statement public exhibition, education, or research is	nent and rch in fu items and bal	I balance shee urtherance of p ance sheet wo erance of publ	t works of public service, orks of art, ic service,
la	Complete if the organization answered If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these item (i) Revenues included in Form 990, Part VIII, line	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea nancial statements that describes these S 116, to report in its revenue statement public exhibition, education, or research is 1 torical treasures, or other similar assets	nent and rch in fu items and bal in furth	I balance shee urtherance of p ance sheet wo erance of publ * \$	t works of public service, orks of art, ic service,
La b	Complete if the organization answered If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets heliprovide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item (i) Revenues included in Form 990, Part VIII, line (ii) Assets included in Form 990, Part X If the organization received or held works of art, his	ments ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8. S 116, not to report in its revenue statem d for public exhibition, education or resea nancial statements that describes these S 116, to report in its revenue statement public exhibition, education, or research is 1 torical treasures, or other similar assets	nent and rch in fu items and bal in furth	I balance shee urtherance of p ance sheet wo erance of publ * \$ scial gain, prov	t works of public service, orks of art, ic service,

Sche	dule D (Form 990) 2009										Page 2
Part	IIII Organizations Maintaining Co	llections of Art,	Hist	torical Tr	eası	ıres, or Ot	he	r Simila	r Asse	ets (c	ontinued
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the	_		_		se of its c	ollectio	n	
а	Public exhibition		d	Loan	orexc	hange progra	ms				
b	Scholarly research		e	┌ Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how	they furthe	rthe	organızatıon's	s ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							ılar	Г	Yes	┌ No
Par	Part IV, line 9, or reported an an					n answered	"Y	es" to Fo	rm 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	diary	for contribu	tions	or other asse	ts r	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the fo	ollowi	ng table							
									A mo	unt	
С	Beginning balance					<u> 1</u>	lc				
d	Additions during the year					<u> </u>	ld				
e	Distributions during the year						le				
f	Ending balance					1	Lf				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Г	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV	1									
Par	t V Endowment Funds. Complete	f the organization	ansv	wered "Ye	s" to	Form 990, I	Par	t IV, lıne	10.		
		(a)Current Year	(b) Prior Year	+ ` ´	Two Years Back	(d)	Three Years	Back (e) Four Y	ears Back
.a	Beginning of year balance	51,419,062		73,821,68	_		<u> </u>				
b	Contributions	4,504,052		920,88	_		_				
c	Investment earnings or losses	14,879,288		-21,821,83	+						
d	Grants or scholarships	0			0		_				
е	Other expenditures for facilities and programs	1,929,096		1,501,66							
f	Administrative expenses	0			0		<u> </u>				
g	End of year balance	68,873,306		51,419,06	2						
2	Provide the estimated percentage of the year	r end balance held as	S								
а	Board designated or quasi-endowment 🕨	86 450 % %									
b	Permanent endowment ► 6 900 % %										
c	Term endowment ► %										
За	Are there endowment funds not in the posses	ssion of the organiza	tıon t	hat are held	anda	admınıstered	for	the			
	organization by									Yes	No
	(i) unrelated organizations				•		•		3a(i)	1	No
ь	(ii) related organizations If "Yes" to 3a(ii), are the related organizatio		•				•		3a(ii) 3b	<u> </u> 	No
1 1	Describe in Part XIV the intended uses of th						•		30	<u> </u>	<u> </u>
	VI Investments—Land, Building:				90. P	art X. line 1	0.				
	Description of investment			(a) Cost or basis (invest	other	(b)Cost or other	her	(c) Accum		(d) Bo	ok value
la '	and			-		219,0	537				219,63
	Buildings		_			7,220,0		Λ	068,682		3,151,33
	easehold improvements		•			7,220,0	J1/	4,	000,002		J, 1J1, 33.
	Equipment		•			4,786,8	RON	3	551,678		1,235,21
	 N. k. s. m.		•			700,0			213,043		486,999
	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990 Part X colum		line 10/c) \		1 700,0	J+Z	>	213,043		5,093,183
	inico ta te (columni (a) snoula equal i	555, raic A, corain	(0),	10(0)./	• •		•		dule D (

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives Classity hald agusty interests		
Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)		
(a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount 0	

