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Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

TO ADVANCE EXCELLENCE IN ENDOCRINOLOGY AND PROMOTE ITS ESSENTIAL ROLE AS AN INTEGRATIVE FORCE IN SCIENTIFIC RESEARCH AND MEDICAL PRACTICE

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

checked

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

checked

No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured 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 \$ 8,646,573 including grants of \$ 476,298) (Revenue \$ 8,663,134)

MEETINGS & EDUCATION THE ENDOCRINE SOCIETY (TES) PROVIDES EDUCATIONAL PROGRAMS FOR RESEARCHERS AND CLINICAL MEDICAL PROFESSIONALS TO INCREASE THE UNDERSTANDING OF BIOMEDICAL RESEARCH INTO ENDOCRINE DISORDERS AND THE TREATMENT OF PATIENTS WITH ENDOCRINE-RELATED MEDICAL CONDITIONS TES IS ACCREDITED BY THE ACCREDITATION COUNCIL FOR CONTINUING MEDICAL EDUCATION (ACCME) AND ITS CONTINUING MEDICAL EDUCATION PROGRAMS ARE PLANNED AND CONDUCTED IN STRICT COMPLIANCE WITH ACCME STANDARDS AND REQUIREMENTS EACH YEAR TES HOLDS A FOUR-DAY EDUCATIONAL MEETING (ENDO) FOCUSED ON THE FIELD OF ENDOCRINOLOGY EACH ATTENDEE MAY EARN UP TO 33 CONTINUING MEDICAL EDUCATION (CME) CREDITS FOR THE CORE EDUCATIONAL PROGRAM TES ALSO HOLDS AN ANNUAL CLINICAL ENDOCRINOLOGY UPDATE (CEU) EVENT WHERE PROFESSIONALS MAY EARN UP TO 25 CME CREDITS, DEPENDING ON THE EDUCATION OPTIONS CHOSEN THE SOCIETY PROVIDES MANY OTHER OPPORTUNITIES FOR PROFESSIONAL EDUCATION AND CREDIT IN VARIOUS FORMATS DURING THE YEAR INCLUDING BUT NOT LIMITED TO IN-PERSON SPEAKER EVENTS, EDUCATIONAL BOOKS, ONLINE COURSES, STUDY GUIDES, MONOGRAPHS, AND WEBCASTS THE SOCIETY ALSO COLLABORATES WITH OTHER MEDICAL AND SCIENTIFIC PROFESSIONAL SOCIETIES AND OFTEN CO-SPONSORS EDUCATIONAL EVENTS WHEN THE TOPICS ARE OF INTEREST TO SOCIETY MEMBERSHIP AND ARE CONSISTENT WITH THE SOCIETY’S MISSION IN ORDER TO SUPPORT AND ENCOURAGE PARTICIPATION BY EARLY-CAREER PROFESSIONALS, THE SOCIETY OFTEN PROVIDES TRAVEL GRANTS AND AWARDS TO TRAINEES

4b

(Code) (Expenses \$ 6,207,965 including grants of \$ 8,000) (Revenue \$ 10,502,046)

PUBLICATIONS TES PUBLISHES SIX PEER-REVIEWED SCIENTIFIC JOURNALS AIMED AT FURTHERING THE UNDERSTANDING OF BIOMEDICAL RESEARCH INTO ENDOCRINE DISORDERS AND THE TREATMENT OF PATIENTS WITH ENDOCRINE-RELATED CONDITIONS THREE OF THE JOURNALS ARE PUBLISHED MONTHLY, TWO ARE PUBLISHED BI-MONTHLY, AND ONE IS PUBLISHED QUARTERLY EACH JOURNAL IS EDITED BY A GROUP OF ENDOCRINOLOGISTS WHO ARE ALSO MEMBERS OF THE SOCIETY IN ADDITION, EACH JOURNAL ARTICLE IS PEER REVIEWED BY SOCIETY MEMBERS WITH EXPERTISE IN THE SUBJECT MATTER OF THE ARTICLE/RESEARCH BEING PRESENTED APPROXIMATELY 3,400 MEMBERS DONATE TIME DURING THE YEAR TO THE PEER REVIEW PROCESS THE SOCIETY ALSO PUBLISHES A MONTHLY PERIODICAL THAT PROVIDES AN ANALYSIS OF THE SCIENTIFIC ADVANCES AND NEWS IN ENDOCRINOLOGY MEMBER CLINICIANS OFTEN DISSEMINATE THIS PUBLICATION TO THEIR PATIENTS AND OTHERS AS AN INFORMATIONAL RESOURCE ON THE CAUSES AND POSSIBLE TREATMENTS FOR ENDOCRINE DISORDERS THE PERIODICAL ALSO PROVIDES INFORMATION TO MEMBERS ON SOCIETY EVENTS, EDUCATIONAL OPPORTUNITIES, AND GENERAL NEWS IN THE FIELD OF ENDOCRINOLOGY

4c

(Code) (Expenses \$ 1,976,422 including grants of \$ 10,000) (Revenue \$ 106,226)

