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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A	For the	2012 calendar year, or tax year beginning and ending		
В	Check if applicable	C Name of organization	D Employer identific	ation number
_	Addres			
늗	change Name	AMERICAN SOCIOLOGICAL ASSOCIATION	12 54	526343
늗	lchange	Doing Business As Number and street (or P.0. box if mail is not delivered to street address) Room/su		020343
F	return Termin	· ·		883-9005
	lated Ameno lreturn		G Gross receipts \$	6,960,209.
	Applic	WASHINGTON, DC 20005	H(a) Is this a group ret	
	pendin	F Name and address of principal officer SALLY T. HILLSMAN	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates incli	uded? Yes No
			·	ist (see instructions)
		e: WWW.ASANET.ORG	H(c) Group exemption	
	art I	organization: X Corporation Trust Association Other ► L Y Summary	ear of formation: 1943 M	State of legal domicile: DC
		Briefly describe the organization's mission or most significant activities SEE PART	III, LINE 1.	
ည	1	briefly describe the organization's mission of most significant activities <u>DEE FART</u>	TIT, DIME I.	
Governance	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net ass	sets
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
ত ভ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	34
Activities	6	Total number of volunteers (estimate if necessary)	6	100
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	267,492.
_	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8	Contributions and grants (Part VIII, line 1h)	Prior Year 2,190,256.	Current Year 2,115,895.
nue	9	Program service revenue (Part VIII, line 2g)	4,252,326.	4,280,662.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)	205,436.	365,207.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 19c, and 11e)	65,898.	56,164.
	12	Total revenue - add lines 8 through (7) (must equal Par VIII, column (A), line 12)	6,713,916.	6,817,928.
	13	Grants and similar amounts paid (Part X, column (A), lines 1,80	220,680.	271,102.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ses	15	Salaries, other compensation employed benefits (Part IX, column (A), lines 5-10)	3,246,165.	3,208,651.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ë	17	Total fundraising expenses (Part IX, column (0)), the 25) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3,053,448.	3,435,020.
	1	Total expenses Add lines 13·17 (must equal Part IX, column (A), line 25)	6,520,293.	6,914,773.
	19	Revenue less expenses Subtract line 18 from line 12	193,623.	-96,845.
50	ß		Beginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)	18,203,266.	18,829,244.
AS	21	Total liabilities (Part X, line 26)	11,024,535.	11,008,200.
3	22	Net assets or fund balances Subtract line 21 from line 20	7,178,731.	7,821,044.
	art II	Signature Block	 	
~	•	Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta		knowledge and belief, it is
	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge	0.1
フ フSig	20	Signature of officer Court Court Court	Date S/G	ttbu 2013
_	ere	SALLY T. HILLSMAN, EXECUTIVE DIRECTOR		
) '''		Type or print name and title		
. — !	-	Print/Type preparer's name Preparer's highatur	Date Check	PJIN
-	id	DAVID F. GRALING CPA DAVI F. Sun CPA	/0-29-/3 If self-employe	P 00346995
Pa Pro	eparer	Firm's name GELMAN, ROSENBERG & FREEDMAN	Firm's EIN	52-1392008
Us	e Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		
		BETHESDA, MD 20814-2930	Phone no. (3	<u>301) 951-9090</u>
		RS discuss this return with the preparer shown above? (see instructions)		X Yes No
232	2001 12-1	₀₋₁₂ LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2012)

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

	990 (2012) AMERICAN SOCIOLOGICAL ASSOCIATION	13-5626343	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission		
	TO STIMULATE AND IMPROVE RESEARCH, INSTRUCTION AND DISC	USSION, AND	TO
	ENCOURAGE COOPERATIVE RELATIONS AMONG PERSONS ENGAGED I	N THE	-
	SCIENTIFIC STUDY OF SOCIETY.		
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	X 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	X 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 expense	s
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported	,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4a	(Code) (Expenses \$ 2,075,156. including grants of \$ 249,852.) (Reven	33	622.)
	CARRIED OUT FEDERALLY FUNDED- AND SELF-FUNDED RESEARCH		,
	PERTAINING TO THE SCIENTIFIC STUDY OF SOCIETY. SCIENTI	·	
	SOCIOLOGICAL METHODS WERE APPLIED TO OBSERVE, ATTAIN, A		
	DATA; AND MECHANISMS WERE IMPLEMENTED TO DISSEMINATE FI		
	FACILITATE INSTRUCTION AND DISCUSSION.		
	THE THE PROPERTY OF THE PROPER		
			
4b	(Code) (Expenses \$1, 228, 023. including grants of \$) (Reven	ue \$ 1,145,	342.1
		US COURSES,	, , ,
	COMMITTEE MEETINGS, PRESENTATIONS, WORKSHOPS AND CONFER		
	OSTATITUD INDUITION TIMED CONTINU	шисьь.	
			