Part XIV Supplemental Information

Pai	TXL Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	27,720,75
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,748,21
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,972,540
4	Net unrealized gains (losses) on investments	4	13,198,459
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-67,200
9	Total adjustments (net) Add lines 4 - 8	9	13,131,259
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	16,103,799
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	40,636,020
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		. ,
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	13,198,459
3	Subtract line 2e from line 1	3	27,437,56
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 29,953		
b	Other (Describe in Part XIV) 4b 635		
c	Add lines 4a and 4b	4c	30,588
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	27,468,149
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	
1	Total expenses and losses per audited financial statements	1	24,784,82!
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 67,200	1	
e	Add lines 2a through 2d	2e	67,200
3	Subtract line 2e from line 1	3	24,717,62!
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 29,953		
ь	Other (Describe in Part XIV) 4b 635]	
c	Add lines 4a and 4b	4c	30,588
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	24.748.213

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

	Return Reference	Explanation
Ident if ier ENDOWMENT FUNDS	Return Reference PART V, LINE 4	Explanation TRUE ENDO WMENT FUNDS FROM DONORS COMPRISE \$9,400,029 OF THE TOTAL ENDO WMENT FUNDS AT 12/31/09 THESE FUNDS INCLUDE THOSE WHOSE INCOME IS RESTRICTED FOR SPECIFIC PURPOSES, SUCH AS PRIZES, LECTURES, SCHOLARSHIPS AND GRANTS, AS WELL AS THOSE WHOSE USE OF INCOME IS NOT RESTRICTED BY THE DONOR THE BOARD HAS ADOPTED A POLICY OF USING SPENDABLE INCOME AVAILABLE FROM THE "INCOME-UNRESTRICTED" TRUE ENDO WMENT FUNDS TO SUPPORT SPECIFIC SERVICE AND OUTREACH PROJECTS EACH YEAR, WHICH ARE APPROVED AS PART OF THE BUDGET APPROVAL THE MAJORITY OF ENDOWMENT FUNDS ARE THOSE CREATED BY THE BOARD, USUALLY REFERRED TO AS QUASI-ENDOWMENT OR BOARD-DESIGNATED FUNDS, WHICH TOTAL \$59,543,414 THERE ARE FOUR SUCH FUNDS ESTABLISHED, EACH WITH ITS
		OWN PURPOSE (1) THE JOURNAL ARCHIVE FUND WAS ESTABLISHED TO PROVIDE A RESOURCE FOR THE SOCIETY TO USE WHEN THE NEXT SIGNIFICANT CHANGE IN INFORMATION DELIVERY OCCURS, SO THAT ALL PAST SCIENTIFIC AND MEMBERSHIP JOURNALS PUBLISHED BY THE SOCIETY CAN BE 'CONVERTED' FOR THE NEW DELIVERY ENVIRONMENT EACH YEAR, 1% OF JOURNAL REVENUES IS ADDED TO THIS FUND (2) THE YOUNG SCHOLARS FUND WAS ESTABLISHED BY THE BOARD AS AN ADDITIONAL SOURCE OF SPENDABLE INCOME FOR THE YOUNG SCHOLARS PROGRAM, WHICH IS PARTIALLY SUPPORTED BY A TRUE ENDOWMENT FUND THE YOUNG SCHOLARS PROGRAM PROVIDES SUPPORT TO SUMMER MATH CAMPS FOR TALENTED YOUNG STUDENTS,
		INCLUDING SCHOLARSHIP SUPPORT FOR STUDENTS TO COVER THE COSTS OF THE CAMP (3) THE OPERATIONS SUPPORT FUND (OSF) WAS ESTABLISHED BY THE BOARD TO PROVIDE SUPPORT TO THE OPERATING ACTIVITIES OF THE SOCIETY (4) THE ECONOMIC STABILIZATION FUND (ESF) WAS ESTABLISHED TO BE A TRUE RESERVE FUND FOR THE SOCIETY SHOULD ECONOMIC DIFFICULTIES OR OTHER EMERGENCIES ARISE AT EACH YEAR END, THE BALANCE IN THE ESF MUST EQUAL THE TARGET ESTABLISHED BY THE BOARD (CURRENTLY THE SUM OF 75% OF A YEAR'S OPERATING EXPENSES PLUS THE UNFUNDED POST RETIREMENT HEALTH BENEFIT OBLIGATION) IF THERE IS A SHORTFALL, THE OSF MUST MOVE FUNDS TO THE ESF, AND IF THE OSF IS
		INSUFFICIENT, OPERATIONS MUST MAKE UP THE DIFFERENCE WHEN THERE IS AN EXCESS OF FUNDS IN THE ESF, THEY ARE TRANSFERRED TO THE OSF
RECONCILIATION OF REVENUE	PART XII, LINE 2D AND 4B	LINE 4B- RECLASS OF GAIN ON EQUIPMENT \$635
RECONCILIATION OF EXPENSE	PART XIII, LINE 4B	LINE 2D- CHANGE IN POSTRETIREMENT BENEFIT OBLIGATIONS \$67,200 LINE 4B- RECLASS OF GAIN ON EQUIPMENT \$635
RECONCILIATION OF CHANGE IN NET ASSETS	PART XI, LINE 9	OTHER CHANGES IN NET ASSETS (\$67,200)