GOVERNMENT AND PUBLIC AFFAIRS TES IDENTIFIES ISSUES AND PUBLIC POLICY OBJECTIVES IMPORTANT TO THE PROFESSIONAL LIVES OF ITS MEMBERS AND ADVOCATES ON THEIR BEHALF THIS ADVOCACY TAKES SEVERAL FORMS INCLUDING COMMENTS TO FEDERAL AGENCIES, DEVELOPMENT OF POSITION STATEMENTS AND CLINICAL GUIDELINES, MEDIA OUTREACH, AND DIRECT LOBBYING THE SOCIETY ALSO REPRESENTS ITS MEMBERS’ INTERESTS THROUGH PARTICIPATION WITH OTHER GROUPS AND COALITIONS, SUCH AS THE AMERICAN MEDICAL ASSOCIATION (AMA) AND THE FEDERATION OF AMERICAN SOCIETIES OF EXPERIMENTAL BIOLOGY (FASEB) TES PUBLISHES A SEMI-MONTHLY ONLINE NEWSLETTER WITH A FOCUS ON HEALTH AND SCIENCE PUBLIC POLICY THAT IMPACTS THE ENDOCRINOLOGIST

(Code) (Expenses \$ 3,216,735 including grants of \$ 37,000) (Revenue \$ 1,991,683)

MEMBERSHIP, PUBLIC EDUCATION AND OTHER

4d

Other program services (Describe in Schedule O)

(Expenses \$ 3,216,735 including grants of \$ 37,000) (Revenue \$ 1,991,683)

4e

Total program service expenses

\$ 20,047,695

Form 990 (2011)

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4	Yes
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
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	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	Yes
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
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	No
c	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	No
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	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
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	Yes
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	Yes
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	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 	16	Yes
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

Part 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	338			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	98			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a	Yes			
b	If "Yes," enter the name of the foreign country CJ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
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).					
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?	7a				No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
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 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
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					
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?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	11	
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MD
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	JOHN R HEBERLEIN DEPUTY EXEC DIR & COO 8401 CONNECTICUT AVENUE NO 900 CHEVY CHASE, MD 208155817 (301) 941-0200

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	Former			
(1) KELLY MAYO PAST PRESIDENT	20 00	X		X				25,000	0	0
(2) ALAN ROGOL VICE PRESIDENT	15 00	X		X				0	0	0
(3) JANET HALL PRESIDENT	20 00	X		X				42,500	0	0
(4) URSULA KAISER VICE PRESIDENT	15 00	X		X				0	0	0
(5) NANETTE SANTORO VICE PRESIDENT	15 00	X		X				0	0	0
(6) JOHN MARSHALL SECY-TREAS	20 00	X		X				15,000	0	0
(7) RICHARD ROBBINS COUNCIL	6 00	X						0	0	0
(8) DALE E ABEL COUNCIL	6 00	X						0	0	0
(9) SHALENDER BHASIN COUNCIL	6 00	X						9,000	0	0
(10) TERESA WOODRUFF COUNCIL	6 00	X						0	0	0
(11) PETER TRAINER COUNCIL	6 00	X						0	0	0
(12) ALVIN POWERS COUNCIL	6 00	X						3,000	0	0
(13) JENNIFER LARSEN COUNCIL	6 00	X						0	0	0
(14) WILLIAM YOUNG PRESIDENT-ELECT	20 00	X		X				29,250	0	0
(15) SUSAN MANDEL COUNCIL	6 00	X						7,500	0	0
(16) GARY HAMMER COUNCIL	6 00	X						0	0	0
(17) GLORIA TANNENBAUM COUNCIL	6 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 (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	Former			
(18) DOLORES SHOBACK COUNCIL	6 00	X						8,500	0	0
(19) SCOTT HUNT EXEC DIR AND CEO	50 00			X				620,313	0	46,227
(20) JANET KREIZMAN DEPUTY EXEC DIR & CPO	50 00			X				253,221	0	32,054
(21) JOHN HEBERLEIN DEPUTY EXEC DIR, COO, CFO	50 00			X				299,153	0	43,523
(22) WANDA JOHNSON-BOATMAN SR DIRECTOR - MEETINGS AND EDUCATION	50 00				X			208,648	0	20,775
(23) PAUL HEDRICK SR DIRECTOR - FINANCE	50 00				X			151,332	0	20,898
(24) NANCY CHILL SR DIRECTOR - MARKETING	50 00				X			153,213	0	33,303
(25) STEVE POSTON DIRECTOR, IT	50 00					X		126,216	0	11,400
(26) ARLYN RISKIND DIRECTOR, MEDIA RELATIONS	50 00					X		111,411	0	29,745
(27) ROBERT BARTEL DIRECTOR, EDUCATION	50 00					X		115,100	0	17,774
(28) DIANA WARMANN MANAGER, FINANCIAL REPORTING	50 00					X		120,408	0	11,865
(29) REINA MUNSCH DIRECTOR, MARKETING	50 00					X		126,871	0	21,029
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,425,636	0	288,593

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

11

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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 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
OPUS SCIENCE LLC 6700 ALEXANDER BELL DRIVE SUITE 20 COLUMBIA, MD 21046	MEDICAL EDUCATION COMMUNIC SRVCS	446,500
KNIGHTEN HEALTH LLC 4800 HAMDEN LANE SUITE 200 BETHESDA, MD 20814	MEDICAL EDUCATION COMMUNICATION SRVCS	292,077
BLUE HOUSE 2168 WISCONSIN AVENUE NW WASHINGTON, DC 20007	PRINTING	169,283
WATKINS INFORMATION TECHNOLOGY GROUP LL 7700 WISCONSIN AVENUE SUITE 500 BETHESDA, MD 20814	IT SUPPORT SERVICES	164,221
MARATHON MULTIMEDIA LLC 1201 WEST DIVISION STREET FARIBAULT, MN 55021	EDUCATIONAL RECORDING & ABSTRACT PROCESS	145,731
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		8

