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132001 01-23-12

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public Inspection

A F	or th	e 2011 calendar year, or tax year beginning and en	ending		
Boa	heck if pplicab	C Name of organization		D Employer identifie	cation number
	Addre	AMERICAN_SOCIOLOGICAL ASSOCIATION			
F	Name			13-5	626343
F	Initial return	· · · · · · · · · · · · · · · · · · ·	Room/suite	E Telephone number	
F	Termi		000	-	
	ated Amen	ded Charles 1710 A	,00		6,857,483.
F	⊒return ∏Applic			G Gross receipts \$	
ــــ	⊒tión pendi			H(a) Is this a group re	Yes X No
		SAME AS C ABOVE		for affiliates?	
	•			H(b) Are all affiliates inc	
			r 527_		list. (see instructions)
_		te: WWW.ASANET.ORG	T. v	H(c) Group exemption	
	orm o		L Year	of formation: 1943 N	State of legal domicile: DC
Fe		Summary	ND T	T T	
Çe	1	Briefly describe the organization's mission or most significant activities SEE P.	ART I	<u>TT</u>	
Activities & Governance		Charleshan have been been been been been been been be		th 050/ -f 4 4	
Ver	2	Check this box I if the organization discontinued its operations or dispose			
Ĝ	1	Number of voting members of the governing body (Part VI, line 1a)		3	19
త	l	Number of independent voting members of the governing body (Part VI, line 1b)		4	19
ţį		Total number of individuals employed in calendar year 2011 (Part V, line 2a)	•	. 5	34
ξį	l	Total number of volunteers (estimate if necessary)		6	100
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		7a	261,163.
	b	Net unrelated business taxable income from Form 990-T, line 34	7—	7b	0.
	_		\cup	Prior Year	Current Year
ne	8	Contributions and grants (Part VIII, line 1h)	ଛା 📙	2,617,359.	2,190,256.
Revenue	9	Program service revenue (Part VIII, line 2g) ROV 2 1 2012 Constant Roy 2 1 2012 Roy 2 2012 Roy 2 1 2012 Roy 2 2012 R		3,848,967.	4,252,326.
Pe		10	21	197,365.	205,436.
	11	Other revenue (Part viii, Column (A), lines 5, 60, 60, 50, 100, agid, 1-19),	5}	105,444.	65,898.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,769,135.	6,713,916.
રી		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	386,063.	220,680.
2 D	l	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
3 Se		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	3,022,429.	3,246,165.
Expenses	i	Professional fundraising fees (Part IX, column (A), line 11e)	·	0.	0.
) 			0.		
y 		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,156,900.	3,053,448.
i		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	6,565,392.	6,520,293.
	19	Revenue less expenses. Subtract line 18 from line 12		203,743.	193,623.
Sol				ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		18,666,423.	<u> 18,203,266.</u>
₽	21	Total liabilities (Part X, line 26)	<u> </u>	10,297,806.	11,024,535.
죥	22	Net assets or fund balances Subtract line 21 from line 20		8,368,617.	7,178,731.
	rt II	Signature Block			
		alties of periory, I declare that I have examined this return, including accompanying schedules a		-	y knowledge and belief, it is
true,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	
		Signature of office		Data	
Sıgı	1	[* · · · · · · · · · · · · · · · · · ·		Date 10	NN. 2012
Her	е	SALLY T. HILLSMAN, EXECUTIVE DIRECTOR			
		Type or print name and title		note - Tailing	OTIN .
		Print/Type preparer's name Preparer's synature	(D) 1	Pate Check	PIN
Paid		DAVID F. GRALING CHA DAWN F. Khaly	U// /	self-employe	
Prep		Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N			
		BETHESDA, MD 20814-2930		Phone no. (<u>301) 951-9090</u>
May	the II	RS discuss this return with the preparer shown above? (see instructions)			Vec No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

1

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			ĺ
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			ĺ
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	ŀ		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		X
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			v
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D. Part V	40		х
4.4	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
11	as applicable.	ł		ĺ
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			İ
а	Part VI	11a	х	İ
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			l
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	45		Х
16		15		
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, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
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	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>		_ _
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

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•		١.	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_X_
С	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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
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			ı
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		-	
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_ <u>X</u> _
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
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		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	i		
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_		<u>X</u>
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		<u> X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			37
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_		77
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_ <u>X</u> _
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	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance	 -		
·	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 45			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	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 34			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			l
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	L
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	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)?	_4a		X
þ	If "Yes," enter the name of the foreign country:			l
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	:		
5a		5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
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		X
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).	.		v
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? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a		X
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
C	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	76	-	A
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	_ :	l
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		L
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			l
а	Initiation fees and capital contributions included on Part VIII, line 12	!		ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			l
11	Section 501(c)(12) organizations. Enter.			l
а	Gross income from members or shareholders	'		l
ь	Gross income from other sources (Do not net amounts due or paid to other sources against			ĺ
40.	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	120		
d	Note. See the instructions for additional information the organization must report on Schedule O.	13a	-	
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
J	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990 ((2011)

