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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public
Inspection

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

A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICAN ANTHROPOLOGICAL ASSOCIATION		D Employer identification number 53-0246691
	Doing Business As		
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2200 WILSON BOULEVARD	600	
	City or town, state or country, and ZIP + 4		
	ARLINGTON, VA 22201		
F Name and address of principal officer: VIRGINIA DOMINGUEZ SAME AS C ABOVE			
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ► (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ► WWW.AAANET.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			L Year of formation: 1902
M State of legal domicile: VA			

Part I Summary

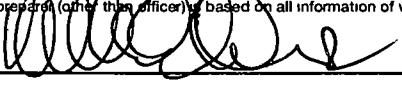
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ADVANCE ANTHROPOLOGY AS THE SCIENCE THAT STUDIES HUMANKIND AND ITS USE TO SOLVE HUMAN PROBLEMS.	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	
	5 Total number of employees (Part V, line 2a)	
	6 Total number of volunteers (estimate if necessary)	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	
	b Net unrelated business taxable income from Form 990-T, line 34	
Revenue	8 Contributions and grants (Part VIII, line 1h)	
	9 Program service revenue (Part VIII, line 2g)	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	
	b Total fundraising expenses (Part IX, column (D), line 25) ► 83,073.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	
	19 Revenue less expenses Subtract line 18 from line 12	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	
	21 Total liabilities (Part X, line 26)	
	22 Net assets or fund balances. Subtract line 21 from line 20	

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175 MAY 12 2010 IRS-OSC

OGDEN, UT

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	 Signature of officer William Edwiss Executive Director, Exec. Secretary Type or print name and title		
Paid Preparer's Use Only	Preparer's signature ► 	Date 4/27/10	Check if self-employed ► <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 RAFFA, PC ► 1899 L STREET NW, SUITE 900 ► WASHINGTON, DC 20036	Preparer's identifying number (see instructions) ► EIN ►	
		Phone no. ► 202-822-5000	

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

6/16 21

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
THE PURPOSES OF THE ASSOCIATION SHALL BE TO ADVANCE ANTHROPOLOGY AS THE SCIENCE THAT STUDIES HUMANKIND IN ALL ITS ASPECTS, THROUGH ARCHEOLOGICAL, BIOLOGICAL, ETHNOLOGICAL, AND LINGUISTIC RESEARCH; AND TO FURTHER THE PROFESSIONAL INTERESTS OF AMERICAN ANTHROPOLOGISTS,

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

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

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

4a (Code:) (Expenses \$ 1,014,630. including grants of \$ 25,000.) (Revenue \$ 343,674.)
PUBLICATIONS - AAA ADVANCES ITS CORE GOALS OF: FURTHERING THE PROFESSIONAL INTERESTS OF ANTHROPOLOGISTS; DISSEMINATING ANTHROPOLOGICAL KNOWLEDGE AND ITS USES TO ADDRESS HUMAN PROBLEMS; PROMOTING THE ENTIRE FIELD OF ANTHROPOLOGY IN ALL ITS DIVERSITY; AND REPRESENTING THE DISCIPLINE NATIONALLY AND INTERNATIONALLY, IN THE PUBLIC AND PRIVATE SECTORS THROUGH, AMONG OTHER THINGS, ITS PUBLISHING PROGRAM. WITH OVER 20 TITLES PUBLISHED IN PRINT AND ONLINE, AAA IS THE LARGEST SINGLE PUBLISHER OF ANTHROPOLOGICAL JOURNALS. THROUGH ITS PARTNERSHIP WITH WILEY-BLACKWELL PUBLISHERS, JOURNAL CONTENT IS MADE AVAILABLE IN ELECTRONIC FORMAT TO AAA MEMBERS AND SUBSCRIBERS.

4b (Code:) (Expenses \$ 441,792. including grants of \$) (Revenue \$ 1,049,307.)
ANNUAL MEETING - THE AAA ANNUAL MEETING IS THE LARGEST GATHERING OF ANTHROPOLOGISTS IN THE WORLD WITH OVER 5,000 PARTICIPANTS. AAA MEMBERS AND INVITED PARTICIPANTS PRESENT SCHOLARLY PAPERS AT OVER 550 SCHOLARLY SESSIONS. IN ADDITION TO PAPER SESSIONS THERE ARE ROUNDTABLES, POSTER SESSIONS, FORUMS, AND APPROXIMATELY 100 EXHIBITORS.