		•	
			
		•	
		· · · · · · · · · · · · · · · · · · ·	
4c	(Code) (Expenses \$ 820,700 · including grants of \$ 21,250 ·) (Reven	ue \$	
		I-ANNUAL, AN	ND ,
		IPTS AND BOO	
-	REVIEWED PRIOR TO PUBLICATION.		
		····	
71.1	Other program services (Describe in Schedule O)		
40		101 600 1	
1-	(Expenses \$ 923,682 · including grants of \$) (Revenue \$ 3, Total program service expenses ► 5,047,561 ·	101,698.)	
40	Total program Service expenses ► J, U47, JU1.		990 (2012)
23200	2	Form:	550 (2012)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
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		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		37
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40	х	
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	10		
''	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		٠,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		7,	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	X	
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		¥
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X _X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u></u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			٦,
00 -	complete Schedule G, Part III	19	 	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	-	Х
	in 165 to mio 204, old the diganization attach a copy of its addited illiandal statements to this feturity	20b	990	(2012)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			:
	Schedule K If "No", go to line 25	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			٠,,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		v
00	Schedule L, Part I	25b	.	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	i '	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	_20_		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			İ
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	_33_	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	,,
	If "Yes," complete Schedule R, Part V, line 2	36	├	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38 Form	X	<u> </u> (2012)
		LOUL	930	(2012)

Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable Enter the number of Forms w-2G included in line 1a. Enter -0 if not applicable Differ the number of Forms w-2G included in line 1a. Enter -0 if not applicable Differ the number of Forms w-2G included in line 1a. Enter -0 if not applicable Differ the number of Forms w-2G included in line 1a. Enter -0 if not applicable Differ the number of Forms w-2G included in line 1a. Enter -0 if not applicable Differ the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. Enter the number of well and the organization of all required feederal employment tax returns? Note. If the sum of line is a Gaze is greater than 500,00 uran yet required to e-Rie (see instructions) By Max Was the congenization were unrelated businesses gross income of \$1,000 or more during the year? By If Yes, and the differ of year of the year of Foreign Basin and Financial Accounts Been instructions for file in general country (such as a bank account, securities account, or other financial accounts Been instructions for file in general country (such as a bank account, securities account in a trender of the programments for Form TDF \$90,21, Report of Foreign Basin and Financial Accounts Been instructions for file in general country (such as a bank account, securities accounts of the programments of Foreign TDF \$90,21, Report of Foreign Basin and Financial Accounts Been instructions for the greater of Foreign Basin and Financial Accounts Been instructions for file in the organization has the ser	Pai	Check if Schedule O contains a response to any question in this Part V				
1a Enter the number reported in Box 3 of form 1086 Enter 0.1 not applicable 6. Enter the number of Forms W20. Included in line 1. Enter 0.4 in dra applicable 6. Did the organization comply with beckup withholding rules for reportable payments to vendors and reportable gaming (gamiling) winnings to prize a winness? 2. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, liked for the calendar year ending with or within the year covered by this return. 8. If all least one is reported on line 23, did the organization file all required federal employment tax returns? 8. Note: If the sum of lines 1a and 2 as greater than 250, you may be required to e-rife (see instructions) 8. Did the organization have unrelated business gross income of \$1,000 or more dump the year? 8. At any time dump the calendar year, did the organization file all reports on the state of the authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 8. Enter the number of the organization file organization and the organization file organization at any time dump the calendary year, did the organization file organization at any time dump. 8. Was the organization a past yie to a prohibet dus whether transaction at any time dump the tax year? 9. Did any tixable party notify the organization that it was or in a party to a prohibet dus whether transaction? 9. If Yea," or the file organization that was or in a party to a prohibet dus shelter transaction? 9. Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization soliton any contributions that were not tax deductibles or that were or that any orthoributions that were not tax deductibles as chantable contributions? 9. Did the organization receive a payment is access of \$75 made party as a contribution or quark party for the organization receive a payment is access of \$75 made party as a contribution or quark party for the party or		Office in Schedule O Contains a response to any question in this Part V		—т		
b Enter the number of Forms W2C included in line 1a. Enter 0-1 not applicable Did the organization comply with backing witholding rules for reportable payments to vendors and reportable garning (gambling) winnings to prize winness? 22 Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, lied for the calendar year ending with or within the year covered by this return 34 bill at least one is reported on line 2a, did the organization the all required federal employment tax returns? Note, if the sum of lines 1a and 2 is greater than 250, you may be required to e-life (see instructions) 35 bill the organization have unrelated business gross income of \$1,000 or more during the year? 36 bill **Yes**, **Inst a filed a Form 950 for fithe year **I** **No.**, **Provide an explanation in Schedule** O 48 At any time during the calendar year, did the organization have an interest in, or a significant or other suthority over, a financial account? 49 bill **Yes**, **Inster the name of the foreign country } ▶ 50 bill **Yes**, **Inster the name of the foreign country } ▶ 51 bill **Yes**, **Inster the name of the foreign country } ▶ 52 was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 53 bill **Yes**, **Inster the name of the foreign country } ▶ 54 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 55 bill **Yes**, **Inster the name of the foreign country } ▶ 56 Did any time 5a or 5b, did the organization file Form 8888 17 57 Organizations that may receive deductible contributions? 58 Did the organization state and prosess receipts that are normally greater than \$100,000, and did the organization solicit any contributions that where not tax eductible contributions of any contributions that they or it as party to a prohibited tax shelter transaction of the same of the solicit and the organization solicit any contributions are applied to the organization solicit any contributi		Takes the growth or year stand or Day 2 of Form 1000. Fator 0, finely analysis like	4.0	+	Yes	No
c Dut the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of imployees reported on Form W3. Transmittal of Wage and Tax Statoments, field for the calendar year ending with or within the year covered by this return. 3 If all least one is reported on the 23, did the organization feel affecting deferred ending the state of the State of		· · · · · · · · · · · · · · · · · · ·				
gambling) winnings to prize winners? 2			4			
2a Stert the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, ledd for the calendar year ending with or within the year covered by this return If all least one is reported on him 2a, did the organization hie all inequired 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) 3 bit 1 "Yes," has it filed a Form 990.1" for this year? If "No," provide an explanation in Schedule O 3 At any time during the calendar year, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 bit 1"Yes," the time the name of the foreign country (such as a bank account, securities account, or other financial accounts 5 was the organization have the foreign country to a prohibited tax shelter transaction at any time during the tax year? 5 bit 1"Yes," to line 5a or 5b, did the organization his Form 8886-17? 6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions in clude with every solicitation an express statement that such contributions or girts were not tax deductible? 6 organization have ye solicitation an express statement that such contributions or girts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 bit 1"Yes," indicate the number of Forms 88282 filed during the year 9 of the organization seceive a payment in excess of 355 made partly as contributions and partly for goods and services provided? 10 the organization received a contribution of the value of the ogods or services provided? 10 the organization received an contribution of or the value of the ogods or services provided? 11 "Yes," indicate the number of Forms 8282 filed during the year 12 bit the organization may be a provided to the payor? 13 bit the orga	С			.	v	
tiled for the calendar year ending with or within the year covered by this return If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 5b. If "Yes," has it filed a Form 990 901 for this year? If "No., "provide an explanation in Schedule O 5b. If "Yes," has the filed a Form 990 901 for this year? If "No., "provide an explanation in Schedule O 5c. The state of the filed a Form 990 Poly of the year? 5c. The state of the stat	0-			ic	^	<u> </u>
b If a least one is reported on line 2s, 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-rife (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If Yes, "has it filed a Form 990.1 for this year? If "No, "provide an explanation in Schedule O a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial accounts 5b If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shifter transaction? 6c If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shifter transaction? 6c If Yes," to line 5a or 5b, did the organization in the Form 89861? 8d Does the organization nation include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9d Organizations that many receive deductible contributions under section 170(c). 10d If we gianization receive a payment in excess of 35 made party is as contribution and party for goods and services provided to the payor? 10 If Yes," did the organization notify the donor of the value of the goods or services provided? 10 If Yes," did the organization notify the donor of the value of the goods or services provided? 10 If Yes," did the organization received a contribution of qualified refelectual property, did the organization file form 8999 as required? 11 If Yes," Indicate the number of Forms 8282 filed during the year 25 Byansisming againstation similaring donor advised fund. 12 If the organization received a contribution of qualified refelectual property, did the organization in Mine year organization mak	2a		3.4			
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			1	14a		X
				Form	990	(2012