132005 01-23-12 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

	Check if Schedule O contains a response to any question in this Part VI	 			<u> </u>
Sec	tion A. Governing Body and Management			T.,	Γ
4	Fator the provider of return recorders of the converse heady at the and of the territory	14-1	19	Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a	13		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	at l	19		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip 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	ne 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 governing documents since the prior Form		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?	5		X
6	Did the organization have members or stockholders?		6	X	
7a		ppoint one or			
	more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or			
	persons other than the governing body?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by the following:			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		<u>8b</u>	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached at the		1	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue Code.)		 	<u> </u>
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a	┼	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	napters, affiliates,			•
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		V
11a		ay before filing the form	1 ⁷ 11a		X
b 10-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-		ĺ
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	- tofloto0	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	-	12b	 ^	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	res, describe	40-	- V	
40	In Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?	•	13	X	
14	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approve	.al badaaaadaa	14	1	
15		•			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	45.	X	ļ
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	•	15a	A	X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		15b	+-	^
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	mont with a]	
ioa	taxable entity during the year?	ment with a	160	1	X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ato ito portioination	16 <u>a</u>	 	A
b	in joint venture arrangements under applicable federal tax law, and take steps to safequard the organization to evaluate the organization the organization the organization that the organization that the organization the organization that the organization the organization that the organization that the organization that the organization that the organization that the organization that the organization that the organization that the organization that the organization the organization that th	•	}		
	exempt status with respect to such arrangements?	mzauons	465		l
Sec	tion C. Disclosure		16b		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed NONE				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(a)(3)s or	alu) availal		
18	for public inspection. Indicate how you made these available Check all that apply.	1 (360(10)1 301(0)(3)8 01	ny) availai)IG	
	Own website Another's website X Upon request				
10	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict of interest selec-	, and fire	noisi	
19	statements available to the public during the tax year	ornict or interest policy	r, auto iiria	ncial	
20		and records of the area	nization: b		
20	State the name, physical address, and telephone number of the person who possesses the books a LES_BRIGGS = 202-383-9005	and records of the orga	mzalloni. J		
	1430 K STREET NW, NO. 600, WASHINGTON, DC 20005				
132000	8		Forn	990	(2011)

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

- 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.

(A) Name and Title	(B) Average hours per week	(do	not c	Pos heck ss pe	C) ition more rson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERIK OLIN WRIGHT	1 00	,,								
PRESIDENT	1.00	X		X	<u> </u>	-		0.	0.	0.
(2) EDWARDS TELLES	1 00	1,	İ	X						•
VICE PRESIDENT	1.00	X		A			-	0.	0.	0.
(3) CATHERINE WHITE BERHEIDE	1.00	v		x				0.	0.	^
SECRETARY	1.00	Δ		Λ	ļ			0.		0.
(4) CECILIA L. RIDGEWAY PRESIDENT-ELECT	1.00	v		х				0.	0.	0.
(5) JENNIFER L. GLASS	1.00			Α				0.	<u> </u>	<u> </u>
VICE PRESIDENT-ELECT	1.00	v		x				0.	0.	0.
(6) RANDALL COLLINS	1.00		<u> </u>			-		- 0 •	_	0.
PAST PRESIDENT	1.00	x	l	х				0.	0.	0.
(7) DAVID A. SNOW										
PAST VICE PRESIDENT	1.00	X		x				0.	0.	0.
(8) DAVIS L. BRUNSMA										
COUNCIL MEMBER	1.00	X						0.	0.	0.
(9) SARAH FENSTERMAKER									_	
COUNCIL MEMBER	1.00	X						0.	0.	0.
(10) JENNIFER LEE							İ			
COUNCIL MEMBER	1.00	X						0.	0.	0.
(11) AMANDA EVELYN LEWIS										
COUNCIL MEMBER	1.00	X						0.	0.	0.
(12) CECILIA MENJIVAR								_		
COUNCIL MEMBER	1.00	X						0.	0.	0.
(13) JOY MISRA	1 00							_	_	_
COUNCIL MEMBER	1.00	X						0.	0.	0.
(14) MONICA PRASAD	1 00									
COUNCIL MEMBER	1.00	X					ļ	0.	0.	0.
(15) MARIO LUIS SMALL	1 1 00									•
COUNCIL MEMBER	1.00	X		-			\vdash	0.	0.	0.
(16) SANDRA S. SMITH	1.00	v						o.	_	•
COUNCIL MEMBER	1.00	Λ				-		0.	0.	0.
(17) LAUREL SMITH-DOERR	1.00	v						0.	0.	^
COUNCIL MEMBER	1 1.00	Λ	L	Ц				U.	0.	0.

132007 01-23-12

Part VII Section A. Officers, Directors, Tru	ustees, Key E	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)			
· (A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do	not c	Pos heck) than	опе	Reportable	Reportable	E	Stimat	ed
	hours per week	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	a	mount	_
	(describe	-	T			1	1	from the	from related organizations		other	
	hours for	direc	1	1		B.		organization	(W-2/1099-MISC)	l l	mpens: from th	
	related	tee or	stee			ensate		(W-2/1099-MISC)	(,		ganiza	
	organizations	trus	nal trustee	Ì	oyee	e e				ar	nd rela	ted
	in Schedule O)	individual trustee or director	Institution	Officer	Key employee	Highest compensated employee	Former			orç	ganızat	ions
110)	 	Ë	Ë	5	<u>ş</u>	포팅	윤	 		+-		
(18) SARAH A SOULE	1.00	J.,			}				0			^
COUNCIL MEMBER	1.00	^		\vdash	\vdash	\vdash	 	0.	0	+		0.
(19) ROBIN E. WAGNER-PACIFICI	1 00	1,7							•]		^
COUNCIL MEMBER	1.00	A			-	├	-	0.	0	╬—		0.
(20) SALLY T. HILLSMAN	40.00			3,7	ŀ			212 070	•	١,	. .	
EXECUTIVE OFFICER	40.00	\vdash	├-	X	-	-	-	212,979.	0		26,6	OT.
(21) LES BRIGGS	40 00			7,		}		101 400	•	1,		
DIRECTOR OF FINANCE	40.00	⊣	├-	X	-	-		101,492.	0		<u>22,3</u>	86.
(22) JANET ASTNER	40.00		i					100 101	•	١.	• 4	
DEPUTY EX, OFFICER OF ADMIN, & TECH,	40.00	}—			-	X		108,101.	0	4	<u>17,4</u>	<u>.06.</u>
(23) ROBERTA SPALTER-ROTH	40 00							114 171	•	١,		
DIRECTOR OF RESEARCH	40.00	 —		-	-	X		114,171.	0	╍┼╌╌┙	<u>10,0</u>	149.
(24) MARGARET VITULLO	40 00				1	,,	1	100 206	•	١.		
DIRECTOR OF APAP	40.00	-				X	-	100,396.	0		22,4	105.
			-	-	-	<u> </u>				+		
1b Sub-total	<u></u>	L	<u> </u>	<u> </u>	<u></u>		<u> </u>	637,139.	0		98,8	47.
c Total from continuation sheets to Part V	II, Section A							0.	0			0.
d Total (add lines 1b and 1c)					<u>. </u>	<u> </u>		637,139.	0		<u>98,8</u>	47.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	pove	e) wł	no re	eceived more than \$100	,000 of reportable			
compensation from the organization		_							-			<u> </u>
											Yes	No
3 Did the organization list any former officer,			e, ke	y er	npic	yee	or h	highest compensated er	mployee on	İ		
line 1a? If "Yes," complete Schedule J for s		-							•	3	↓	X
4 For any individual listed on line 1a, is the su									he organization	į		
and related organizations greater than \$15								•		4	X	
5 Did any person listed on line 1a receive or a	accrue compei	nsat	ion f	rom	any	unr	elate	ed organization or indivi	dual for services	1	1	1