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DLN: 93493316045580

OMB No 1545-0047

2009

01.1.1

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Open to Public Inspection

Internal Revenue Service

Name of the organization

A merican Mathematical Society

Employer identification number

05-0264797

Part I	General Information on	Activities Outside the United States.	Complete	ıf the organization	answered
	"Yes" to Form 990, Part IV	, line 14b.			

1	For grantmakers. 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?	Yes	Γ	No

2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

3 Activites per Region (Us	se Schedule F-1	(Form 990) if add	ditional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	SALES-MATH PUBS	0
North America			Program Services	SALES-MATH PUBS	11,000
Europe (Including Iceland and Greenland)		1	Program Services	SALES-MATH PUBS	29,762
Middle East and North Africa			Program Services	SALES-MATH PUBS	0
Russia and the Newly Independent States			Program Services	SALES-MATH PUBS	0
South America			Program Services	SALES-MATH PUBS	0
Central America and the Caribbean			Program Services	SALES-MATH PUBS	0
East Asia and the Pacific			Program Services	SALES-MATH PUBS	3,500
South Asia			Program Services	SALES-MATH PUBS	0
		1			44,262
Totals	aduation Act Nati			Cat No E0083W Satur	·
For Privacy Act and Paperwork Re	eauction Act Notic	e, see the Instruc	tions for Form 990.	Cat No 50082W Scho	edule F (Form 990) 2009

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		North America	SCHOLARSHIP	11,000	CHECK			
2 Enter total n tax-exempt	umber of recipi by the IRS, or t	ent organizations for which the grar	listed above that are ntee or counsel has pr	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	1
3 Enter total n	umber of other	organizations or	entities				. ▶	0
								F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (d) A mount of (a) Type of grant or (b) Region (e) Manner of cash (f) A mount of (g) Description (h) Method of cash grant of non-cash valuation assistance recipients disbursement non-cash assistance assistance (book, FMV, appraisal, other) EDUCATIONAL SUPPORT East Asia/Pacific 3,500 1 EDUCATIONAL SUPPORT Europe/Iceland/Greenland 15,500 4