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	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,953,297				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f			5,953,297			
Program Service Revenue			Business Code					
	2a	JOURNAL SALES	511120	8,012,390	8,012,390			
	b	MEETING & REGISTRATION	611600	5,667,695	5,667,695			
	c	AUTHOR CHARGES	511120	1,756,000	1,756,000			
	d	MEMBERSHIP DUES	900099	1,652,739	1,652,739			
	e	REPRINT SALES	511120	449,374	449,374			
	f	All other program service revenue		588,109	588,109			
	g	Total. Add lines 2a-2f			18,126,307			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			411,914		411,914	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties			595,126	521,300	73,826	
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		11,240,524						
		11,917,554						
		-677,030						
	d	Net gain or (loss)			-677,030		-677,030	
	8a	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 . . .						
	9a	Gross income from gaming activities See Part IV, line 19		a				
	b	Less direct expenses		b				
	c	Net income or (loss) from gaming activities . . .						
	10a	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						
11a	ADVERTISING REVENUE		541800	2,268,040		2,268,040		
b	HOTEL REBATES FROM MEE		900099	292,603	292,603			
c	SHUTTLE REVENUE		900099	28,250	28,250			
d	All other revenue			27,268	26,589	679		
e	Total. Add lines 11a-11d			2,616,161				
12	Total revenue. See Instructions			27,025,775	18,995,049	2,268,719	-191,290	

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)

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

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 United States See Part IV, line 21	138,698	138,698		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	311,400	311,400		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	81,200	81,200		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,241,100	484,476	1,565,108	191,516
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	5,282,936	3,920,195	1,126,080	236,661
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	472,669	383,727	82,145	6,797
9	Other employee benefits	408,275	289,564	79,209	39,502
10	Payroll taxes	374,037	281,607	79,286	13,144
11	Fees for services (non-employees)				
a	Management				
b	Legal	22,462	14,279	8,183	
c	Accounting	41,655		41,655	
d	Lobbying	96,843	96,843		
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	101,296		101,296	
g	Other	3,462,174	3,377,105	78,862	6,207
12	Advertising and promotion				
13	Office expenses	1,131,493	988,645	128,971	13,877
14	Information technology	150,114	1,090	149,024	
15	Royalties				
16	Occupancy	1,065,201	722,847	276,641	65,713
17	Travel	1,499,564	1,155,303	305,422	38,839
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,641,172	1,624,821	551	15,800
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	174,047	40,770	133,277	
23	Insurance	95,102	44,021	51,081	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	INCOME TAXES	391,931	391,931		
b	PRINTING & COMPOSITION	2,330,384	2,325,057	1,314	4,013
c	MARKETING & PROMOTION	1,205,259	1,166,483	9,727	29,049
d	HONORARIA	909,766	909,766		
e					
f	All other expenses	1,847,653	1,297,867	487,198	62,588
25	Total functional expenses. Add lines 1 through 24f	25,476,431	20,047,695	4,705,030	723,706
26	Joint costs. Check here ☒ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			11,502,507	2	11,519,905
	3	Pledges and grants receivable, net			65,933	3	44,900
	4	Accounts receivable, net			1,656,040	4	1,403,598
	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			931,586	9	1,402,341
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,290,183	248,554	10c	137,098
	b	Less accumulated depreciation	10b	2,153,085			
	11	Investments—publicly traded securities			26,250,079	11	29,270,502
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			455,025	15	517,837
	16	Total assets. Add lines 1 through 15 (must equal line 34)			41,109,724	16	44,296,181
Liabilities	17	Accounts payable and accrued expenses			2,504,112	17	2,058,724
	18	Grants payable				18	
	19	Deferred revenue			8,044,256	19	9,905,111
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			685,059	25	525,879
	26	Total liabilities. Add lines 17 through 25			11,233,427	26	12,489,714
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			27,568,686	27	28,866,042
	28	Temporarily restricted net assets			1,368,214	28	1,971,761
	29	Permanently restricted net assets			939,397	29	968,664
	Organizations that do not follow SFAS 117, check here ☐ 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			29,876,297	33	31,806,467
	34	Total liabilities and net assets/fund balances			41,109,724	34	44,296,181

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,025,775
2	Total expenses (must equal Part IX, column (A), line 25)	2	25,476,431
3	Revenue less expenses Subtract line 2 from line 1	3	1,549,344
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29,876,297
5	Other changes in net assets or fund balances (explain in Schedule O)	5	380,826
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	31,806,467

Part XII Financial Statements and Reporting

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

		Yes	No
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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

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.