Section B. Independent Contractors

rendered to the organization? If "Yes," complete Schedule J for such person

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

(A) Name and business address	(B) Description of services	(C) Compensation
CAESARS ENTERTAINMENT PO BOX 17010, LAS VEGAS, NV 89114-7010	2011 ANNUAL CONFERENCE	370,758.
OPTIMAL NETWORKS, INC., 15201 DIAMONDBACK DR. STE. 220, ROCKVILLE, MD 20850	INFORMATION TECHNOLOGY	263,922.
2 Total number of independent contractors (including but not limited to those lis \$100,000 of compensation from the organization > 2	ted above) who received more than	

Contributions, Gifts, Grants and Other Similar Amounts					(A) Total revenue	(B)	(C)	(D) Revenue
ions, Gifts, Grants Similar Amounts		 	- + +		Total revenue	Related or exempt function revenue	Unrelated business revenue	excluded from tax under sections 512, 513, or 514
ions, Gifts, Gra Similar Amou	b	Federated campaigns	1a					
ions, Gifts, (Similar Am		Membership dues .	1b	1600219.				
ions, Giff Similar	С	Fundraising events	1c					
ions,	d	Related organizations	1d					
.ōળ	е	Government grants (contribute	ons) 1e	350,177.				
₩ જા	f	All other contributions, gifts, grant	s, and					
호된		similar amounts not included above	/e 1f	239,860.		. VIET Y N. JOHN MANNER MA		
E S	g	Noncash contributions included in lines	1a-1f \$					•
<u>8 0</u>	<u>h</u> _	Total. Add lines 1a-1f			2190256.		_	
i				Business Code				
8		PUBLICATIONS		900099	3074118.	2850467.		
Program Service Revenue		MEETINGS AND WO		900099	1145856.	1091356.	54,500.	
en S	С	<u>ADMINISTRATION</u>	FEES	900099	32,352.	32,352.		
e a	d							
<u> </u>	е							
-		All other program service revei	nue					
\rightarrow		Total, Add lines 2a-2f		▶	4252326.			
- 1		Investment income (including	dıvıdends, ıntere	est, and				
		other similar amounts)		▶ }	205,436.			205,436.
	4	Income from investment of tax	exempt bond p	roceeds 🕨				
	5	Royalties		_	79,712.			79,712.
			(i) Real	(II) Personal				
	6 a	Gross rents	110624.					
-		Less rental expenses	143567.					
		Rental income or (loss)	-32943.					
		Net rental income or (loss)		<u> </u>	-32,943.		-27,138.	-5,805.
	7 a	Gross amount from sales of	(i) Securities	(ıi) Other				
		assets other than inventory						
	b	Less: cost or other basis		i				
i		and sales expenses						
		Gain or (loss)		<u> </u>				
1		Net gain or (loss)					-	
e l	8 a	Gross income from fundraising	•					
Other Revenue		including \$						
Be		contributions reported on line	•					ļ
ē		Part IV, line 18	. a					
ਰ∣		Less direct expenses	b					-
		Net income or (loss) from fund Gross income from gaming ac	-					
	э а]				
		Part IV, line 19	а					
		Less direct expenses Net income or (loss) from game	b pa activities					
.		Gross sales of inventory, less i	-					
'	io a	and allowances						
	L	Less cost of goods sold	a b					
<u> </u>	C	Net income or (loss) from sales Miscellaneous Revenue		Business Code				
<u> </u>	11 ^	OTHER REVENUE	<u> </u>	900099	19,129.		10,150.	8,979.
1				700033	<u> </u>		10,130.	0,313.
	b				_			
	C بہ	All other revenue		<u> </u>				
	_	Total. Add lines 11a-11d			19,129.			
	e 12	Total revenue. See instructions.	•		6713916.	397/175	261 163	288,322.
132009 01-23-12		TOTAL TOTOLING, OCC MONDONONS.			0/13/10	<u> </u>	AUL, LUJ.	Form 990 (2011)

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).

comp	plete columns (B), (C), and (D).		5		
	Check if Schedule O contains a respon-	se to any question in thi	s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	_			
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	220,680.	220,680.		
3	Grants and other assistance to governments,		Į		
	organizations, and individuals outside the			9 d days - 0 4 0 100 s	
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		[
	trustees, and key employees	363,458.		363,458.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	Ì			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,378,460.	1,990,323.	388,137.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	129,796.	105,945.	23,851.	
9	Other employee benefits	218,804.	158,865.	59,939.	<u> </u>
10	Payroll taxes	155,647.	101,687.	53,960.	
11	Fees for services (non-employees)				
а	Management				
b	Legal	5,314.		5,314.	
С	Accounting .	38,990.		38,990.	
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	38,619.	13,605.	25,014.	
g	Other .	368,263.	137,675.	230,588.	
12	Advertising and promotion				
13	Office expenses	444,280.	316,721.	127,559.	
14	Information technology .				
15	Royalties			554 500	
16	Occupancy	551,520.		551,520.	
17	Travel .	297,576.	203,470.	94,106.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	= ===		0.500	
19	Conferences, conventions, and meetings	5,790.	3,210.	2,580.	
20	Interest				
21	Payments to affiliates	450 245		450 245	
22	Depreciation, depletion, and amortization	452,347.		452,347.	
23	Insurance	32,367.	2,275.	30,092.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	ALLOCATED OVERHEAD	0.	937,352.	-937,352.	
b	SECTIONS	288,153.	207,648.	80,505.	
С	EQUIPMENT RENTAL	250,602.	232,752.	17,850.	
đ	REPAIRS AND MAINTENANCE	58,646.		58,646.	
е	All other expenses	220,981.	102,093.	118,888.	
25	Total functional expenses. Add lines 1 through 24e	6,520,293.	4,734,301.	1,785,992.	0.
26	Joint costs. Complete this line only if the organization		_ ··-		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
13201	0 01-23-12				Form 990 (2011)