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009		Page 4
Part IV Supplemental Infor		in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
EMPLOYEES IN REGION	PART I	THE SOCIETY EMPLOYS ONE PERSON OVERSEAS, WHOSE FUNCTION IS TO ACQUIRE BOOK MANUSCRIPTS FOR THE SOCIETY'S BOOK PROGRAM FROM EUROPEAN MATHEMATICIANS COSTS TO MAINTAIN THIS EMPLOYEE
		OVERSEAS WERE \$14,262 PLUS SALARY & BENEFITS OTHER THAN THE COSTS ASSOCIATED WITH THE OVERSEAS EMPLOYEE AND PARTICIPATION IN MATHEMATICAL
		MEETINGS (BY SOCIETY STAFF EXHIBITING BOOKS, OR PROVIDING TRAVEL SUPPORT FOR US MATHEMATICIANS), THE SOCIETY INCURS NO COSTS OVERSEAS EXCEPT FOR THE COST OF ITS PRODUCTS PURCHASED BY FOREIGN
		PURCHASERS (MAINLY MATHEMATICAL PUBLICATIONS) RELATIVE SALES VOLUME IN GEOGRAPHIC AREAS IS PROVIDED BELOW IN LIEU OF COST INFORMATION TO
		PROVIDE AN UNDERSTANDING OF THE INTERNATIONAL NATURE OF THE SOCIETY AND THE MATHEMATICAL COMMUNITY SUB-SAHARAN AFRICA- SALES \$ 252,630 NORTH AMERICA- SALES \$ 574,154 EUROPE(INC ICELAND
		& GREENLAND)- SALES \$5,357,246 MIDDLE EAST & NORTH AFRICA- SALES \$ 285,539 RUSSIA & NEWLY INDEPENDENT STATES- SALES \$ 169,818 SOUTH AMERICA- SALES \$
MONITORING THE USE OF GRANT	DARTI IINE 2	491,210 CENTRAL AMERICA & THE CARIBBEAN - SALES \$ 11,497 EAST ASIA & PACIFIC - SALES \$4,083,765 SOUTH ASIA - SALES \$ 484,169 THE AMERICAN MATHEMATICAL SOCIETY AWARDS
FUNDS	PART I, LINE 2	VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND
		COLLABORATE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONITORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER
		GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLANS FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER A REPORT ON
		THE USE OF THE FUNDS IS ALSO REQUIRED THE APPLICATION PROCESS AND MONITORING OF GRANT ACTIVITIES IS DONE BY THE MEMBERSHIP AND PROFESSIONAL PROGRAMS DEPARTMENT OF THE SOCIETY
		THE APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE
SUPPORT OF MATH IN MOSCOW	PART II	PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WORK OR SPECIFIC MATHEMATICAL RESEARCH RESULTS THEY ARE GIVEN AFTER THE WORK HAS BEEN COMPLETED MATH IN MOSCOW WAS A SCHOLARSHIP PROGRAM
		THROUGH WHICH MATHEMATICS AND COMPUTER SCIENCE MAJORS COULD APPLY FOR SPECIAL SCHOLARSHIPS TO ATTEND A SEMESTER IN THE MATH IN MOSCOW PROGRAM, RUN BY THE INDEPENDENT UNIVERSITY OF MOSCOW AS MANY AS FIVE SCHOLARSHIPS IN THE AMOUNT OF \$7,500 WERE AVAILABLE PER SEMESTER THE PROGRAM LASTED 15 WEEKS AND COURSES WERE TAUGHT IN THE RUSSIAN
INDIVIDUAL AWARDS	PART III	TRADITION OF TEACHING MATHEMATICS WITH SMALL CLASSES AND ON-ON-ONE INTERACTION WITH PROFESSORS THESE ARE ALL AWARDEES OF PRIZES SUPPORTED BY TRUE
		ENDOWMENT FUNDS EACH PRIZE HAS ITS OWN PRIZE COMMITTEE TO SELECT THE AWARDEE, AND MOST ARE AWARDED EVERY THREE YEARS WITH A TOTAL PRIZE AMOUNT OF \$5,000 OCCASIONALLY A PRIZE IS SPLIT AMONG AWARDEES

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(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule I

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

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

OMB No 1545-0047

DLN: 93493316045580

Inspection

Name of the organization							on number
A merican Mathematical Society		05-0264797					
Part I General Informati	on on Grants and	Assistance					
Does the organization maintain the selection criteria used to aDescribe in Part IV the organization	ward the grants or ass	ustance?					Г Yes ГМ
	ne 21 for any recipi	ent that received n	rganizations in the nore than \$5,000. Ch needed	eck this box if no one	e recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Addıtıonal Data Table					

Ident if ier	Return Reference	Explanation
MONITORING THE USE OF GRANT FUNDS	PART I, LINE 2	THE AMERICAN MATHEMATICAL SOCIETY AWARDS VARIOUS TYPES OF GRANTS, PRIZES AND SCHOLARSHIPS SOME GRANTS REIMBURSE TRAVEL EXPENSES TO ENCOURAGE MATHEMATICIANS TO TRAVEL AND COLLABORATE WITH OTHERS IN THE FIELD THESE GRANT EXPENSES ARE CAREFULLY MONITORED THROUGH EXPENSE REIMBURSEMENT PROCEDURES FOR OTHER GRANTS, THE RECIPIENT IS REQUIRED TO REPORT THEIR PLANS FOR THE USE OF FUNDS EITHER DURING THE APPLICATION PROCESS OR BEFORE RECEIVING THE FUNDS AFTER THE GRANT PERIOD IS OVER A REPORT ON THE USE OF THE FUNDS IS ALSO REQUIRED THE APPLICATION PROCESS AND MONITORING OF GRANT ACTIVITIES IS DONE BY THE MEMBERSHIP AND PROFESSIONAL PROGRAMS DEPARTMENT OF THE SOCIETY THE APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES SOME AWARDS ARE PRIZES THAT RECOGNIZE A BODY OF MATHEMATICAL WORK OR SPECIFIC MATHEMATICAL RESEARCH RESULTS THEY ARE GIVEN AFTER THE WORK HAS BEEN COMPLETED
GRANTS AND AWARDS	PARTS II AND III	GRANTS AND AWARDS TO ORGANIZATIONS AND INDIVIDUALS OCCUR UNDER THE VARIOUS OUTREACH ACTIVITIES OF THE SOCIETY, EACH WITH ITS OWN SET OF CRITERIA FOR THE AWARDEE AND HOW THAT AWARDEE IS EXPECTED TO USE THE FUNDS MANY GRANTS/AWARDS HAVE NO CRITERIA AS TO USE, SUCH AS THE MANY PRIZES SUPPORTED BY TRUE ENDOWMENT FUNDS FOR THOSE THAT DO HAVE CRITERIA AS TO USE, SUCH AS THE EPSILON AWARDS TO ORGANIZATIONS AND THE MATH IN MOSCOW GRANTS TO INDIVIDUAL STUDENTS, ADHERENCE TO THE TERMS OF THE GRANT/AWARD IS MONITORED BY STAFF IN THE MEMBERSHIP AND PROFESSIONAL PROGRAMS DEPARTMENT APPLICATION FOR CONSIDERATION INCLUDES ACKNOWLEDGEMENT THAT IF SELECTED, THE AWARD WILL BE USED FOR STATED PURPOSES ADDITIONALLY, ONCE THE PURPOSE FOR WHICH THE AWARD OR GRANT WAS MADE IS COMPLETE, THE AWARDEE IS REQUIRED TO FILE A REPORT WITH THE SOCIETY, EITHER THE OFFICE OF THE SECRETARY (FOR THE CENTENNIAL FELLOWSHIP) OR THE MEMBER AND PROFESSIONAL PROGRAMS DEPARTMENT