Name of the organization ENDOCRINE SOCIETY	Employer identification number 73-0531256
---	--

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

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

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

☐

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

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

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

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☒

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

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry 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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Section A. Public Support						
Calendar 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 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage						
14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))		14				
15 Public Support Percentage for 2010 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2011. 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—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a 10%-facts-and-circumstances test—2011. 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—2010. 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						

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(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 qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar 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 include any "unusual grants.")	5,771,880	5,921,942	4,897,583	5,586,470	5,953,297	28,131,172
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	14,462,697	15,595,881	15,253,660	17,530,682	18,148,746	80,991,666
3 Gross receipts from activities that are not an unrelated trade or business under section 513	969,290	1,344,495	973,419	1,039,783		4,326,987
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	21,203,867	22,862,318	21,124,662	24,156,935	24,102,043	113,449,825
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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		357,363	118,729		726,436	1,202,528
c Add lines 7a and 7b		357,363	118,729		726,436	1,202,528
8 Public Support (Subtract line 7c from line 6)						112,247,297

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	21,203,867	22,862,318	21,124,662	24,156,935	24,102,043	113,449,825
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	788,057	804,656	725,341	705,481	1,007,040	4,030,575
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	686,160	685,932	372,286	863,963	602,095	3,210,436
c Add lines 10a and 10b	1,474,217	1,490,588	1,097,627	1,569,444	1,609,135	7,241,011
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)	72,896	207,580	311,110	281,542	325,722	1,198,850
13 Total support (Add lines 9, 10c, 11 and 12)	22,750,980	24,560,486	22,533,399	26,007,921	26,036,900	121,889,686
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	☐					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	92.090 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	93.360 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	5.940 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	5.870 %
19a 33 1/3% support tests—2011. 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—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	☐	

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization ENDOCRINE SOCIETY	Employer identification number 73-0531256
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1

Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2

Political expenditures

▶ \$

3

Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1

Enter the amount of any excise tax incurred by the organization under section 4955

▶ \$

2

Enter the amount of any excise tax incurred by organization managers under section 4955

▶ \$

3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes ☐ No

4a

Was a correction made?

☐ Yes ☐ No

b

If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

▶ \$

2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities

▶ \$

3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

▶ \$

4

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

☐ Yes ☐ No

5

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

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

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		5,514													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		138,819													
c Total lobbying expenditures (add lines 1a and 1b)		144,333													
d Other exempt purpose expenditures		23,892,924													
e Total exempt purpose expenditures (add lines 1c and 1d)		24,037,257													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	123,106	114,270	146,829	144,333	528,538
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	7,906	4,290	5,072	5,514	22,782

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

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

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

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

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

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

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
Attach to Form 990. See separate instructions.

Name of the organization ENDOCRINE SOCIETY	Employer identification number 73-0531256
---	--

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?	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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	☐ Yes ☐ No

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of a certified historic structure

2

Complete lines 2a–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 Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	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 taxable 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?

☐ Yes ☐ 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 170(h)(4)(B)(ii)?

☐ Yes ☐ 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

b

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	▶ \$ _____ 0
(ii)	Assets included in Form 990, Part X	▶ \$ _____ 212,450

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

a

☐ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☒ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

1b

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

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

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes☐ No

2b

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	1,041,337	872,574	616,032	544,342
1b	Contributions	29,267	89,793	120,825	84,937
1c	Investment earnings or losses	-2,186	84,470	137,492	-11,247
1d	Grants or scholarships	5,500	5,500	1,500	2,000
1e	Other expenditures for facilities and programs				
1f	Administrative expenses	467		275	
1g	End of year balance	1,062,451	1,041,337	872,574	616,032

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 8 560 %

b

Permanent endowment ▶ 71 170 %

c

Term endowment ▶ 20 270 %

3a

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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b

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

3b

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
1b Buildings				
1c Leasehold improvements		199,944	147,314	52,630
1d Equipment		2,090,239	2,005,771	84,468
1e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				137,098

Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	27,025,775
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	25,476,431
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,549,344
4	Net unrealized gains (losses) on investments	4	380,826
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	380,826
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,930,170

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	30,284,868
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	380,826
b	Donated services and use of facilities	2b	2,990,154
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	3,370,980
3	Subtract line 2e from line 1	3	26,913,888
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	101,296
b	Other (Describe in Part XIV)	4b	10,591
c	Add lines 4a and 4b	4c	111,887
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	27,025,775

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	28,354,698
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	2,990,154
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	2,990,154
3	Subtract line 2e from line 1	3	25,364,544
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	101,296
b	Other (Describe in Part XIV)	4b	10,591
c	Add lines 4a and 4b	4c	111,887
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	25,476,431

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, 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.