Form 990 (2011) AMERICAN SOCIOLOGICAL ASSOCIATION 13-5626343 Page 11 Part X Balance Sheet (A) (B) Beginning of year End of year 558,257. 394,113. 1 Cash · non-interest-bearing 1 2 Savings and temporary cash investments 737,317. 2 982,756. 302,864. 148,315. 3 3 Pledges and grants receivable, net 386,380. 268,066. 4 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 165,316. 134,790. 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 11,534,399. basis Complete Part VI of Schedule D 10a 10b 1,858,872 9,919,148. 10c 9,675,527. b Less: accumulated depreciation 4,810,965. 5,965,431. Investments - publicly traded securities 11 11 1,406,178. 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 498,312. <u>515,954.</u> 15 15 18,666,423. 18,203,266. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 329,076. 332,944. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 1,227,325. 1,090,127. 19 Deferred revenue 19 7,590,000. 20 7,440,000. Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of 1,151,405. Schedule D 2,161,464. 25 11,024,535. 10,297,806. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 5,816,851. 4,910,692. 27 27 Unrestricted net assets 2,546,766. 2,263,039. Temporanly restricted net assets 28 28 5,000. 5,000. Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31

> 18,203,266. Form **990** (2011)

7,178,731.

32

33

8,368,617.

18,666,423.

32

33

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

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

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

		AMERICA	IN SOCIOTOGIC	AL AS	SOCIA	TITON			<u></u>	<u>3-5626343</u>	
Part I	Reason	for Public Cha	rity Status (All organiz	ations mu	st comple	te this par	t) See ins	tructions.			
he orga	nization is not a	a private foundation	because it is (For lines	through	11, check	only one b	ox)				
1 🔲	A church, co	nvention of churche	es, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)).			
2 🔲	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)							
з 🗔	A hospital or	a cooperative hosp	ital service organization (described	ın section	170(b)(1)	(A)(iii).				
4 🔲	A medical res	search organization	operated in conjunction	with a hos	prtal desc	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter tl	ne hospital's nam	ie,
	city, and stat	e									
5 🔲	An organizat	on operated for the	benefit of a college or ur	niversity ov	vned or o	perated by	a governi	mental un	it describe	ed in	
	section 170	(b)(1)(A)(iv). (Compl	ete Part II)								
6 🔲	A federal, sta	ite, or local governm	nent or governmental unr	t described	d in sectio	n 170(b)(I)(A)(v).				
7 🗀	An organizat	on that normally red	ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	oublic described i	n
		b)(1)(A)(vi). (Comple				-			- '		
8 🔲	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II)						
9 X			ceives: (1) more than 33			rom contri	butions, n	nembersh	ıp fees, an	d gross receipts	from
			nctions - subject to certa							-	
	income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	Isinesses a	acquired b	y the orga	anization a	ıfter June 30, 197	' 5
		509(a)(2). (Complet					•				
10 🔲	An organizat	on organized and o	perated exclusively to te	st for publ	c safety	See sectio	n 509(a)(4	4).			
11 🔲	An organizati	on organized and o	perated exclusively for th	ne benefit (of, to perfe	orm the fu	nctions of,	or to carr	y out the	purposes of one	or
	more publicly	supported organiz	ations described in secti	on 509(a)(⁻	1) or section	on 509(a)(2) See see	ction 509(a)(3). Che	ck the box that	
			organization and compl								
	a Type	ь <u> </u>	Type II c	: 🔲 тур	e III - Fund	tionally inf	egrated		d 🗔	Type III - Other	
e 🗔	By checking	this box, I certify the	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified p	ersons other tha	n
	foundation m	anagers and other	than one or more publicly	y supporte	d organiza	ations desi	cribed in s	ection 50	9(a)(1) or s	ection 509(a)(2).	
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	atıtıs a Ty	pe I, Type	II, or Type	e III			
	supporting o	rganization, check t	his box								
g	Since August	t 17, 2006, has the	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing per	sons?		
	(i) A perso	n who directly or inc	directly controls, either al	one or tog	ether with	persons o	lescribed	ın (ıı) and ((III) below,	Yes	No
	the gove	erning body of the s	upported organization?							11g(i)	
	(ii) A famıly	member of a perso	n described in (i) above?							11g(ii)	
	(iii) A 35% (controlled entity of a	a person described in (i) o	or (11) above	∍?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganization	(s)						
		<u> </u>	 _								
	e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o in col. (i) Is governing	sted in your		ion in col.	(vi) Is organizati (i) organiz U.S	on in col. zed in the	(vii) Amount o support	f
			above or IRC section (see instructions))			ļ.,, ,,		 	,		
	-		(see instructions))	Yes	No	Yes	No	Yes	No		
				1				1			
			<u> </u>	 		<u> </u>			-		
				1		1			1		
 -			 	 				 	 		
						1					
					 	 		 	++		
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otal											