4c (Code:) (Expenses \$ 413,973. including grants of \$) (Revenue \$ 1,906,326.)
MEMBERSHIP: WITH OVER 10,000 MEMBERS AAA IS THE LARGEST ANTHROPOLOGICAL ORGANIZATION IN THE WORLD. MEMBERS ARE PROVIDED WITH MANY BENEFITS INCLUDING OPPORTUNITIES TO EXCHANGE SCHOLARLY KNOWLEDGE AND NETWORK THROUGH, A MONTHLY NEWSLETTER PUBLISHED THROUGHOUT THE ACADEMIC YEAR (9 ISSUES), LISTSERVs, BLOGs, AND BULLETIN BOARDS. MEMBERSHIP ALSO PROVIDED DISCOUNTS ON SERVICES SUCH AS MERCHANDISE AND ATTENDANCE AT AAA SPONSORED MEETINGS.

4d Other program services. (Describe in Schedule O.)
 (Expenses \$ 1,224,401. including grants of \$ 89,850.) (Revenue \$ 360,566.)
 4e Total program service expenses ► \$ 3,094,796.

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Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

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

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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.

12A Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III

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? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

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

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	X	
2	X	
3		X
4		X
5	N/A	
6		X
7		X
8		X
9		X
10	X	
11	X	
12	X	
13		X
14a		X
14b		X
15		X
16		X
17		X
18		X
19		X
20		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
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	X
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	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a	X
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	X
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	X
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	X
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	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
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	X
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	X
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	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X

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Part 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	1a	80
1b		1b	0
1c		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	27
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		
b	If "Yes," enter the name of the foreign country: <input type="text"/>	X	
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?	X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	X	
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?		
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?	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).	X	
a	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?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
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?	N/A	
9	Sponsoring organizations maintaining donor advised funds.	N/A	
a	Did the organization make any taxable distributions under section 4966?	N/A	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
10	Section 501(c)(7) organizations. Enter:	N/A	
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:	N/A	
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12b	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body	1a 20	
1b	Enter the number of voting members that are independent	1b 20	
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 X	
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 X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4 X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5 X	
6	Does the organization have members or stockholders?	6 X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a X	
b	Each committee with authority to act on behalf of the governing body?	8b X	
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 X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a X
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 X
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c X
13	Does the organization have a written whistleblower policy?	13 X
14	Does the organization have a written document retention and destruction policy?	14 X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
a	The organization's CEO, Executive Director, or top management official	15a X
b	Other officers or key employees of the organization	15b X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a X
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?	16b X

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY
18	Section 6104 requires an organization to make its Forms 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.
	<input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► THE ASSOCIATION - 703.528.1902
	2200 WILSON BLVD, #600, ARLINGTON, VA 22201

Form 990 (2009)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated Employee			
VIRGINIA DOMINGUEZ PRESIDENT	8.00	X		X			0.	0.	0.
SETHA M. LOW PRESIDENT THRU 12/05/09	20.00	X		X			0.	0.	0.
LEITH MULLINGS PRESIDENT ELECT	5.00	X		X			0.	0.	0.
DEB MARTIN SECRETARY	5.00	X		X			0.	0.	0.
DAN SEGAL SECRETARY THRU 12/05/09	5.00	X		X			0.	0.	0.
ED LIEBOW TREASURER	5.00	X		X			0.	0.	0.
GEORGE ARMELAGOS MEMBER	2.00	X					0.	0.	0.
FLORENCE BABB MEMBER	2.00	X					0.	0.	0.
LEE BAKER MEMBER	2.00	X					0.	0.	0.
THEODORE BESTOR MEMBER	2.00	X					0.	0.	0.
CHARLES BRIGGS MEMBER	2.00	X					0.	0.	0.
TJ FERGUSON MEMBER	3.00	X					0.	0.	0.
LAURA GRAHAM MEMBER	2.00	X					0.	0.	0.
MARY GRAY MEMBER	5.00	X					0.	0.	0.
HUGH GUSTERSON MEMBER	2.00	X					0.	0.	0.
ELLEN LEWIN MEMBER	2.00	X					0.	0.	0.
GWENDOLYN MIKELL MEMBER	2.00	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
NAN ROTHSCHILD MEMBER	2.00	X					0.	0.	0.
JEAN SCHENSUL MEMBER	2.00	X					0.	0.	0.
KATHERINE SPIELMANN MEMBER	3.00	X					0.	0.	0.
JENNIFER JACKSON STUDENT MEMBER	2.00	X					0.	0.	0.
JASON MILLER STUDENT MEMBER	2.00	X					0.	0.	0.
WILLIAM DAVIS EXECUTIVE DIRECTOR	37.50		X				227,119.	0.	79,948.
ELAINE LYNCH DEPUTY EXEC. DIR.	37.50			X			138,351.	0.	13,846.
1b Total						►	365,470.	0.	93,794.