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE CLARK T. SAWIN MEMORIAL LIBRARY IS HOUSED AT THE ENDOCRINE SOCIETY'S OFFICE IN CHEVY CHASE, MARYLAND. THE LIBRARY COLLECTION INCLUDES MORE THAN 5,300 BOOKS, MEETING PROGRAMS FROM ENDOCRINE ORGANIZATIONS CIRCA 1930 THROUGH CURRENT DAY, PROFESSIONAL AND PERSONAL RESEARCH PAPERS, SLIDES AND MANY HISTORICAL ARTICLES. BY CATALOGING AND PRESERVING UNIQUE HISTORICAL ENDOCRINE LITERATURE AND ARTIFACTS, THE LIBRARY PLAYS AN IMPORTANT ROLE IN THE SOCIETY'S ROLE OF EDUCATION IN THE FIELD OF ENDOCRINOLOGY. BOOKS AND REFERENCE MATERIALS ARE ALL AVAILABLE FOR CIRCULATION.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE SOCIETY'S ENDOWMENT FUNDS HAVE BEEN ESTABLISHED FOR SPECIFIC PURPOSES AND ARE ADMINISTERED IN ACCORDANCE WITH THE DOCUMENTS THAT ESTABLISHED THE FUNDS. OF THE TOTAL YEAR-END BALANCE, THE FUNDS ARE INTENDED TO BE USED AS FOLLOWS: SAWIN LIBRARY COLLECTION AND OPERATING SUPPORT - 81%; AWARDS - 3%; TRAVEL GRANTS - 16%.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	MANAGEMENT DID NOT IDENTIFY ANY SIGNIFICANT UNCERTAIN INCOME TAX POSITIONS AND BELIEVES THE SOCIETY IS GENERALLY NO LONGER SUBJECT TO U.S. FEDERAL, STATE, OR LOCAL INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2008.
PART XII, LINE 4B - OTHER ADJUSTMENTS		BRIDGE GRANT REFUNDS 10,591
PART XIII, LINE 4B - OTHER ADJUSTMENTS		BRIDGE GRANT REFUNDS 10,591

1

(i) Method of valuation (book, FMV, appraisal, other)

3 Enter total number of other organizations or entities

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
ABSTRACT AWARD	EAP, EU, NA, SA	33	17,500	CHECK			
SUMMER RESEARCH AWARDS	EU, NA	3	12,000	CHECK			
STUDENT AUTHOR AWARD	NA	1	1,000	CHECK			
TRAVEL AWARDS	EAP, EU, NA, SA	43	17,200	CHECK			
RESEARCH AWARDS	EU, NA, SA	3	5,000	CHECK			
OUTSTANDING CONTRIBUTION TO ENDOCRINOLOGY	EU	2	28,000	CHECK			
INTERNATIONAL SCIENCE FAIR	EU	1	500	CHECK			

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

DLN: 93493317003242

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
ENDOCRINE SOCIETY

Employer identification number
73-0531256

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes

☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BAYLOR COLLEGE OF MEDICINEONE BAYLOR PLAZA HOUSTON,TX 77030	74-1613878	501(C)(3)	9,640				SPONSORSHIP OF SUMMER RESEARCH STUDENTS
(2) FEDERATION OF AMERICAN SOCIETIES FOR EXPERIMENTAL BIOLOGY 9650 ROCKVILLE PIKE BETHESDA,MD 20814	52-0700497	501(C)(3)	10,000				CO-SPONSOR OF EDUCATIONAL PROGRAM
(3) UNIVERSITY OF COLORADOMAILSTOP F428 DENVER,CO 802910238	84-6000555	501(C)(3)	13,211				SPONSORSHIP OF SUMMER RESEARCH STUDENTS
(4) AMERICAN DIABETES ASSOCIATION1701 NORTH BEAUREGARD STREET ALEXANDRIA,VA 22311	13-1623888	501(C)(3)	25,000				CO-SPONSOR OF EDUCATIONAL PROGRAM
(5) REGENTS OF UNIVERSITY OF CALIFORNIA1855 FOLSOM ST SAN FRANCISCO,CA 94143	94-5035493	501(C)(3)	39,124				VISITING PROFESSOR SPONSORSHIP
(6) UNIVERSITY OF VIRGINIAPO BOX 400229 CHARLOTTESVILLE,VA 229044229	54-6001796	501(C)(3)	19,107				SPONSORSHIP OF SUMMER RESEARCH STUDENTS