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

	Check if Schedule O contains a response to any question in this Part VI			X						
Sec	tion 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 18									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 18									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6	X							
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	X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b	X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>						
<u>Sec</u>	tion 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		X						
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		_X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_X_							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	<u>X</u>							
b	Other officers or key employees of the organization	15b		<u>X</u>						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X_						
b	If "Yes," 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								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NONE									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le							
	for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	icial							
statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	·							
	<u>LES BRIGGS - 202-383-9005</u> 1430 K STREET NW, NO. 600, WASHINGTON, DC 20005									
23200	6	Form	990	(2012)						
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week	box	not c , unle: cer an	ss pe	ntion more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CECILIA L. RIDGEWAY	1.00							_	_	
PRESIDENT		Х	ļ	Х				0.	0.	0.
(2) JENNIFER L. GLASS	1.00	}								
VICE PRESIDENT	1 00	Х	_	Х	-			0.	0.	0.
(3) CATHERINE WHITE BERHEIDE	1.00									•
SECRETARY	1 00	X		X	_		-	0.	0.	0.
(4) ANNETTE LAREAU	1.00									
PRESIDENT-ELECT	1 00	X	-	X		-	ļ	0.	0.	0.
(5) BRIAN POWELL	1.00	}		۱,,						0
VICE PRESIDENT-ELECT	1 00	Х		X				0.	0.	0.
(6) MARY ROMERO	1.00	. ,							0	^
SECRETARY-ELECT	1 00	X		X	-	+-		0.	0.	0.
(7) ERIK OLIN WRIGHT	1.00	X		x				0.	0.	^
PAST PRESIDENT	1.00	<u> </u>		Δ		-	 	0.	0.	0.
(8) EDWARD TELLES	1.00	X		X				0.	0.	0.
PAST VICE PRESIDENT	1.00	^	-	Δ	-	-		0.		<u> </u>
(9) STEPHANIE BOHON COUNCIL MEMBER	1.00	X			i			0.	0.	0.
(10) DAVID L. BRUNSMA	1.00	Λ	-	<u> </u>	-	\vdash	 	<u> </u>	<u> </u>	<u> </u>
COUNCIL MEMBER	1.00	X				Ì		0.	0.	0.
(11) KELLY JOYCE	1.00	12				1	-	1		0.
COUNCIL MEMBER	1.00	x						0.	0.	0.
(12) AMANDA EVELYN LEWIS	1.00				\vdash	-		<u> </u>		<u> </u>
COUNCIL MEMBER		Х			1			0.	0.	0.
(13) CECILIA MENJIVAR	1.00					1	†	· · · · · · · · · · · · · · · · · · ·		
COUNCIL MEMBER		x						0.	0.	0.
(14) JOY MISRA	1.00			Ī		1				
COUNCIL MEMBER		X						0.	0.	0.
(15) DINA OKAMOTO	1.00									
COUNCIL MEMBER		X						0.	0.	0.
(16) MONICA PRASAD	1.00									
COUNCIL MEMBER		X						0.	0.	0.
(17) JANE SELL	1.00									
COUNCIL MEMBER		<u>x</u>		\bot		L.		0.	0.	0.
232007 12-10-12										Form 990 (2012)