132021 01-24-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	l					
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to					1	
	or expended on its behalf						
3	The value of services or facilities		-				
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4		<u> </u>		<u> </u>		
	ction B. Total Support	~	,	· · · · · · · · · · · · · · · · · · ·			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4		ļ				
8	Gross income from interest,				•		
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources			<u> </u>		ļ	
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	ļ				 	
10	Other income. Do not include gain						
	or loss from the sale of capital						•
	assets (Explain in Part IV)					 	
	Total support. Add lines 7 through 10		<u></u>	<u></u>	<u> </u>	101	
	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for	-	s iirst, second, tni	ra, rourth, or titth t	ax year as a section	on 501(c)(3)	. □
Sec	organization, check this box and storetion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2011 (column (fl)		14	%
	Public support percentage from 2010		•	.,,		15	%
	33 1/3% support test - 2011. If the o			on line 13, and line	14 is 33 1/3% or		
	stop here. The organization qualifies	as a publicly supr	oorted organization	n .		•	▶□
b	33 1/3% support test - 2010. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/39	6 or more, check th	nis box
	and stop here. The organization qual						▶□
17a	10% -facts-and-circumstances tes		- · · · -	•	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"						. ▶□
b	10% -facts-and-circumstances tes	t - 2010. If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circi	umstances" test, c	heck this box and	stop here. Explai	n in Part IV how the	•
	organization meets the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	cly supported org	anızation	▶□
18	Private foundation. If the organization						s . ▶ 🔲
					Sch	edule A (Form 990	or 990-EZ) 2011

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Se	ction A. Public Support	elow, please comp	piete Part II)				
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and				(=, = = : -	<u> </u>	17.0.0
	membership fees received (Do not						
	include any "unusual grants ")	2,493,228,	2,419,503,	2,968,182.	2,617,359.	2_190_256.	12,688,528.
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	3 561 151.	3.674.794.	3.830.173.	3,697,960.		
2	Gross receipts from activities that	3,301,131,	3,074,734.	3,030,173,	3,697,960,	3,974,175.	18,738,253.
3	are not an unrelated trade or bus- iness under section 513			_			
4	Tax revenues levied for the organ- ization'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	6,054,379,	6.094.297.	6.798.355.	6,315,319,	6 164 431.	31,426,781,
	a Amounts included on lines 1, 2, and 3 received from disqualified persons		0,034,237,	0,730,333,	0,313,319.	0,104,431,	0.
t	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.
	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						31,426,781.
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	6,054,379.	6,094,297.	6,798,355.	6 315 319.	6,164,431,	31,426,781.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	574,426.					1.733.123.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					89,741.	89,741.
c	Add lines 10a and 10b	574,426.	270,934.	275,106.	308,017.	394,381.	1,822,864,
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,159.	11,719.	17,778.	8,372.	8,979.	55,007.
13	Total support (Add lines 9, 10c, 11, and 12)	6,636,964.	6,376,950.	7,091,239,	6,631,708.	6,567,791.	33,304,652.
14	First five years. If the Form 990 is for check this box and stop here	the organization's	first, second, thire				
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2011 (I			olumn (f))		15	94.36 %
	Public support percentage from 2010		•			16	94.15 %
	ction D. Computation of Inves						
17				e 13. column (f))		17	5.47 %
18			•		•	18	$\frac{5.37}{5.37}$ %
	33 1/3% support tests - 2011. If the	•	•	on line 14, and line	૧15 is more than ઉ		
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation .	. ▶ [X]
C	 33 1/3% support tests - 2010. If the line 18 is not more than 33 1/3%, che 	-			•	· · · · · · · · · · · · · · · · · · ·	
20	Private foundation. If the organization					_	

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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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

AMERICAN SOCIOLOGICAL ASSOCIATION

Employer identification number

AMERICAN SOCIOLOGICAL ASSOCIATION 13-5626343 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 Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? _ Yes 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 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Schedule D (Form 990) 2011

		N SOCIOLOG				-5626343 Page 2
Par	t III Organizations Maintaining C	ollections of Ar	<u>t, Historical Tr</u>	easures, or Ot	her Similar	Assets (continued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a	a significant use	of its collection items
	(check all that apply)					
а	Public exhibition	d	Loan or exc	hange programs		
b	Scholarly research	е	Other			
С	Preservation for future generations					
4	Provide a description of the organization's co	llections and explair	how they further t	he organization's e	xempt purpose	ın Part XIV
5	During the year, did the organization solicit or	r receive donations o	of art, historical trea	sures, or other sim	ılar assets	
	to be sold to raise funds rather than to be ma	untained as part of the	ne organization's c	ollection?		Yes No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if the organization	on answered "Yes"	to Form 990, Pa	art IV, line 9, or
	reported an amount on Form 990, Par	t X, line 21				
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	ns or other assets r	ot included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table.			
	· · ·	·	-			Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?	_		Yes No
_ b	If "Yes," explain the arrangement in Part XIV					
Par	t V Endowment Funds. Complete if	the organization ans	swered "Yes" to Fo	rm 990, Part IV, line	e 10	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three year	s back (e) Four years back
1a	Beginning of year balance	706.035.	533,820.	474.392		.850.
b	Contributions	388,259.	446.011.	327,073		921.
С	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs	328,703	273,796,	291,044	275	.379.
f	Administrative expenses					
g	End of year balance	765.591.	706.035.	533,820	474	392.
2	Provide the estimated percentage of the curr					
а	Board designated or quasi-endowment	99.40	%			
b	Permanent endowment ►60	%				
С	Temporarily restricted endowment	%				
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.				
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held a	ind administered fo	r the organization	on
	by.					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	listed as required or	n Schedule R?			3b
4	Describe in Part XIV the intended uses of the	organization's endo	wment funds			
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10.			
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumulated	(d) Book value
		basis (investm	ient) basis	(other)	depreciation	
1a	Land					
b	Buildings		9,95	1,023.	953,391	. 8,997,632.
С	Leasehold improvements					
d	Equipment		96	4,415.	640,254	. 324,161.
е	Other			8,961.	265,227	
Total	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part			 	9,675,527.