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

6

3

Enter total number of other organizations listed in the line 1 table ▶

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ENDOCRINE RESEARCH GRANTS - SEVERAL TYPES CLINICAL RESEARCH GRANTS FOR MD'S OR PHD CANDIDATES AWARDS ARE BASED ON AN APPLICATION PROCESS THAT INCLUDES SPECIFIC RESEARCH UNDER A MENTOR WHO IS A SOCIETY MEMBER COMPLETION REQUIRES THAT AN ABSTRACT WILL BE PRESENTED AT THE SOCIETY'S ANNUAL EDUCATIONAL MEETING AND THAT AN ARTICLE PUBLISHED IN A PEER-REVIEWED JOURNAL SHOULD RESULT FROM THE RESEARCH LECTURE AWARDS THESE AWARDS ARE GIVEN FOR COMPLETED RESEARCH THE AWARDEE IS REQUIRED TO PROVIDE A LECTURE ON THEIR RESEARCH AT THE SOCIETY'S ANNUAL EDUCATIONAL MEETING SUMMER RESEARCH AWARDS THESE AWARDS ARE TO FUND PROMISING UNDERGRADUATE, GRADUATE, AND MEDICAL STUDENTS WHO INTEND TO PURSUE CAREERS IN ENDOCRINOLOGY THE STUDENTS PARTICIPATE IN RESEARCH PROJECTS UNDER THE GUIDANCE OF A SOCIETY MEMBER FOR 10 - 12 WEEKS IN THE SUMMER THE SOCIETY MEMBER ACTS AS ADVISOR AND EVALUATES THE STUDENTS' WORK TRAVEL AWARDS TRAVEL AWARDS ARE FOR TRAINEES IN ENDOCRINOLOGY TO TRAVEL TO THE SOCIETY'S ANNUAL EDUCATIONAL MEETING THE CHECKS ARE DISTRIBUTED AT THE MEETING IT IS ASSUMED THE ATTENDEE NEEDED THE FUNDS FOR TRAVEL IF THEY ATTENDED THE MEETING IF AN AWARDEE DOES NOT ATTEND THE MEETING, THE AWARD IS NOT PROVIDED TO THEM AWARDS FOR OUTSTANDING CONTRIBUTIONS TO THE FIELD OF ENDOCRINOLOGY ARE BASED ON NOMINATIONS FROM MEMBERS OF THE SOCIETY THEY ARE GIVEN FOR A BODY OF WORK DURING THE CAREER OF THE WINNER AND THERE IS NO REQUIREMENT TO MONITOR THE USE OF FUNDS INTERNATIONAL AWARD FOR EXCELLENCE IN PUBLISHED CLINICAL RESEARCH IN JCE & M THIS AWARD RECOGNIZES THE FOUR BEST CLINICAL RESEARCH PAPERS THAT APPEAR IN THE JCE & M IN THE PRIOR YEAR IT IS DECIDED BY A JURIED PANEL OF EXPERTS THERE IS NO NEED TO MONITOR THE USE OF FUNDS BECAUSE THE AWARDS ARE FOR WORK ALREADY PERFORMED ALL OTHER GRANTS AND AWARDS ARE GIVEN BASED ON AN APPLICATION OR A NOMINATION BY A SOCIETY MEMBER THAT REFERENCES CERTAIN WORK OF THE APPLICANT, SUCH AS A SCIENTIFIC ABSTRACT, AN ARTICLE, A POSTER, EXCELLENCE IN EDUCATION, OR A BODY OF WORK SOME OF THE AWARDS STIPULATE THAT THE AWARDEE PRESENT A POSTER OR GIVE AN ORAL PRESENTATION AT THE SOCIETY'S ANNUAL EDUCATIONAL MEETING HOWEVER, SINCE THE GRANT/AWARD IS GIVEN FOR WORK ALREADY COMPLETED, THERE IS NO NEED TO MONITOR THE USE OF THE FUNDS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization ENDOCRINE SOCIETY	Employer identification number 73-0531256
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Part I

Questions Regarding Compensation

	Yes	No
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		
☐ First-class or charter travel		
☐ Travel for companions		
☐ Tax idemnification and gross-up payments		
☐ Discretionary spending account		
☐ Housing allowance or residence for personal use		
☐ Payments for business use of personal residence		
☐ Health or social club dues or initiation fees		
☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
☒ Compensation committee		
☒ Independent compensation consultant		
☒ Form 990 of other organizations		
☒ Written employment contract		
☒ Compensation survey or study		
☒ 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?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only 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?		No
b Any related organization?		No
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?		No
b Any related organization?		No
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	Yes	
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		No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SCOTT HUNT	(i)	454,313	166,000	0	24,500	33,236	678,049	0
	(ii)	0	0	0	0	0	0	0
(2) JANET KREIZMAN	(i)	238,221	15,000	0	24,000	13,229	290,450	0
	(ii)	0	0	0	0	0	0	0
(3) JOHN HEBERLEIN	(i)	279,153	20,000	0	24,500	27,503	351,156	0
	(ii)	0	0	0	0	0	0	0
(4) WANDA JOHNSON-BOATMAN	(i)	196,148	12,500	0	19,500	5,198	233,346	0
	(ii)	0	0	0	0	0	0	0
(5) PAUL HEDRICK	(i)	148,832	2,500	0	3,875	25,194	180,401	0
	(ii)	0	0	0	0	0	0	0
(6) NANCY CHILL	(i)	145,713	7,500	0	15,080	27,598	195,891	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Identifier	Return Reference	Explanation
	PART I, LINE 4B	SCOTT HUNT, CEO AND EXECUTIVE DIRECTOR, 457(F) PLAN. THIS PLAN, EFFECTIVE JANUARY 2011, PERMITS MR. HUNT TO DEFER CERTAIN AMOUNTS OF HIS ANNUAL COMPENSATION FROM 2011 THROUGH 2013. EACH YEAR THE PERFORMANCE AND COMPENSATION COMMITTEE SHALL DETERMINE WHETHER ANY CREDITS WILL BE MADE TO THE 457(F) ACCOUNT AND, IF SO, IN WHAT AMOUNT. ALL AMOUNTS CREDITED TO THE 457(F) ACCOUNT SHALL BE FORFEITABLE BY MR. HUNT UNTIL JANUARY 1, 2014, WITH LIMITED EXCEPTION FOR DEATH OR DISABILITY. ALL AMOUNTS CREDITED TO THE 457(F) ACCOUNT SHALL BE DISTRIBUTED TO MR. HUNT OR HIS BENEFICIARY WITHIN 60 DAYS AFTER THEY ARE NO LONGER SUBJECT TO SUBSTANTIAL RISK OF FORFEITURE. IN 2011, \$72,000 WAS CREDITED TO THE 457(F) ACCOUNT.
	PART I, LINE 7	DISCRETIONARY YEAR-END BONUSES. ALL EMPLOYEES ARE ELIGIBLE FOR THESE BONUSES. THEY ARE BASED PRIMARILY ON WORK PERFORMANCE DURING THE YEAR AND ARE GIVEN AT THE SAME TIME AS ANNUAL SALARY INCREASES.