Software ID: Software Version:

EIN: 05-0264797

Name: American Mathematical Society

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS STATE UNIVERSITY C/O DR MAX WARSHAUER SAN MARCOS,TX 78666	74-1982979	115	15,000				EPSILON AWARD
UNIVERSITY OF MICHIGAN 525 EAST UNIVERSITY AVE ANN ARBOR, MI 48109	38-6006309	115	10,000				EPSILON AWARD
HAMPSHIRE COLLEGE893 WEST ST AMHERST,MA 010025001	04-6130872	501(c)3	10,000				EPSILON AWARD
BOSTON UNIVERSITY111 CUMMINGTON STREET BOSTON,MA 02215	04-2103547	501(c)3	12,500				EPSILON AWARD
OHIO STATE UNIVERSITY 231 WEST 18TH AVE COLUMBUS,OH 43210	31-6025986	115	15,000				EPSILON AWARD
CENTER FOR EXCELLENCE IN EDUCATION8201 GREENSBORO DRIVE SUITE 215 MCLEAN, VA 22102	52-1256563	501(C)(3)	7,500				EPSILON AWARD
MATHPATH3560 PINE GROVE AVENUE UNIT 416 PORT HURON, MI 48060	20-1290489	501(c)(3)	7,500				EPSILON AWARD
UNIVERSITY OF NEBRASKA- LINCOLN CENTER OF SCIENCE MATH AND COMPUTE 251 AVERY HALL LINCOLN,NE 685880131	47-0491233	115	7,500				EPSILON AWARD
UNIVERSITY OF PUERTO RICO MAYAGUEZPO BOX 9018 MAYAGUEZ,PR 006819018	99-9999999	115	7,500				EPSILON AWARD
LAMAR UNIVERSITY- BEAUMONTPO BOX 10003 BEAUMONT,TX 77710	74-6000298	115	7,500				EPSILON AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MATHEMATICAL ASSOCIATION OF AMERICA1827 18TH STREET NW WASHINGTON DC WASHINGTON, DC 200042601	16-0743079	115	18,000				ANNUAL SUPPORT				
UNIVERSITY OF CHICAGO 5734 UNIVERSITY AVE CHICAGO,IL 60637	36-2177139	501(C)(3)	84,700				CENTENNIAL FELLOWSHIP AWARD				
WASHINGTON & LEE UNIVERSITY204 WEST WASHINGTON STREET LEXINGTON, VA 244502116	54-0505977	501(c)(3)	25,039				CONGRESSIONAL FELLOWSHIP				

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

Torm 550, Schedule 1, Furt III, Grunts and Other Assistance to Individuals in the Office States									
(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
2009 TRIJTZINSKI SCHOLARSHIPS	7	21,000							
COLE PRIZE IN ALGEBRA	2	5,000							
CONANT PRIZE	1	1,000							
STEELE PRIZE- LIFETIME A CHIEVEMENT	1	5,000							
STEELE PRIZE- SEMINAL CONTRIBUTION	1	5,000							
2009 MORGAN PRIZE	1	1,200							
BIRKHOFF PRIZE	1	5,000							
INTERNATIONAL SCIENCE AND ENGINEERING FAIR	8	2,550							
MATH IN MOSCOW NSF SUPPORTED PROGRAM- 09-10 GRANTS	12	101,500							
MATH ART EXHIBIT PRIZES	3	1,000							
2008-2009 CONGRESSIONAL FELLOWSHIP	1	53,759							