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 ► 2

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
3 X

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 individual
4 X

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 J for such person
5 X

Section 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) Compensation
SCIENCE MUSEUM OF MINNESOTA 120 WEST KELLOGG BLVD., ST PAUL, MN 55102	EXHIBIT PRODUCTION	150,000.

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 ► 1

Part VIII Statement of Revenue

Part VIII Statement 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
Contributions, gifts, grants and other similar amounts					
1 a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c				
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	369,896.			
g Noncash contributions included in lines 1a-1f \$					
h Total. Add lines 1a-1f		369,896.			
Program Service Revenue					
2 a MEMBERSHIP DUES	Business Code				
b ANNUAL MEETING	900099	1,906,326.	1,906,326.		
c PUBLICATIONS	900099	1,049,307.	1,049,307.		
d ACADEMIC SERVICES	900099	343,674.	343,674.		
e SECTION MEETINGS	900099	234,814.	234,814.		
f All other program service revenue	900099	125,752.	125,752.		
g Total. Add lines 2a-2f		29,842.	29,842.		
3 Investment income (including dividends, interest, and other similar amounts)		235,084.			235,084.
4 Income from investment of tax-exempt bond proceeds					
5 Royalties		631,550.			631,550.
Other Revenue					
6 a Gross Rents	(i) Real	(ii) Personal			
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses	2608699.				
c Gain or (loss)	3006440.				
d Net gain or (loss)	<397741.►				
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
b Less: direct expenses	b				
c Net income or (loss) from fundraising events		►			
9 a Gross income from gaming activities. See Part IV, line 19	a				
b Less: direct expenses	b				
c Net income or (loss) from gaming activities		►			
10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory		►			
Miscellaneous Revenue	Business Code				
11 a ADVERTISING	541800	101,560.		101,560.	
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		101,560.			
12 Total revenue. See instructions.		4,630,064.	3,689,715.	101,560.	468,893.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	25,000.	25,000.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	89,850.	89,850.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	307,067.	12,283.	294,784.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,281,939.	833,065.	421,930.	26,944.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	110,539.	93,456.	14,014.	3,069.
9 Other employee benefits	341,436.	263,303.	69,685.	8,448.
10 Payroll taxes	113,089.		113,089.	
11 Fees for services (non-employees):				
a Management				
b Legal	30,026.	10,030.	19,996.	
c Accounting	31,595.		31,595.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	68,424.		68,424.	
f Investment management fees	657,062.	549,619.	98,565.	8,878.
g Other	16,890.		16,355.	535.
12 Advertising and promotion	221,467.	72,028.	140,619.	8,820.
13 Office expenses	27,542.	23,323.	4,219.	
14 Information technology				
15 Royalties				
16 Occupancy	257,123.	162,525.	83,929.	10,669.
17 Travel	195,917.	138,250.	57,434.	233.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	319,296.	314,527.		4,769.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	67,949.	30,592.	37,357.	
23 Insurance	32,630.		32,630.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CORPORATE TAXES	9,557.		9,557.	
b FIELD EDITOR EXPENSES	285,150.	285,150.		
c PRINTING & DISTRIBUTION	141,839.	131,281.		10,558.
d MISCELLANEOUS	36,377.	22,528.	13,699.	150.
e EDITORIAL/PROD SERVICES	28,495.	28,495.		
f All other expenses	33,601.	9,491.	24,110.	
25 Total functional expenses. Add lines 1 through 24f	4,729,860.	3,094,796.	1,551,991.	83,073.
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	75.	1	75.
	2 Savings and temporary cash investments	1,571,452.	2	2,077,885.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	144,632.	4	133,551.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	55,978.	9	48,816.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,158,815.		
	b Less: accumulated depreciation	10b 1,024,960.	10c 196,721.	133,855.
	11 Investments - publicly traded securities	6,754,015.	11	7,744,247.
	12 Investments - other securities. See Part IV, line 11	384,289.	12	365,229.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	42,781.	15	37,299.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	9,149,943.	16	10,540,957.
Liabilities	17 Accounts payable and accrued expenses	505,069.	17	667,946.
	18 Grants payable		18	
	19 Deferred revenue	1,216,909.	19	1,215,648.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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	111,454.	25	99,505.
	26 Total liabilities. Add lines 17 through 25	1,833,432.	26	1,983,099.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,316,437.	27	7,747,732.
	28 Temporarily restricted net assets	671,523.	28	466,932.
	29 Permanently restricted net assets	328,551.	29	343,194.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,316,511.	33	8,557,858.
	34 Total liabilities and net assets/fund balances	9,149,943.	34	10,540,957.