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

Form 990 (2012)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

		Check if Schedule O cont	ains a response	to any question	in this Part VIII			
				, 1	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a				-	<u> </u>
iz ja	b	Membership dues	1b 1,	539,127.	Ì			
Ğ,Ě	С	- · · · ·	1c					
# je	d	Related organizations	1d					
S,E		Government grants (contribut		313,606.	1			
ē		All other contributions, gifts, gran			1			
E E		similar amounts not included abo		263,162.			3	
E O	g							
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f			2,115,895.			
		_		Business Code	4			,
8	2 a	PUBLICATIONS		900099	3,101,698.	2,879,336.		
و چَ	b	MEETINGS AND WO	RKSHOPS	900099	1,145,342.	1,084,242.	61,100.	
Program Service Revenue	С	ADMINISTRATION	FEES	900099	33,622.	33,622.		
e a	d	<u> </u>						
Θ.	е							
<u>-</u>	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f			4,280,662.			
İ	3	Investment income (including	dividends, intere	est, and				
l		other similar amounts)		>	365,207.			365,207.
	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties		<u> </u>	69,221.			69,221.
			(ı) Real	(II) Personal				
	6 a	Gross rents ·	114,681.					
	b	Less rental expenses	142,281.					
	С	Rental income or (loss)	-27,600.	<u> </u>				
	d	Net rental income or (loss)			-27,600.		-22,900.	-4,700.
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory			_			
	b	Less cost or other basis						
		and sales expenses		<u></u>				
	С	Gain or (loss)	Ĺ		1			
	d	• , ,						
e	8 a	Gross income from fundraisin	g events (not					
ē		including \$	of					
Other Reven		contributions reported on line	1c) See					
ē		Part IV, line 18	а	f	4			
₹		Less direct expenses	b	L				
		Net income or (loss) from fund	-					
	9 a	Gross income from gaming ac						
	_	Part IV, line 19	а		1			
}		Less direct expenses	b	L	<u> </u> 			
ļ		Net income or (loss) from gan	-					
	10 a	Gross sales of inventory, less						
j		and allowances	a		+			
		Less cost of goods sold	b		-			
}	<u> </u>	Net income or (loss) from sale		<u> </u>				
	44 =	Miscellaneous Revenu	ie	Business Code			6 020	7 (12
		OTHER REVENUE		900099	14,543.		6,930.	7,613.
	b							
	C بہ	All other revenue			 			
	a	Total. Add lines 11a-11d			14,543.			
	12	Total revenue See instructions.		•	6,817,928.		267 /92	137 311
23200	9	TOTAL PEACURE OFF HISH MUNICIPALS.			N, UII, 340.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	401,434.	Form 990 (2012)
12-10-	- 14							(2012)

Form 990 (2012) AMERICAN SOCIOLOGICAL ASSOCIATION Part IX | Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon		s Part IX		
	not include amounts reported on lines 6b, 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				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	271,102.	271,102.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	260 212	102 117	246 005	
_	trustees, and key employees	369,212.	123,117.	246,095.	
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		2,349,928.	1,832,477.	517,451.	
7 8	Other salaries and wages Pension plan accruals and contributions (include	4,343,340.	1,032,411.	JII, 431 •	
0	section 401(k) and 403(b) employer contributions)	143,840.	102,276.	41,564.	
9	Other employee benefits	191,498.	132,072.	59,426.	*****
10	Payroll taxes	154,173.	101,048.	53,125.	
11	Fees for services (non-employees)	131,173.	101,010.	33,123.	
	Management				
b	Legal	16,174.	· 	16,174.	
c	Accounting	20,630.		20,630.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				···
f	Investment management fees	39,343.	12,399.	26,944.	
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0)	433,492.	214,992.	218,500.	
12	Advertising and promotion	1,762.	1,762.		
13	Office expenses	396,825.	337,378.	59,447.	
14	Information technology	127,973.	43,480.	84,493.	
15	Royalties				
16	Occupancy	655,306.	346,012.	309,294.	
17	Travel	104,568.	74,216.	30,352.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	060 070			
19	Conferences, conventions, and meetings	268,072.	194,730.	73,342.	
20	Interest	248,751.		248,751.	
21	Payments to affiliates	400 160		400 100	
22	Depreciation, depletion, and amortization	480,169.	2,782.	480,169.	
23	Other expenses Itemize expenses not covered	34,039.	4,102.	31,257.	
24	above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	ATTOGRADO OUDDUDAD	0.	927,332.	-927,332.	
b	SECTIONS	321,472.	217,688.	103,784.	
С	PROGRAM	63,144.	33,622.	29,522.	
d	DED 1 TD 6 11TD 161 T1	57,908.		57,908.	
е	A 11 . 14	165,392.	79,076.	86,316.	
25	Total functional expenses. Add lines 1 through 24e	6,914,773.	5,047,561.	1,867,212.	0
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ļ			
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2012)
Part X Balance Sheet

Part	: X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	394,113.	1	740,355.
	2	Savings and temporary cash investments	982,756.	2	189,807.
l	3	Pledges and grants receivable, net	148,315.	3	75,828.
ļ	4	Accounts receivable, net	386,380.	4	280,587.
Ì	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
Ì		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	!		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
ľ		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	134,790.	9	182,638.
ľ	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 11,592,117.			
	b	Less: accumulated depreciation 10b 2,359,777.	9,675,527.	10c	9,232,340. 7,599,760.
	11	Investments - publicly traded securities	5,965,431.	11	7,599,760.
	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	515,954.	15	527,929.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	18,203,266.	16	18,829,244.
	17	Accounts payable and accrued expenses	332,944.	17	307,282.
	18	Grants payable		18	
	19	Deferred revenue	1,090,127.	19	1,301,485.
	20	Tax-exempt bond liabilities	7,440,000.	20	7,285,000.
s s	21	Escrow or custodial account liability Complete Part IV of Schedule D		21_	
를 :	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		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	<u> </u>	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	2,161,464.		2,114,433.
	26	Total liabilities. Add lines 17 through 25	11,024,535.	26	11,008,200.
j		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and 34.	4 040 500		- 454 - 550
au	27	Unrestricted net assets	4,910,692.		5,474,579.
Bal	28	Temporarily restricted net assets	2,263,039.		2,341,465.
ם ו	29	Permanently restricted net assets	5,000.	29	5,000.
<u>.</u>		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ę	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	7,178,731.	33	7,821,044.
	34	Total liabilities and net assets/fund balances	18,203,266.	34	18,829,244. Form 990 (2012)