Compensation Information

Part I Questions Regarding Compensation

DLN: 93493316045580

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization
American Mathematical Society

Employer identification number 05-0264797 Yes Νo

1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	\Box	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organic reimbursement orprovision of all the expenses described			1b		
2	Did the organization require substantiation prior to reimlofficers, directors, trustees, and the CEO/Executive Dir		,	2		
3	Indicate which, if any, of the following the organization u organization's CEO/Executive Director Check all that a		y			
	Compensation committee		Written employment contract			
		<u> </u>	Compensation survey or study			
	Form 990 of other organizations	~	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VI	I, Section A, line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	mer	nt?	4a		Νo
Ь	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provid	le th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must c	omp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
Ь	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," desc		· · · · · · · · · · · · · · · · · · ·	7		Νο
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Rein Part III			8		No
9	If "Yes" to line 8, did the organization also follow the reb section 53 4958-6(c)?	butt	able presumption procedure described in Regulations	9		
or F	Privacy Act and Paperwork Reduction Act Notice, see the	Int	ructions for Form 990 Cat No 50053T Schedule	J (For	m 990)	2009

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)(1)-(111) 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) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Samuel M Rankın	(ı) (ıı)	202,574	0	0	25,263 0	8,829 0	236,666 0	C
Gary G Brownell	(ı) (ıı)	194,473 0	0 0	0	23,371	1,653 0	219,497 0	C (
Elizabeth H Huber	(ı) (ıı)	155,953 0	0 0	0 0	18,755 0	8,708 0	183,416 0	C (
Constance W Pass	(ı) (ıı)	135,658	0	0	16,579 0	9,129 0	161,366 0	C
ROBERT J DAVERMAN	(ı) (ıı)	105,376	0	0	0	0	105,376 0	C
DONALD E MCCLURE	(I) (II)	232,330	0	36,937 0	0	8,829 0	278,096 0	C
ELLEN J MAYCOCK	(ı) (ıı)	138,412	0	0	15,721 0	5,728 0	159,861 0	C
THOMAS J BLYTHE	(ı) (ıı)	131,807	0	0	15,792 0	9,216 0	156,815 0	, c
SERGEI GELFAND	(ı) (ıı)	129,762	0	0	14,557 0	8,430 0	152,749 0	C
Graeme Fairweather	(I) (II)	211,818 0	0	0	8,683 0	11,313 0	231,814 0	C
	'							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
FROM UNRELATED ORGANIZATIONS	990, PART	DURING THE YEAR, ROBERT DAVERMAN RECEIVED COMPENSATION FROM AN UNRELATED ORGANIZATION FOR SERVICES PROVIDED TO THE AMERICAN MATHEMATICAL SOCIETY ROBERT DAVERMAN IS A PROFESSOR AT THE UNIVERSITY OF TENNESSEE, AND TOTAL COMPENSATION RECEIVED FOR SERVICES PROVIDED TO THE SOCIETY WAS \$105,376

Schedule J (Form 990) 2009

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SCHEDULE O

(Form 990)

Department of the Treasury

Supplemental Information to Form 990

OMB No 1545-0047 **2009**

> Open to Public Inspection

DLN: 93493316045580

Name of the organization
American Mathematical Society

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

Attach to Form 990.