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
 2b Were the organization's financial statements audited by an independent accountant?
 2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
 3b 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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

Employer identification number

AMERICAN ANTHROPOLOGICAL ASSOCIATION

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1	<input type="checkbox"/> A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	<input type="checkbox"/> A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3	<input type="checkbox"/> A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	<input type="checkbox"/> 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	<input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6	<input type="checkbox"/> A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	<input type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8	<input type="checkbox"/> A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9	<input checked="" type="checkbox"/> An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10	<input type="checkbox"/> An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11	<input type="checkbox"/> An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Schedule A (Form 990 or 990-EZ) 2009

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

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

Section A. Public Support

Calendar 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.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

Schedule A (Form 990 or 990-EZ) 2009

Section A. Public Support

Calendar 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.")	444,169.	1913800.	899,767.	963,523.	369,896.	4591155.
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	4280739.	4484418.	5053103.	4045907.	3689715.	21553882.
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	4724908.	6398218.	5952870.	5009430.	4059611.	26145037.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	4,200.	4,200.	4,200.	4,200.	3,484.	20,284.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b	4,200.	4,200.	4,200.	4,200.	3,484.	20,284.
8 Public support (Subtract line 7c from line 6.)						26124753.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	4724908.	6398218.	5952870.	5009430.	4059611.	26145037.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	312,289.	326,955.	566,031.	788,721.	866,634.	2860630.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	72,586.	37,944.	49,790.	38,890.	27,452.	226,662.
c Add lines 10a and 10b	384,875.	364,899.	615,821.	827,611.	894,086.	3087292.
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.)	9,274.	246,668.	25,370.			281,312.
13 Total support (Add lines 9, 10c, 11, and 12.)	5119057.	7009785.	6594061.	5837041.	4953697.	29513641.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	88.52	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	89.95	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	10.46	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	8.99	%

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

b 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

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

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.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

AMERICAN ANTHROPOLOGICAL ASSOCIATION

Employer identification number
53-0246691

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

	(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)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

	Held at the End of the Tax Year
2a Total number of conservation easements	
2b Total acreage restricted by conservation easements	
2c Number of conservation easements on a certified historic structure included in (a)	
2d Number of conservation easements included in (c) acquired after 8/17/06	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	
1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:	
a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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

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

a Public exhibitiond Loan or exchange programsb Scholarly researche Other _____c Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,208,127.	1,739,213.			
b Contributions	738,745.	865,355.			
c Net investment earnings, gains, and losses	21,534.	12,276.			
d Grants or scholarships					
e Other expenditures for facilities and programs	364,238.	405,217.			
f Administrative expenses		3,500.			
g End of year balance	2,604,168.	2,208,127.			

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

a Board designated or quasi-endowment ► 84.36 %

b Permanent endowment ► 13.18 %

c Term endowment ► 2.46 %

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

by:

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	1,158,815.	1,024,960.	133,855.	
e Other				

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

► 133,855. Yes No

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other _____		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ►

Part IX Other Assets. See Form 990, Part X, line 15.

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

Part X Other Liabilities. See Form 990, Part X, line 25.

Part X	Other Liabilities. See Form 5500, Part X, line 25.	
1.	(a) Description of liability	(b) Amount
	Federal income taxes	
	DEFERRED LEASE BENEFIT	99,505.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

99,505.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	1	4,630,064.
2	2	4,729,860.
3	3	<99,796. >
4	4	1,341,143.
5	5	
6	6	
7	7	
8	8	
9	9	1,341,143.
10	10	1,241,347.

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

1	1	5,902,783.
2		
a	2a	1,341,143.
b	2b	
c	2c	
d	2d	
e	2e	1,341,143.
3	3	4,561,640.
4		
a	4a	68,424.
b	4b	
c	4c	68,424.
5	5	4,630,064.