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ENDOCRINE SOCIETY

Employer identification number
73-0531256

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance
(1) WILLIAM YOUNG	COUNCIL MEMBER	3,000
(2) SUSAN MANDEL	COUNCIL MEMBER	3,000

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ENDOCRINE SOCIETY

Employer identification number
73-0531256

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	MEMBERSHIP SHALL CONSIST OF ACTIVE MEMBERS, EMERITUS MEMBERS, AND DOCTORAL-LEVEL TRAINEES, ALL OF WHOM ARE ENTITLED TO ONE VOTE ON MATTERS REQUIRING MEMBERSHIP ACTION
	FORM 990, PART VI, SECTION A, LINE 7A	THREE CLASSES OF MEMBERS HAVE THE RIGHT TO ELECT MEMBERS OF THE COUNCIL (GOVERNING BODY) ACTIVE MEMBERS, EMERITUS MEMBERS, AND DOCTORAL-LEVEL TRAINEE MEMBERS THERE IS AN ANNUAL ELECTION FOR CERTAIN OFFICERS AND A ROTATING PORTION OF THE COUNCIL MEMBERS
	FORM 990, PART VI, SECTION A, LINE 7B	DECISIONS THAT REQUIRE MEMBER APPROVAL ARE 1) BYLAW AMENDMENTS REQUIRE AN AFFIRMATIVE VOTE OF THREE-FIFTHS OF THE MEMBERSHIP RESPONDING WITHIN 45 DAYS AFTER THE TRANSMISSION OF THE BALLOT TO THE MEMBERS 2) REMOVAL OF OFFICERS, COUNCIL MEMBERS, OR APPOINTED OFFICIALS REQUIRES A VOTE OF TWO-THIRDS OF THE MEMBERSHIP RESPONDING TO THE BALLOT
	FORM 990, PART VI, SECTION B, LINE 11	A DETAILED REVIEW OF THE FORM 990 IS PERFORMED BY THE FINANCE MANAGER, THE SENIOR DIRECTOR-FINANCE, AND THE CHIEF OPERATING OFFICER THE CHIEF OPERATING OFFICER REVIEWS THE FORM 990 WITH THE SECRETARY-TREASURER PRIOR TO FILING THE COUNCIL MEMBERS AND OFFICERS HAVE THE OPPORTUNITY TO REVIEW THE FORM 990 PRIOR TO FILING WITH THE IRS
	FORM 990, PART VI, SECTION B, LINE 12C	COUNCIL MEMBERS AND KEY EMPLOYEES ARE REQUIRED TO READ AND SIGN A CONFLICT OF INTEREST STATEMENT ANNUALLY THEY ARE REQUIRED TO DISCLOSE, IN WRITING, ANY CONFLICTS FROM BUSINESS TRANSACTIONS THAT WOULD NEED TO BE LISTED ON SCHEDULE L, PART IV THE FORMS ARE REVIEWED AND SIGNED BY A STAFF LIAISON AND A STAFF SENIOR DIRECTOR IN CHARGE OF GOVERNANCE WHO DETERMINES WHETHER AN ACTUAL CONFLICT EXISTS IN ADDITION, THE CONFLICT OF INTEREST STATEMENT IS READ AT THE BEGINNING OF EACH COUNCIL MEETING AND INDIVIDUALS ARE REQUIRED TO DISCLOSE ANY NEW CONFLICTS THEY ARE AWARE OF ARISING FROM THEIR OWN OR OTHER COUNCIL MEMBERS' ACTIVITIES COUNCIL MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM VOTING ON ANY ISSUE IN WHICH THEY HAVE A CONFLICT OF INTEREST DEPENDING ON THE CONFLICT, THEY MAY ALSO BE REQUIRED TO LEAVE THE MEETING DURING THE DISCUSSION AND DELIBERATIONS AND THEY MAY NOT BE COUNTED IN DETERMINING A QUORUM FOR THE MEETING MEETING MINUTES REFLECT ANY RECUSAL
	FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE DIRECTOR'S PROPOSED COMPENSATION IS REVIEWED BY THE PERFORMANCE AND COMPENSATION COMMITTEE (P&CC) OF THE SOCIETY IN OCTOBER OR NOVEMBER OF THE CALENDAR YEAR BEFORE IT TAKES EFFECT THE P&CC IS COMPOSED OF THE SECRETARY-TREASURER, CURRENT PRESIDENT, PRESIDENT-ELECT, AND IMMEDIATE PAST PRESIDENT AN INDEPENDENT CONSULTANT PERFORMS A COMPENSATION STUDY OF OTHER COMPARABLE PROFESSIONAL ASSOCIATIONS AND DISCUSSES THE RESULTS WITH THE P&CC THE COMMITTEE EVALUATES THE PROPOSED COMPENSATION IN LIGHT OF THE SURVEY FOR MARKET REASONABLENESS AND THE IRS INTERMEDIATE SANCTIONS RULES THE P&CC APPROVES A COMPENSATION AMOUNT A WRITTEN EMPLOYMENT CONTRACT BETWEEN THE SOCIETY AND THE EXECUTIVE DIRECTOR HAS BEEN APPROVED BY THE COUNCIL THE P&CC ALSO REVIEWS SALARIES FOR THE REMAINING KEY EMPLOYEES (SENIOR DIRECTORS) IN OCTOBER OR NOVEMBER THE INDEPENDENT CONSULTANT PERFORMS A COMPENSATION STUDY OF OTHER COMPARABLE PROFESSIONAL ASSOCIATIONS TO DETERMINE MARKET REASONABLENESS OF SALARIES HE ALSO DISCUSSES THE IRS INTERMEDIATE SANCTIONS RULES WITH THE P&CC TO ENSURE THAT THEY UNDERSTAND THE SALARY LEVELS ARE APPROPRIATE IN LIGHT OF THOSE RULES
	FORM 990, PART VI, SECTION C, LINE 19	THE ENDOCRINE SOCIETY'S BYLAWS AND ITS CONFLICT OF INTEREST POLICY ARE AVAILABLE ON ITS WEBSITE WWW.ENDO-SOCIETY.ORG THE SOCIETY'S FINANCIAL STATEMENTS, AS THEY APPEAR IN ITS FORM 990, ARE AVAILABLE ON A PUBLIC WEBSITE (WWW.GUIDESTAR.ORG) OR UPON REQUEST TO THE SOCIETY THE SOCIETY ALSO PRESENTS AN ABBREVIATED FORM OF ITS AUDITED FINANCIAL STATEMENTS AS A PART OF ITS ANNUAL REPORT, WHICH IS AVAILABLE ON ITS WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 380,826
	FORM 990, PART XII, LINE 2C	THE PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ENDOCRINE SOCIETY