Form **990** (2012)

Form	 1990 (2012) AMERICAN SOCIOLOGICAL ASSOCIATION	13-5	626343	Pa	no 12		
	rt XI Reconciliation of Net Assets		020343	ı a	<u> </u>		
	Check if Schedule O contains a response to any question in this Part XI				X		
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	7,17	4,7 6,8 8,7 4,4	73. 45.		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		-				
	column (B))	10	7,82	<u>1,0</u>	<u>44.</u>		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>		
1	Accounting method used to prepare the Form 990	ıle O.		Yes	No X		
	2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?						
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in Se As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Act and OMB Circular A-133?	Single Audi	3a		х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re-	guired audi			1		

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

232012

Form **990** (2012)

SCHEDULE A

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

2012

Open to Public Inspection

Maine Oi	the organizati							-	mpioyer	identificati	on nu	mber
D 41	T 5	AMERICA	AN SOCIOLOGIC	CAL AS	SOCIA	TION			1	<u>3-5626</u>	<u>343</u>	<u> </u>
Part I	Reason	for Public Cha	rity Status (All organiz	zations mu	st complet	te this par	t) See inst	tructions				
The orga	nization is not a	a private foundation	because it is (For lines	1 through	11, check	only one t	oox)					
1 🖳	A church, co	nvention of churche	es, or association of chur	ches desc	ribed in se	ction 170)(b)(1)(A)(i)).				
2			70(b)(1)(A)(ii). (Attach So	•								
з 🖳	A hospital or	a cooperative hosp	oital service organization	described	ın section	170(b)(1)	(A)(iii).					
4 📖	A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ection 170	(b)(1)(A)(ii	ı). Enter	the hospital	's nan	ne,
r	city, and stat											
5			e benefit of a college or u	niversity o	wned or op	perated by	, a governi	mental uni	t describ	ed in		
		(b)(1)(A)(ıv). (Comp										
6 📙			ment or governmental uni									
7			ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
	•	b)(1)(A)(vi). (Compl	•									
8	-		section 170(b)(1)(A)(vi).				_					
9 X			ceives (1) more than 33									
			unctions - subject to certa							_		
			taxable income (less sec	uon 511 ta	x) irom bu	sinesses	acquired b	y the orga	inization	aner June 3	10, 19	/5
10		509(a)(2). (Complet	pperated exclusively to te	et for publ	io cafoty. S	Soo sooti	n E00(a)(• \				
11	•	•	operated exclusively for the	•	•			•	y out the	nurnaeae c	of one	or
''	_	_	zations described in secti		•				•			Oi.
			g organization and compl				-, 000 300	3000	u)(O). O.	ook the box	triat	
	a Type	· · · · · · · · · · · · · · · · · · ·		ype III - Fu	_		. ا	Typ	e III No	n-functional	lv inte	arated
е 🗀	= -		at the organization is not		•	•					-	_
		=	than one or more publicl						•	•		
f			itten determination from								. ,, ,	
	supporting o	rganization, check t	this box				•					
g	Since Augus	t 17, 2006, has the	organization accepted a	ny gift or c	ontribution	from any	of the follo	owing per	sons?			
	(ı) A perso	n who directly or in-	directly controls, either a	lone or tog	ether with	persons o	described	ın (ıı) and (ııı) below	<i>'</i> ,	Yes	No
	the gove	erning body of the s	supported organization?							11g(ı)		
	(ii) A family	member of a perso	on described in (i) above?	>						11g(ii)	<u> </u>	
	(III) A 35% (controlled entity of	a person described in (i)	or (II) abovi	e?					11g(iii)	<u> </u>	
h	Provide the f	ollowing information	n about the supported or	ganızatıon	(s)							
		Г		T		r						
(ı) Nam	e of supported	(ir) EIN	(iii) Type of organization				u notify the	(vi) ls organizati	s the on in col.	(vii) Amount	t of mo	netary
org	janization		(described on lines 1-9 above or IRC section		sted in your document?		tion in col. r support?	(i) organiz U.S	ed in the	sup	port	
			(see instructions))	Yes	No	Yes	· · · · · · · · · · · · · · · · · · ·	 	T	-		
				162	NO	165	No	Yes	No			
			-				 			-		
									ļ			
									 			
							ŀ					
								 	 			
						ĺ						
	-						1		1	<u> </u>		
					 	<u> </u>				†		
Total												
	Panerwork Re	duction Act Notice	e see the Instructions t	for	•		•	Sahadul	o A (Ear	m 990 or 99	 W E7	1 2012