Employer identification number

05-0264797

		05-0264797
ldentifier	Return Reference	Explanation
RELATIONSHIPS AMONG GOVERNING BODY AND EMPLOYEES	PART VI, SECTION A, LINE 2	Trustee Eric Friedlander is the spouse of Associate Secretary and Editor of the Society's journal 'Bulletin', Susan Friedlander None of these positions receives any compensation from the Society
MEMBERS AND STOCKHOLDERS	PART VI, SECTION A, LINE 6	The Society has over 30,000 individual and institutional members, with no criteria for membership
ELECT MEMBERS OF GOVERNING BODY	PART VI, SECTION A, LINE 7A AND 7B	The individual membership elects all Board members, except the treasurer and associate treasurer. The treasurer and associate treasurer serve in those capacities with approval of the Council. They must approve all bylaw changes. Additionally, there is a second governing body, the Council (some elected members, some appointed by special Nominating committees that have elected members), that has authority in matters of scientific policy and membership dues, but no fiduciary authority. There are some matters, such as dues rates and the amount and frequency of awarding endowed prizes, which must be approved by both the Board of Trustees and the Council.
PROCESS TO REVIEW FORM 990	PART VI, SECTION B, LINE 11	The preparation and filing of the Society's Form 990 and supporting schedules is the responsibility of the Chief Financial Officer and the Fiscal department staff. All supporting worksheets are forwarded to the society's tax advisors, KPMG, LLP, who then completes a draft of the form. The CFO is responsible for answering questions, providing additional information, etc. Once the draft 990 is complete, the CFO and the Fiscal department staff review in detail. The draft 990 is also provided to the Executive Director for review, principally in the areas of accuracy and adequacy of explanations and answers, other than financial information. Filing is made once KPMG and the Society's CFO and ED are satisfied it meets all requirements. The entire Board is provided access to an electronic copy of the filing prior to submission.
CONFLICT OF INTEREST POLICY	PART VI, SECTION B, LINE 12	The Society has written conflict of interest statements for staff as well as for Officers, Board and Council members, as well as similar statements included in committee charges. All staff are annually required to complete and file a Conflict of interest statement and disclosure form with the Human Resources department. This form requires disclosure of any financial relationship of the employee or the employee's immediate family with any actual or potential vendor the Society may use, as well as the nature of the financial relationship (owner, officer, employee, etc.) The Director of HIR reviews all such forms and changes therein formy ear to year, and discusses any potential conflicts with the Executive Director. Action may be taken to limit business with certain vendors, or other appropriate actions. The volunteer leadership is not required to complete this or any similar form rather, these individuals must adhere to the policy described below. Since the volunteers self-report when a potential conflict arises, there can be no monitoring for compliance, other than for staff as described above. Conflict of interest Policy for AMS Officers and Committee Members (as adopted by the January 4, 2007 AMS Council). A conflict of interest may exist when the personal interest (financial or other) or concerns of any committee member, or the member's immediate family, or any group or organization to which the member has an allegiance or duty, may be seen as competing or conflicting with the interests or concerns of the AMS. When any such potential conflict of interest is relevant to a matter requiring participation by the member in any action by the AMS or the committee on which the member belongs, the interested party shall call it to the attention of the chair of the committee and such person shall not vote on the matter. Moreover, the person having a conflict shall retire from the room in which the committee with the deliberation or decision regarding the matter under consideration. The foregoing requirements shall not
PROGRAM SERVICE ACTIVITY #2	PART III, LINE 4B	Membership and outreach activities, as well as professional services and programs for the mathematical community, such as employment services, grant or endow ment supported conferences, surveys of the profession, endow ment supported prizes, awards, scholarships and fellow ships for achievements in mathematics, high school outreach, public awareness, and other programs. The Society has more than 30,000 individual and institutional members, with no criteria for membership, who are served through the membership program. To support research and scholarship in mathematics, the Society awarded fellow ships, travel grants, and other awards to approximately 70 individuals and organizations in 2009, totalling more than \$500,000. In July 2009, the Society introduced MathPrograms org to the mathematical community. Mathprograms org is a website through which the organizations can conduct application processes for programs such as scholarships, research programs, and small travel grants. The Society also has a MathJobs org website for employers, such as universities, to post mathematics jobs and for mathematicians to search for and apply for positions.
OTHER PROGRAM SERVICES	PART III, LINE 4D	Government Relations \$646,896, expenses \$0, grants and awards \$0, This office maintains contact with other professional scientific organizations as well as agencies and individuals in the government whose purpose is to support science and mathematical research and education. The office provides information both to the government about issues related to science and mathematical research and education, as well as to the mathematical community about the government's efforts and initiatives in these areas.
PUBLIC DISCLOSURE	PART VI, SECTION C, LINE 19	Shortly after filing, the Society's Form 990 and all schedules (excluding Schedule B, which is not public
ldentifier	Return	Explanation
COMPENSATION	Reference	The Board of Trustees exercises the following authorities with respect to compensation of Society staff 1
COMEDIOA HON	SECTION B, LINE 15	Approval of the raise pool effective for the following year's budget, as well as benefits offered to all staff (pension, health and dental coverage, etc.) They do not set or approve individual employee's compensation, except for that of the Executive Director, Deputy Executive Director and Chief Financial Officer. 2. Set the