Employer identification number
73-0531256

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) THE HORMONE FOUNDATION 8401 CONNECTICUT AVENUE CHEVY CHASE, MD 208155817 91-1800236	PUBLIC EDUCATION-HORMONE RELATED HEALTH CONDITION	MD	501(C)(3)	509(A)(1)			No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

1

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

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:
Software Version:
EIN: 73-0531256
Name: ENDOCRINE SOCIETY

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services
(Code) (Expenses \$ 3,216,735 including grants of \$ 37,000) (Revenue \$ 1,991,683)
MEMBERSHIP, PUBLIC EDUCATION AND OTHER

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

(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	Former				
KELLY MAYO PAST PRESIDENT	20 00	X		X					25,000	0	0
ALAN ROGOL VICE PRESIDENT	15 00	X		X					0	0	0
JANET HALL PRESIDENT	20 00	X		X					42,500	0	0
URSULA KAISER VICE PRESIDENT	15 00	X		X					0	0	0
NANETTE SANTORO VICE PRESIDENT	15 00	X		X					0	0	0
JOHN MARSHALL SECY-TREAS	20 00	X		X					15,000	0	0
RICHARD ROBBINS COUNCIL	6 00	X							0	0	0
DALE E ABEL COUNCIL	6 00	X							0	0	0
SHALENDER BHASIN COUNCIL	6 00	X							9,000	0	0
TERESA WOODRUFF COUNCIL	6 00	X							0	0	0
PETER TRAINER COUNCIL	6 00	X							0	0	0
ALVIN POWERS COUNCIL	6 00	X							3,000	0	0
JENNIFER LARSEN COUNCIL	6 00	X							0	0	0
WILLIAM YOUNG PRESIDENT-ELECT	20 00	X		X					29,250	0	0
SUSAN MANDEL COUNCIL	6 00	X							7,500	0	0
GARY HAMMER COUNCIL	6 00	X							0	0	0
GLORIA TANNENBAUM COUNCIL	6 00	X							0	0	0
DOLORES SHOBACK COUNCIL	6 00	X							8,500	0	0
SCOTT HUNT EXEC DIR AND CEO	50 00			X					620,313	0	46,227
JANET KREIZMAN DEPUTY EXEC DIR & CPO	50 00			X					253,221	0	32,054
JOHN HEBERLEIN DEPUTY EXEC DIR, COO, CFO	50 00			X					299,153	0	43,523
WANDA JOHNSON-BOATMAN SR DIRECTOR - MEETINGS AND EDUCATION	50 00				X				208,648	0	20,775
PAUL HEDRICK SR DIRECTOR - FINANCE	50 00				X				151,332	0	20,898
NANCY CHILL SR DIRECTOR - MARKETING	50 00				X				153,213	0	33,303
STEVE POSTON DIRECTOR, IT	50 00					X			126,216	0	11,400

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

(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	Former			
ARLYN RISKIND DIRECTOR, MEDIA RELATIONS	50 00					X		111,411	0	29,745
ROBERT BARTEL DIRECTOR, EDUCATION	50 00					X		115,100	0	17,774
DIANA WARMANN MANAGER, FINANCIAL REPORTING	50 00					X		120,408	0	11,865
REINA MUNSCH DIRECTOR, MARKETING	50 00					X		126,871	0	21,029

Software ID:
Software Version:
EIN: 73-0531256
Name: ENDOCRINE SOCIETY

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
ABSTRACT AWARDS	66	33,500			
EDUCATOR	2	8,000			
INTERNATIONAL SCIENCE FAIR	2	1,500			
JCEM AWARD	4	4,000			
OUTSTANDING CONTRIBUTIONS TO ENDOCRINOLOGY	3	9,000			
POSTER AWARDS	8	1,400			
RESEARCH	7	62,000			
STUDENT AUTHOR	3	3,000			
SUMMER RESEARCH	13	47,100			
TRAVEL AWARDS	153	141,900			