232021 12-04-12

Form 990 or 990-EZ.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						1
	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,				1		
	column (f)						
	Public support. Subtract line 5 from line 4				L		
	ction B. Total Support		1	1 1 1 1 1 1 1 1	1 , , , , , , ,	1 1 2010	1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
0	and income from similar sources Net income from unrelated business		 			 	
9	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instruct	ions)			12	
	First five years. If the Form 990 is for	•	•	ırd, fourth, or fifth t	tax vear as a secti		· ···
	organization, check this box and stor	o here			,	(-/(-/	▶□
Sec	ction C. Computation of Publ	ic Support Pe	ercentage				
	Public support percentage for 2012 (column (f))		14	9
15	Public support percentage from 2011	Schedule A, Par	t II, line 14			15	9
16a	33 1/3% support test - 2012. If the	organization did n	ot check the box	on line 13, and line	14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies	as a publicly sup	ported organizatio	n			
b	33 1/3% support test - 2011. If the	organization did n	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3	% or more, check t	his box
	and stop here. The organization qual	lifies as a publicly	supported organi	zation			▶□
17a	10% -facts-and-circumstances tes	t - 2012. If the or	ganization did not	check a box on lin	ne 13, 16a, or 16b	, and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumsta	nces" test, check	this box and stop	<mark>here.</mark> Explain in P	art IV how the orga	nization
	meets the "facts-and-circumstances"	test The organiz	ation qualifies as a	a publicly supporte	ed organization		▶[
b	10% -facts-and-circumstances tes	t - 2011. If the or	ganization did not	check a box on lin	ne 13, 16a, 16b, o	r 17a, and line 15 is	10% or
	more, and if the organization meets the				•		e
	organization meets the "facts-and-cire	cumstances" test	The organization	qualifies as a publ	licly supported or	ganızatıon	▶
18	Private foundation. If the organization	n did not check a	box on line 13, 1	6a, 16b, 17a, or 17	b, check this box	and see instruction	ns 🕨
					Sci	nedule A (Form 99)	or 990-EZ) 2012

Part III | Support Schedule for Organizations Described in Section 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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	2,419,503.	2,968,182,	2,617,359.	2,190,256.	2,115,895.	12,311,195.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
_	organization's tax-exempt purpose	3,674,794.	3,830,173.	3,697,960.	3,974,175.	3,997,200.	19,174,302.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	6,094,297.	6,798,355.	6,315,319.	6,164,431.	6,113,095.	31,485,497.
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)						31,485,497,
	ction B. Total Support		<u> </u>				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	6,094,297.	6,798,355.	6,315,319.	6,164,431.	6,113,095.	31,485,497.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	270.934.	275,106.	308,017.	304,640.	453,958.	1,612,655.
b	Unrelated business taxable income				•		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975				89,741.	87,270.	177,011.
c	: Add lines 10a and 10b	270,934.	275,106.	308,017.	394,381.	541,228.	1,789,666.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						2,707,000.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	11,719.	17,778.	8,372.	8,979.	14,543.	61,391.
13	Total support (Add lines 9, 10c, 11, and 12)	6,376,950.	7,091,239.	6,631,708.	6,567,791.	6,668,866.	33,336,554.
14	First five years. If the Form 990 is for	r the organization's	first, second, thire	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organız	ation,
Se	check this box and stop here	ic Support Pe	rcentage			·	<u>▶□</u>
	Public support percentage for 2012 (• • •		olumn (f))		15	94.45 %
16	Public support percentage from 2011		•			16	94.36 %
_	ction D. Computation of Inves					1_10_1	<u> </u>
	Investment income percentage for 20			ne 13. column (f))		17	5.37 %
18	Investment income percentage from:			10, 00,011,117 (1),		18	5.47 %
	a 33 1/3% support tests - 2012. If the			on line 14, and line	15 is more than 3	L	
150	more than 33 1/3%, check this box a	-					►X
ı	33 1/3% support tests - 2011. If the	•	•	, ,			
į,	line 18 is not more than 33 1/3%, che	-				•	
20	Private foundation. If the organization					=	
20	Tivate roundation, it the organization	GIG TIOL CHECK A	557 OH III 6 14, 130	a, or 100, officer ti		adula A (Form 00	0 000 57\ 0040

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2012 Open to Public Inspection

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions. -

Employer identification number

	AMERICAN SOCIOLOGI		13~5626343					
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the					
	organization answered "Yes" to Form 990, Part IV, line							
		(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 advis	sed funds					
	are the organization's property, subject to the organization's		Yes No					
6	Did the organization inform all grantees, donors, and donor a	_						
_	for charitable purposes and not for the benefit of the donor of	• •	•					
	impermissible private benefit?		Yes No					
Par		nanization answered "Yes" to Form 990.						
1	Purpose(s) of conservation easements held by the organizati							
•	Preservation of land for public use (e.g., recreation or e	· ————————————————————————————————————	storically important land area					
	Protection of natural habitat	· 	tified historic structure					
	Preservation of open space	Treservation of a cer	tilled historic structure					
0	·	find apparation appropriation in the form	of a conservation accoment on the last					
2	Complete lines 2a through 2d if the organization held a qualif	ned conservation contribution in the form	of a conservation easement on the last					
	day of the tax year		Held at the End of the Tax Year					
	Total number of concentration accompate							
a	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
С.	Number of conservation easements on a certified historic str	• •	2c					
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct						
_	listed in the National Register		2d					
3								
_	year ▶							
4	Number of states where property subject to conservation ea							
5	Does the organization have a written policy regarding the per							
_	violations, and enforcement of the conservation easements i		Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,	<u>-</u>						
7	Amount of expenses incurred in monitoring, inspecting, and	-						
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170						
_	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No					
9	In Part XIII, describe how the organization reports conservati	•						
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for					
Pai	conservation easements rt III Organizations Maintaining Collections o	f Art Historical Treasures or C	Other Similar Assets					
[F al	Complete if the organization answered "Yes" to Form		ther Sillinar Assets.					
1a	If the organization elected, as permitted under SFAS 116 (AS	,	·					
	historical treasures, or other similar assets held for public ext		ance or public service, provide, in Part XIII,					
	the text of the footnote to its financial statements that descri		A soul balance also should be of a A. b. of					
D	If the organization elected, as permitted under SFAS 116 (AS							
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts					
	relating to these items		• •					
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$					
_	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, historical tre		ai gairi, provide					
	the following amounts required to be reported under SFAS 1	10 (ASC 938) relating to these items	•					
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$					
b	Assets included in Form 990, Part X		*					