Schedule D (Form 990) 2011

(8) (9) (10)(11)Total. (Column (b) must equal Form 990, Part X, col (B) line 25)
FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial.

2. FIN 48 (ASC 740)

2 , 161 , 464 . ents that reports the organization's liability for uncertain tax positions under

132053 01-23-12

	dule D (Form 990) 2011 AMERICAN SOCIOLOGICAL ASSO				<u> 13-</u>	5626343	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Financ	cial State	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		- 1	1		6,713	<u>,916.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		6,520	<u>,293.</u>
• з	Excess or (deficit) for the year Subtract line 2 from line 1			3			<u>,623.</u>
4	Net unrealized gains (losses) on investments			4		-402	<u>,246.</u>
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Pnor period adjustments			7		-	
8	Other (Describe in Part XIV)		-	8		-981	,263.
9	Total adjustments (net). Add lines 4 through 8			9		-1,383	
		.d 0		10		-1,189	
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and XII Reconciliation of Revenue per Audited Financial Stateme		ith Reven		Retur		,000.
1	Total revenue, gains, and other support per audited financial statements				1	6,455	,237.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a	-40	2,246.			
b	Donated services and use of facilities	2b					
	Recoveries of prior year grants	2c		,	1		
_	Other (Describe in Part XIV)	2d	1.4	3,567.	-		
d		20	14	3,307.	7	250	670
	Add lines 2a through 2d				2e	-236	679.
3	Subtract line 2e from line 1				3	6,713	,916.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	İ				
а	Investment expenses not included on Form 990, Part VIII, line 7b	_4a			-		
b	Other (Describe in Part XIV.)	4b					
C	Add lines 4a and 4b				4c		0.
_ 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	6,713	<u>,916.</u>
Par	t XIII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expe	nses per	Retu	ırn	
1	Total expenses and losses per audited financial statements				1	6,663	,860.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a			·		
b	Prior year adjustments	2b			1		
	Other losses	2c			1		
C			1 /	3,567.	┨ .		
d	Other (Describe in Part XIV.)	2d		3,307.	1	142	F (7
_	Add lines 2a through 2d				2e		,567.
3	Subtract line 2e from line 1				3	6,520	<u>, 293.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	i				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			4		
b	Other (Describe in Part XIV.)	4b			_		
C	Add lines 4a and 4b				4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	6,520	<u>,293.</u>
	t XIV Supplemental Information						
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II						4; Part
	2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp			-			
PAF	T V, LINE 4: PERMANENT ENDOWMENT FUNDS AR	E RE	STRICT	ED TO	THE		
ROF	ERTA SIMMONS FUND, WHICH IS A SPECIAL AWA	RD F	OR DIS	SERTAT	יד∩אי	WORK.	
	article Deleter College William Ltd 11 Deleter 1991		OR DID	<u> </u>		WOLLEY	-
BOA	RD-DESIGNATED ENDOWMENTS ARE FOR SPECIFIC	ACT	IVITIE	S OF 1	HE	ASSOCIA:	CION
ANI	SECTIONS OF THE ASSOCIATION.						
MIL	becions of the absociation.						
					· · · · · · · · · · · · · · · · · · ·		
PAF	T X, LINE 2: IN JUNE 2006, THE FINANCIAL	ACCO	UNTING	STANI	ARD	S BOARD	
	SB) RELEASED FASB ASC 740-10, INCOME TAXE	_				IDANCE I	- OK
REF	ORTING UNCERTAINTY IN INCOME TAXES. FOR T	HE Y	EAR_ EN	DED DE		BER 31, dule D (Form 9	90) 2011
132054 01-23-	12				501100	C (1 OIII 3	23, 2011

Employer identification number Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. AMERICAN SOCIOLOGICAL ASSOCIATION General Information on Grants and Assistance Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part

OMB No 1545-0047 Open to Public Inspection

ž 13-5626343 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (below if applicable cash grant assistance other) 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table criteria used to award the grants or assistance? 1 (a) Name and address of organization PartII

Schedule | (Form 990) (2011) AMERICAN SOCIOLOGICAL ASSOCIATION

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 Part III can be duplicated if additional space is needed

Page 2

13-5626343

Schedule I (Form 990) (2011) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Ę PEER-REVIEWED BY MEMBERS OF THE ASA ADVISORY PANEL. FOR EACH GRANT PROGRAM, NEWSLETTER FOOTNOTES AND THE ASA WEBSITE. ALL APPLICATIONS RECEIVED WITHIN Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. APPLICATION DEADLINES ARE ANNOUNCED ON A REGULAR SCHEDULE THROUGH THE ASA STIPULATED FOR EACH GRANT PROGRAM. ASA'S VARIOUS GRANT PROGRAMS ARE OPEN AND TO INDIVIDUAL RECIPIENTS THE PURPOSES THE STATED DEADLINE FOR EACH FUNDING CYCLE FOR EACH GRANT PROGRAM ARE THE ADVISORY PANELS ARE PHD SOCIOLOGISTS SELECTED BY THE ELECTED ASA CRITIERIA, (d) Amount of non-cash assistance 0 BASED ON THE PEER REVIEW OF OBJECTIVE CRITERIA RELATED TO THE PROGRAMS, 000 96,500 26,000 9 360 84.820 (c) Amount of cash grant LINE 2: ASA AWARDS GRANTS ALL APPLICANTS WHO MEET SPECIFIED CRITERIA. (b) Number of recipients STIPENDS FOR MINORITY DOCTORAL STUDENTS NON-NIMH GRANTS TO PHD SOCIOLOGISTS FOR RESEARCH PROJECTS GRANTS FOR RESEARCH SOCIOLOGISTS FOR TEACHING GRANTS TO RESEARCH SOCIOLOGISTS FOR COMMUNITY STIPEND FOR CONGRESSIONAL FELLOWSHIP WINNERS (a) Type of grant or assistance ACTION INITIATIVE RESEARCH PROJECTS PART I, SPONSORED FELLOWSHIP PROGRAM ADVANCING THE DISCIPLINE ADVANCEMENT PROJECT SCHEDULE I, Part IV

SCHEDULE J .(Form 990)

Department of the Treasury

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.