1 33 2 10/ (110)		The Board of Hadrood exercises the following additionates with respect to compensation of coolety start.	
	SECTION B,	Approval of the raise pool effective for the following year's budget, as well as benefits offered to all staff	
	LINE 15	(pension, health and dental coverage, etc.) They do not set or approve individual employee's compensation,	
		except for that of the Executive Director, Deputy Executive Director and Chief Financial Officer 2 Set the	
		compensation of the Executive Director each year, which includes salary, benefits available to all employees,	
		use of a vehicle and may include other compensation such as severance earnings, if established in the	
		employment contract between the Society and the Executive Director 3 Reviews with the Executive Director	
		the process by which the Executive Director establishes the salary and benefits of the Deputy Executive	
		Director and the Chief Financial Officer for the upcoming year With respect to the Executive Director, staff	
		prepares a chart show ing the total actual compensation paid to the ED for the prior year, the salary and benefit	
		amounts approved for the current year, and proforma amounts for the upcoming year, assuming the ED's raise	
		is that of the raise pool percentage in (1) above included in total compensation are cost estimates for the	
		normal benefits applicable to all employees, the reportable value of personal use of the vehicle for income tax	
		purposes, any severance that will be earned that year and any other benefits required under the employment	
		contract Appropriate subtotals are also provided that are consistent with how the various surveys used	
		define compensation, for ease of comparison. The Board is also given appropriate charts from compensation	
		surveys that show the 25th percentile, mean, median and 75th percentile for not-for-profit CEO compensation	
		Survey data provided includes overall national data, data by geographic area, and compensation data based	
		on certain measures of size and complexity, such as revenues, number of employees, etc. The Board takes	
		into consideration all the information provided by staff, as well as the expectation and performance of the	
		Executive Director, in setting his/her compensation for the following year. Minutes are prepared that document	
		their decision and all supporting material used in making the decision is included with the minutes. The	
		Secretary of the Board of Trustees reports their decision as to ED compensation for the upcoming year to the	
		CFO and Director of Human Resources, and the minutes of this part of the meeting are available to these staff	
		members The Board also reviews a summary of all expense reimbursements (principally travel cost	
		reimbursements) made to the Executive Director for the past 12 months, provided by the CFO Reimbursements	
		to any staff member as well as officers and volunteers are subject to compliance with the Society's Travel	
		Policy and other Fiscal policies, of which some have been approved by the Board. The CFO has oversight	
		responsibility for ensuring compliance with these policies. With respect to the compensation of the Deputy	
		Executive Director and Chief Financial Officer, the Executive Director provides similar but less formal	
		information to the Trustees regarding his/her decisions for their respective compensation for the upcoming	
		year, again based upon expectations and performance. The process does not require a formal approval by the	
		Board of the ED decisions, but matters of any significance relative to these employees and/or their	
		compensation is discussed at this time	
<u> </u>		1	

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DLN: 93493316045580

2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Name of the organization

American Mathematical Society

PROVIDENCE, RI 02094

99-9999999

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

Employer identification number

05-0264797

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

(a)
Name, address, and EIN of disregarded entity

Primary activity

Legal domicile (state or foreign country)

(d) Total income

End-of-year assets

(f) Direct controlling entity

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

(b) (d) (f) (c) (e) Direct controlling Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status or foreign country) (if section 501(c)(3)) entity MATHEMATICAL REVIEWS INC 416 FOURTH STREET AMS **INACTIVE** MΙ 501(c)(3) ANN ARBOR, MI 48103 38-2489014 INTERNATIONAL CONGRESS OF MATHEMATICIANS C/O AMS 201 CHARLES STREET **AMS INACTIVE** RΙ 501(c)(3)

(j)

General or

managing

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

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

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

(a)
Name, address, and EIN of related organization

(b) 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

(4)

(5)

(6)

Cile	dule k (Form 990) 2009		Pag	ge .
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		N
b	Gift, grant, or capital contribution to other organization(s)	1b		Ž
c	Gift, grant, or capital contribution from other organization(s)	1c		Ž
d	Loans or loan guarantees to or for other organization(s)	1d		Ż
e	Loans or loan guarantees by other organization(s)	1e		N
f	Sale of assets to other organization(s)	1f		N
g	Purchase of assets from other organization(s)	1g		N
h	Exchange of assets	1h		N
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		N
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		N
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		N
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		N
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		N
n	Sharing of paid employees	1n		N
o	Reimbursement paid to other organization for expenses	10		N
р	Reimbursement paid by other organization for expenses	1p		Ne
q	Other transfer of cash or property to other organization(s)	1q		N
r	O ther transfer of cash or property from other organization(s)	1r		N
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 (b) Transaction Autype(a-r)		(c) : involve	ed
1) 2)				
• \				
3)				

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

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No