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		N SOCIOLOG							26343	
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	easures, c	or Other	Simil	<u>ar Asse</u>	ts (continue	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the t	following tha	t are a sig	nıfıcant	use of its	collection if	tems
	(check all that apply)									
а	Public exhibition	đ	l	oan or exch	nange progra	ams				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	n how the	ey further th	ne organizati	on's exem	pt purp	ose in Par	XIII	
5	During the year, did the organization solicit or	r receive donations o	of art, his	storical treas	sures, or oth	er sımılar a	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he organ	nzation's co	illection?				Yes	No_
Pai	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organization	n answered '	"Yes" to F	orm 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for o	contribution	s or other as	sets not in	ncluded			
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	212						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planatio	n has been	provided in l	Part XIII				
Pai	t V Endowment Funds. Complete it	f the organization an	swered '	"Yes" to For	rm 990, Part	IV, line 10				
		(a) Current year	(b) Pi	rior year	(c) Two year	rs back (c	Three	years back	(e) Four y	ears back
1a	Beginning of year balance	765,591.		706,035.	53	3 820.	4	474,392.	4	80,850.
b	Contributions	376,392.		391,816.	42	9.444.	:	327,073.	2	66,921.
С	Net investment earnings, gains, and losses	20 898.								
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	293,443.		328,703.	27	3.796.	:	291,044.	2	75,379.
f	Administrative expenses							•		
g	End of year balance	869,438.		765,591.	70	6,035.	ļ	533.820.	4	74.392.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1ç	g, column (a	ı)) held as	•		-		
а	Board designated or quasi-endowment	99.43	_%							
b	Permanent endowment ►57	%	_							
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held a	nd administe	ered for the	e organı	zation		
	by								Y	es No
	(ı) unrelated organizations								3a(ı)	X
	(ii) related organizations								3a(II)	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	lule R?					3b	
4	Describe in Part XIII the intended uses of the	organization's endo	owment f	funds						
Pa	rt VI Land, Buildings, and Equipm	ent. See Form 990), Part X,	line 10						
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulat	ed	(d) Book	value
		basis (investr	nent)	basis	(other)	dep	reciation	1		
1a	Land									
b	Buildings			9,95	1,023.	1,2	02,1	66.	8,748	,857.
С	Leasehold improvements									
d	Equipment			1,02	2,133.	8	33,6	18.	188	,515.
е	Other			61	8,961.	3	23,9	93.	294	,968.
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line 1	10(c))				9,232	

Sche	d <u>ule C</u>	!(Form 990) 2012 AMERICAN SOCIOLOGICAL ASSOC	IAT:	ION	13-!	56263 43 Page	e 4
Par	t XI	Reconciliation of Revenue per Audited Financial Statemer	its W	th Revenue per R	eturn)	
1	Total	revenue, gains, and other support per audited financial statements	-		1	7,624,686	5.
2	Amou	ints included on line 1 but not on Form 990, Part VIII, line 12					
а	Net u	nrealized gains on investments	2a	664,477.			
b	Dona	ted services and use of facilities	2b				
С	Reco	veries of prior year grants	2c				
d		(Describe in Part XIII.)	2d	142,281.			
		ines 2a through 2d			2e	806,758	3.
3		ract line 2e from line 1			3	6,817,928	
4		ints included on Form 990, Part VIII, line 12, but not on line 1					
		tment expenses not included on Form 990, Part VIII, line 7b	4a				
b		(Describe in Part XIII)	4b				
_		ines 4a and 4b	_ 10 _1		4c	(ο.
		revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	6,817,928	
		Reconciliation of Expenses per Audited Financial Stateme	nts W	/ith Expenses per	<u> </u>		<u>. </u>
1		expenses and losses per audited financial statements		Tari Experiede por	1	7,057,054	1
		ints included on line 1 but not on Form 990, Part IX, line 25.			 -	1,031,03	= •
2		·	ا مما				
a		ted services and use of facilities	2a				
b		year adjustments	2b				
C		losses	2c	140 001			
		(Describe in Part XIII)	2d	142,281.		140 00	1
е		nes 2a through 2d			2e	142,28	
3	Subti	act line 2e from line 1			3	6,914,77	<u> 3 .</u>
4		ints included on Form 990, Part IX, line 25, but not on line 1					
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Othe	(Describe in Part XIII)	4b				
C	Add I	ines 4a and 4b			4c		<u>).</u>
		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	6,914,77	<u>3.</u>
Par	t XII	Supplemental Information					
Comp	olete t	nis part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1	a and 4, Part IV, lines 1	b and 2	2b, Part V, line 4, Par	t
X, lıne	2, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p	orovide	any additional informat	ion		
PAR	I TS	7, LINE 4: PERMANENT ENDOWMENT FUNDS ARE	RE	STRICTED TO	THE		
ROE	BERT	<u> A SIMMONS FUND, WHICH IS A SPECIAL AWAR</u>	D F	OR DISSERTAT	ION	WORK.	
BOA	RD-	DESIGNATED ENDOWMENTS ARE FOR SPECIFIC	ACT	IVITIES OF T	HE .	ASSOCIATIO	7
					<u>-</u>		
AND	SE	ECTIONS OF THE ASSOCIATION.					
					•		
PAR	T Y	, LINE 2: IN JUNE 2006, THE FINANCIAL A	CCO	UNTING STAND	ARD	S BOARD	
				<u> </u>			
(FA	SB'	RELEASED FASB ASC 740-10, INCOME TAXES	. ጥ	HAT PROVIDES	GU	IDANCE FOR	
<u>,</u>			, ~				
REF	ORT	ING UNCERTAINTY IN INCOME TAXES. FOR TH	E Y	EAR ENDED DE	CEM	BER 31.	
						,	