AMERICAN SOCIOLOGICAL ASSOCIATION

2011

Open to Public Inspection

Name of the organization

► Attach to Form 990. ► See separate instructions.

Employer identification number

13-5626343

	art i Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided an	ny of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any re	elevant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees	İ	-	
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
L	If any of the house on line to are shooted did the annual state.	- fallen a weeks law and			
D	If any of the boxes on line 1a are checked, did the organization				
2	reimbursement or provision of all of the expenses described a	•	1b		
2	Did the organization require substantiation prior to reimbursin	•			
	trustees, and the CEO/Executive Director, regarding the items	s checked in line 1a/	2		
3	Indicate which, if any, of the following the filing organization u	used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check a	·			
	establish compensation of the CEO/Executive Director Expla				
	Compensation committee	X Written employment contract			
	Independent compensation consultant	X Compensation survey or study			
	Form 990 of other organizations	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, S	section A, line 1a, with respect to the filing			
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a		X
b	Participate in, or receive payment from, a supplemental nonq	ualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compared to the compa	pensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the a	applicable amounts for each item in Part III.			}
	0.1				
_	Only section 501(c)(3) and 501(c)(4) organizations must co	•			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did	u the organization pay or accrue any compensation			
_	contingent on the revenues of.		_		v
a h	The organization? Any related organization?	•	5a		X
U	If "Yes" to line 5a or 5b, describe in Part III.	• •	5b		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did	d the organization hav or accrue any componention			
٠	contingent on the net earnings of.	the organization pay or accrue any compensation	1 -		
а	7		6a		Х
	Any related organization?	·	6b		X
.,	If "Yes" to line 6a or 6b, describe in Part III	• • • • • • • • • • • • • • • • • • • •	100		<u> </u>
7	For persons listed in Form 990, Part VII, Section A, line 1a, did	d the organization provide any pon-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	a the organization provide any non-inted payments	7		x
8	Were any amounts reported in Form 990, Part VII, paid or acc	crued pursuant to a contract that was subject to the	 		
_	many mine or approved mine or and only paid of add	ness personal to a contract that may copper to the		1	ı

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initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2011

Regulations section 53.4958-6(c)?

AMERICAN SOCIOLOGICAL ASSOCIATION

Schedule J (Form 990) 2011

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

For each individual whose compensation must be reported 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)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	9	Q	(E)	(F)
					Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported as deferred in prior Form 990
	Ξ	212,979.	0	0.	19,245.	7,356.	239,580.	0
1 SALLY T. HILLSMAN	: <u>E</u>	:	0.	0.	0.	0.		0
ı	Ξ							
2	(E)							
	Ξ							
3	<u> </u>							
	Ξ							
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Schedule J (Form 990) 2011

Schedule K (Form 990) 2011 Š (i) Pooled financing Employer identification number × OMB No 1545-0047 Open to Public Inspection Yes 읟 Š (g) Defeased (h) On behalf 13-5626343 Yes No × ۵ of Issuer Yes ٩ × Yes å ŝ COND (f) Description of purpose O Yes 8000000 HEADQUARTERS Yes Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, O 단 PURCHASE ŝ ŝ See separate instructions. 8 œ Supplemental Information on Tax-Exempt Bonds explanations, and any additional information in Part VI. Yes Yes CONTINUATIONS eoud enssi (e) 8,000,000 560,000 8,000,000 × × ٥ ဍ 2008 (d) Date Issued 11/28/07 Yes Yes × 31 FOR COLUMN (F) SOCIOLOGICAL ASSOCIATION 53-60011312548392F9 132121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, ► Attach to Form 990. SEE PART VI (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds AMERICAN COLUMBIA Capital expenditures from proceeds Credit enhancement from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use Other unspent proceeds Amount of bonds retired bond-financed property? Total proceeds of issue Other spent proceeds ОF Name of the organization Bond Issues Department of the Treasury Internal Revenue Service A DISTRICT Proceeds SCHEDULEK (Form 990) Part II Part 2 6 9 4 15 9 4 8 ပ α = 12 5

AMERICAN SOCIOLOGICAL ASSOCIATION Schedule K (Form 990) 2011

13-5626343

Page 2

Part III Private Business Use (Continued)

	4		8		O		۵	•
3a Are there any management or service contracts that may result in private	Yes	No No	Yes	No	Yes	N _o	Yes	S _N
business use of bond-financed property?		×						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside							•	
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		×						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of								-
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government ▶		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the								
post-issuance compliance of its tax-exempt bond liabilities?	×						•	
Part IV Arbitrage								
	4		В		O		۵	
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	S _O	Yes	Š	Yes	No
Arbitrage Rebate, been filed with respect to the bond issue?		×						
2 Is the bond issue a variable rate issue?	×							
3a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?	×							
b Name of provider	PNC BANK							
c Term of hedge	26.900	0000006	•					
d Was the hedge superintergrated?		×						
e Was the hedge terminated?		×						
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		×						
6 Did the bond issue qualify for an exception to rebate?		×						

Procedures To Undertake Corrective Action Part V

ž Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement |X| Yes program if self-remediation is not available under applicable regulations

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K Part VI

SEE PART VI SUPPLEMENTAL EXPLANATION SHEET 132122 01-23-12

	ıle K (Form 9								SOCIATIO		13-562	
Part VI	Suppleme	ntal Infor	mation.	Complete 1	this par	t to provide	additional	informati	on for response	es to questio	ns on Sched	ule K.
SCHE	EDULE I	K, PA	RT I	, BOND	ISS	SUES:	·			.		
(A)	ISSUE	R NAM	E: D	STRIC	T OF	COLUM	IBIA					
(F)	DESCR	[PTIO	N OF	PURPO	SE:	PURCHA	SE OF	HEAD	QUARTERS	CONDOM	INIUM	
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

AMERICAN SOCIOLOGICAL ASSOCIATION

Employer identification number 13-5626343

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

PUBLICATIONS

EXPENSES \$ 337,606. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,850,467.