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

1	1	4,661,436.
2		
a	2a	
b	2b	
c	2c	
d	2d	
e	2e	0.
3	3	4,661,436.
4		
a	4a	68,424.
b	4b	
c	4c	68,424.
5	5	4,729,860.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; 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.

PART V, LINE 4: THE ENDOWMENT FUNDS ARE CLASSIFIED AS UNRESTRICTED AND**BOARD DESIGNATED. THE PORTION OF THE ENDOWMENT RELATED TO SECTIONS DUES****ARE FOR PROGRAMS APPROVED BY THEIR MEMBERSHIP.****PART X: MANAGEMENT HAS EVALUATED ITS INCOME TAX POSITIONS FOR****THE YEAR ENDED DECEMBER 31, 2009, AND HAS DETERMINED THAT THE ASSOCIATION****HAS NO MATERIAL UNCERTAIN INCOME TAX POSITIONS AND, ACCORDINGLY, IT HAS****NOT RECOGNIZED ANY LIABILITY FOR UNRECOGNIZED INCOME TAX.**

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

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

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Department of the Treasury
Internal Revenue Service

THEATRE INSTITUTE

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Part II Grants and Other Assistance to Governments

recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part V and Schedule 1-1 (Form 990) if additional space is needed.

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RUTGERS UNIVERSITY
7 COLLEGE AVE., WINANTS HALL
NEW BRUNSWICK, NJ 08901

UNIVERSITY OF NOTRE DAME
6116 FLANNER HALL

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

3 Enter total number of other organizations

Form 990 | 2009

10. Do you have a place of residence in the United States? Complete if the organization answered "Yes" to Form 3.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered Yes to Form 990, Part IV, line 22.

DRAFT - Confidential and protected information

SCHEDULE I, PART I, LINE 2: GRANT RECIPIENTS ARE REQUIRED TO SUBMIT WRITTEN

REPORTS AT THE CONCLUSION OF THEIR WORK:

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

- Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.
- Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

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Inspection

Name of the organization

AMERICAN ANTHROPOLOGICAL ASSOCIATIONEmployer identification number
53-0246691**Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,

Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

	Yes	No
1a		
1b	X	
2	X	
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

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

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

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

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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

- a** The organization?

- b** Any related organization?

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

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

- a** The organization?

- b** Any related organization?

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

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2009

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02-02-10

Key Employees and Highest Compensated Employees

Key Employees and Highest Compensated Employees. Use Schedule 1 if additional space is 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).

Other industry, manufacturing, mining and construction (B) 2000 hours (B) 2000 units on Form 900 Part VII line 1a

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.

PART I, LINE 7: PRESIDENT AND THE EXECUTIVE BOARD WERE USING THE BONUS TO TRY AND SUPPLEMENT THE RAISE THEY WERE GIVING WILLIAM DAVIS, EXECUTIVE DIRECTOR, TO APPROXIMATE WHAT OTHER STAFF WERE RECEIVING IN THE WAY OF RAISES IN 2009 (4% AVG).

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009
Open to Public
Inspection

Name of the organization

AMERICAN ANTHROPOLOGICAL ASSOCIATION

Employer identification number
53-0246691

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

**INCLUDING THE DISSEMINATION OF ANTHROPOLOGICAL KNOWLEDGE AND ITS USE TO
SOLVE HUMAN PROBLEMS.**

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLIC EDUCATION

EXPENSES \$ 378658. INCLUDING GRANTS OF \$ 89850. REVENUE \$ 0.

SECTION

EXPENSES \$ 355937. INCLUDING GRANTS OF \$ 0. REVENUE \$ 125752.

ACADEMIC SERVICES AND MEDIA RELATIONS

EXPENSES \$ 291991. INCLUDING GRANTS OF \$ 0. REVENUE \$ 234814.

GOVERNMENT RELATIONS AND MINORITY AFFAIRS

EXPENSES \$ 197815. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: AAA HAS THREE CLASSES OF MEMBERS:

MEMBERS, ASSOCIATES, AND INSTITUTIONS. THE MEMBERS OF THE ASSOCIATION

**SHALL CONSTITUTE THE FINAL AUTHORITY OF THE ASSOCIATION, AND SHALL ELECT
FROM THEIR NUMBER THE ELECTED OFFICERS OF THE ASSOCIATION.**

**FORM 990, PART VI, SECTION A, LINE 7A: THE EXECUTIVE BOARD IS ELECTED
THROUGH A GENERAL ELECTION PROCESS, VOTED ON BY THE ENTIRE MEMBERSHIP.**

FORM 990, PART VI, SECTION A, LINE 7B: THE ONLY DECISIONS MEMBERS

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932211
02-03-10

Schedule O (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
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PARTICIPATE IN IS THE ELECTION OF THE EXECUTIVE BOARD.

FORM 990, PART VI, SECTION B, LINE 11: THE AAA CONTROLLER PROVIDES THE FINANCIAL DATA FOR THE 990 AND 990-T TO THE ACCOUNTING FIRM. THE AAA FINANCE COMMITTEE MEETS BY CONFERENCE CALL WITH THE AAA CONTROLLER AND DEPUTY EXECUTIVE DIRECTOR/CFO TO REVIEW THE 990 DRAFT BEFORE FILING. THE DRAFT IS REVIEWED LINE BY LINE AND ANY SIGNIFICANT CHANGES FROM THE PRIOR YEAR IS DISCUSSED. THE CHAIR OF THE FINANCE COMMITTEE WHO ALSO SERVES AS TREASURER REPORTS ON THE 990 REVIEW TO THE EXECUTIVE BOARD AT THEIR NEXT MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL STAFF, EXECUTIVE BOARD MEMBERS, AND MEMBERS OF THE NOMINATIONS COMMITTEE, FINANCE COMMITTEE, AUDIT COMMITTEE, AND RESOURCE DEVELOPMENT COMMITTEE.

NEW STAFF AND EXECUTIVE BOARD MEMBERS ARE ASKED TO SIGN THE POLICY AS PART OF THEIR ORIENTATION PROCESS. IN THE EVENT THAT A POTENTIAL CONFLICT IS IDENTIFIED THE EXECUTIVE DIRECTOR WILL CONSIDER (POSSIBLY WITH ADVICE FROM LEGAL COUNSEL) THE ISSUE, DETERMINE IF A CONFLICT EXISTS, AND IF SO IDENTIFY THE COURSE OF ACTION. IN THE EVENT THAT THE CONFLICT OCCURS WITHIN THE LEADERSHIP THE AAA PRESIDENT WILL BE NOTIFIED AND PARTICIPATE IN THE REVIEW AND RESOLUTION OF THE MATTER.

FORM 990, PART VI, SECTION B, LINE 15: ONLY THE EXECUTIVE DIRECTOR RECEIVES COMPENSATION. AN ANNUAL REVIEW IS CONDUCTED BY THE PRESIDENT

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02-03-10

Schedule O (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009
Open to Public
Inspection

Name of the organization

AMERICAN ANTHROPOLOGICAL ASSOCIATION

Employer identification number
53-0246691

ELECT. AN EVALUATION FORM IS SENT TO STAFF, MEMBERS OF THE EXECUTIVE BOARD, HEADS OF SECTIONS AND AAA COMMITTEE CHAIRS WHO ARE ASKED TO COMPLETE THE FORM AND RETURN IT TO THE PRESIDENT-ELECT. ALL RESPONSES ARE CONFIDENTIAL. THE EXECUTIVE DIRECTOR IS ASKED TO PROVIDE A SUMMARY OF HIS/HER ACCOMPLISHMENTS. COMPARATIVE COMPENSATION DATA IS COMPILED BY THE DEPUTY EXECUTIVE DIRECTOR/CFO AND SENT TO THE PRESIDENT-ELECT. THE PRESIDENT-ELECT COMPILES THE RESPONSES AND SALARY INFORMATION AND REPORTS TO THE EXECUTIVE BOARD AT THEIR ANNUAL MEETING IN THE FALL DURING A CLOSED SESSION. THE EXECUTIVE BOARD DETERMINES THE EXECUTIVE DIRECTORS COMPENSATION DURING THIS MEETING. NEAR THE CONCLUSION OF THE CLOSED SESSION THE EXECUTIVE DIRECTOR IS ASKED TO JOIN THE DISCUSSION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: AAA MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC BY POSTING THE ABOVE ITEMS ON THE ORGANIZATION'S WEBSITE AND IN THE ANNUAL REPORT.

FORM 990, PART XI, LINE 2C

THE ASSOCIATION HAS HAD NO CHANGES IN THESE PROCESSES FROM THE PRIOR YEAR.

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06-24-09
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(D) - Asset disposed

* ITG, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

29.1