MEMBERSHIP AND SECTIONS: MEMBERSHIP SEEKS TO STIMULATE AND IMPROVE

RESEARCH, INSTRUCTION AND COOPERATIVE RELATIONS AMONG THOSE ENGAGED IN

EXPENSES \$ 485,229. INCLUDING GRANTS OF \$ 0. REVENUE' \$ 0.

THE SCIENTIFIC STUDY OF SOCIETY. ALL INTERESTED PERSONS MAY JOIN.

FORM 990, PART VI, SECTION A, LINE 6: ASA MEMBERS ENCOMPASS PRIMARILY:

SOCIOLOGISTS WHO ARE FACULTY MEMBERS, RESEARCHERS AND STUDENTS AT COLLEGES

AND UNIVERSITIES IN THE UNITED STATES; PHD SOCIOLOGISTS WHO ARE RESEARCHERS

AND PRACTITIONERS IN GOVERNMENT, BUSINESS AND NON-PROFIT ORGANIZATIONS; AND

SOME INTERNATIONAL PHD SOCIOLOGISTS AND STUDENTS.

FORM 990, PART VI, SECTION A, LINE 7A: THE ASA COUNCIL IS THE

ASSOCIATION'S GOVERNING BODY. IT IS COMPOSED OF 19 VOTING MEMBERS: TWELVE

ELECTED-AT-LARGE BY THE MEMBERSHIP AND SEVEN EX-OFFICIO ALSO ELECTED BY THE

MEMBERSHIP: PRESIDENT, PAST PRESIDENT, PRESIDENT-ELECT, VICE-PRESIDENT,

PAST-VICE-PRESIDENT, VICE-PRESIDENT-ELECT AND SECRETARY.

FORM 990, PART VI, SECTION A, LINE 7B: A DECISION BY THE COUNCIL THAT

RESULTS IN AN INCREASE IN DUES ABOVE COST-OF-LIVING ADJUSTMENTS ARE SUBJECT

TO APPROVAL BY ALL VOTING MEMBERS. THE COUNCIL IS REQUIRED BY THE BYLAWS TO

VOTE ON RESOLUTIONS SIGNED BY 3% OR MORE OF THE MEMBERSHIP IF IT INVOLVES A

MATTER THAT IS WITHIN THE POWERS OF THE COUNCIL. IF COUNCIL DOES NOT

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

Schedule O (Form 990 or 990-EZ) (2011)

1

132211 01-23-12 SUPPORT THE RESOLUTION, IT MUST GO TO THE MEMBERSHIP FOR A VOTE. THE RESULT OF THE MEMBERSHIP VOTE IS BINDING ON THE ASSOCIATION.

FORM 990, PART VI, SECTION B, LINE 11: UPON RECEIVING THE DRAFT FORM 990

FROM ITS ACCOUNTING FIRM, THE ASSOCIATION IMPLEMENTS A REVIEW PROCESS BY

WHICH THE DIRECTOR OF FINANCE, THE EXECUTIVE OFFICER, THE SECRETARY, A

MEMBER OF THE BOARD OF DIRECTORS AND CHAIR OF THE AUDIT COMMITTEE REVIEW

THE FORM AND SCHEDULES. ANY QUESTIONS THAT ARISE ARE DIRECTED BACK TO THE

ACCOUNTING FIRM FOR CONFIRMATION OR FURTHER RESOLUTION. UPON SATISFACTION

REGARDING THE COMPLETENESS OF THE RETURN, THE EXECUTIVE OFFICER SIGNS THE

FORM AND IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS
DISCUSSED BY THE EXECUTIVE OFFICER AND SECRETARY AT A FACE-TO-FACE MEETING
WITH ALL NEW MEMBERS OF COUNCIL AND EXECUTIVE OFFICE AND BUDGET (EOB)
BEFORE THEIR TERMS BEGIN. ALL READ AND SIGN THE CONFLICT OF INTEREST
STATEMENT WHICH IS KEPT ON RECORD AT THE ASA EXECUTIVE OFFICE. THE
EXECUTIVE OFFICER IS CHARGED UNDER THE ASA BYLAWS WITH DEVELOPING THE
AGENDAS FOR ALL COUNCIL AND EOB MEETINGS. PART OF THAT RESPONSIBILITY
INCLUDES SCANNING ALL AGENDA ITEMS FOR ANY THAT MIGHT RAISE PARTICULAR
CONFLICT OF INTEREST ISSUES. WHEN SUCH ISSUES ARE ON THE AGENDA OF COUNCIL
OR EOB MEETINGS, THE PRESIDENT, SECRETARY AND/OR EXECUTIVE OFFICER REMIND
MEMBERS OF THEIR OBLIGATIONS UNDER THE ASA POLICY AND THE MEANING OF THE
POLICY UNDER THE PARTICULAR CIRCUMSTANCES AT ISSUE BEING DISCUSSED. THE ASA
ALSO HAS A CODE OF ETHICS (WHICH INCLUDES CONFLICT OF INTEREST STANDARDS)
AND AN ENFORCEMENT MECHANISM. ALL ASA MEMBERS, INCLUDING THE ASSOCIATION
LEADERSHIP, MUST ABIDE BY THESE STANDARDS IN ALL ASPECTS OF THEIR

PROFESSIONAL LIFE, WHICH MAKES ATTENTION TO CONFLICT OF INTEREST MATTERS A

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01-23-12
Schedule O (Form 990 or 990-EZ) (2011)

132212 01-23-12

-402,246.

-981,263.

-1,383,509.

NET UNREALIZED LOSSES ON INVESTMENTS:

TOTAL TO FORM 990, PART XI, LINE 5

CHANGE IN FAIR VALUE OF INTEREST RATE SWAP OBLIGATION