232054 12-10-1

Schedule D (Form 990) 2012 AMERICAN SOCIOLOGICAL ASSOCIATION 13-5626343 Page 5 Part XIII Supplemental Information (continued)
Supplemental information (continued)
2012, THE ASSOCIATION HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10
AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER
RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FEDERAL FORM
990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO
EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS
AFTER IT IS FILED.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
RENTAL EXPENSES REPORTED AS EXPENSE ON THE FINANCIAL 142,281.
STATEMENTS AND INCLUDED ON PART VIII, LINE 8B OF FORM 990.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
RENTAL EXPENSES REPORTED AS EXPENSE ON THE FINANCIAL 142,281.
STATEMENTS AND INCLUDED ON PART VIII, LINE 8B OF FORM 990.

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.

2012 2012 Open to Public

Inspection

Name of the organization AMERICAN SOCIOLOGICAL	SOCIOPOGI	CAL ASSOCIATION	NOLL				Employer identification number 13-5626343
Part I General Information on Grants and Assistance	nd 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	o substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	istance, and the select	
criteria used to award the grants or assistance? 2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	itance? icedures for monit	oring the use of grant	funds in the United	d States			X Yes No
1 %	Governments and	Organizations in the	United States. C	complete if the orga	anization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	55,000 Part II can	be duplicated if additi	onal space is need	Jed			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in th	e line 1 table		!		•

3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2012)

AMERICAN SOCIOLOGICAL ASSOCIATION Schedule I (Form 990) (2012)

Page 2

13-5626343

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

Part III

(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
STIPENDS FOR MINORITY DOCTORAL STUDENTS FELLOWSHIP PROGRAM	10	.000,46	0		
STIPEND FOR CONGRESSIONAL FELLOWSHIP WINNERS	7	38 667	o		
GRANTS TO RESEARCH SOCIOLOGISTS FOR COMMUNITY ACTION INITIATIVE RESEARCH PROJECTS		14,650.	0		
GRANTS TO PHD SOCIOLOGISTS FOR RESEARCH PROJECTS ADVANCING THE DISCIPLINE	14	88,984.	0.		
SECTION PAPER AWARDS	S	5.900.	0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information SCHEDULE I. PART I. LINE 2: ASA AWARDS GRANTS TO INDIVIDUAL RECIPIENTS	de the informatio	required in Part I,	Part I, line 2, Part III, column (b), and any ot INDIVIDUAL RECIPIENTS	n (b), and any other additional inf CIPIENTS	ormation
BASED ON THE PEER REVIEW OF OBJECTIVE	IVE CRIT	CRITERIA RELATED	то тнв	PURPOSES	
STIPULATED FOR EACH GRANT PROGRAM. ASA'S VARIOUS GRANT PROGRAMS ARE OPEN TO	ASA'S V	ARIOUS GRA	NT PROGRAM	S ARE OPEN TO	
הפדפורסמה הפפא רוויו מחזייררו ורחי דיר	K T GG M T GO	SWAGDOGG HUR	ктааштах эмка	CINK KI GE	

THE PROGRAMS, CRITERIA, ALL APPLICANTS WHO MEET SPECIFIED CRITERIA.

THE ASA SCHEDULE THROUGH REGULAR APPLICATION DEADLINES ARE ANNOUNCED ON A

ALL APPLICATIONS RECEIVED WITHIN THE STATED DEADLINE FOR EACH FUNDING CYCLE FOR EACH GRANT PROGRAM ARE NEWSLETTER FOOTNOTES AND THE ASA WEBSITE.

EACH GRANT PROGRAM FOR THE ASA ADVISORY PANEL. PEER-REVIEWED BY MEMBERS OF

THE ADVISORY PANELS ARE PHD SOCIOLOGISTS SELECTED BY THE ELECTED ASA

232102 12-18-12

13-5626343 Page 2		(f) Description of non-cash assistance							Schedule I (Form 990)
		(e) Method of valuation (book, FMV, appraisal, other)							
	I (Form 990), Part III	(d) Amount of non- cash assistance	0	0	0				
ASSOCIATION	ed States (Schedule	(c) Amount of cash grant	4,000,	21,250.	3,651.				
SOCIOLOGICAL A	duals in the Unite	(b) Number of recipients	2.	19.	21.				
Schedule I (Form 990) AMERICAN SOCIOL	Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule (Form 990), Part III)	(a) Type of grant or assistance	GRANTS FOR RESEARCH SOCIOLOGISTS FOR TEACHING	HONORARIUM FOR MANAGING EDITORS OF VARIOUS ASA JOURNALS	AWARDS TO SUPPORT PROGRAM DIRECTORS & SOCIOLOGISTS				

232242 05-01-12

SCHEDULE'J (Form' 990)

Compensation Information

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

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

f "Yes" to Form 990, Open to Public

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

Inspection

OMB No 1545-0047

AMERICAN SOCIOLOGICAL ASSOCIATION

13-5626343

Employer identification number

Pa	ort 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 Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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?	2		-
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization		1	
а	Receive a severance payment or change-of-control payment?	4a		X X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of		:	
а	The organization?	5a		X
b	Any related organization?	5b		X
	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			3,5
a	The organization?	6a		X
þ	Any related organization?	6b		X
_	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	_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		<u>X</u>
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 Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8_		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53 4958-6(c)?	9	L	┸

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

13-5626343

Page 2

Schedule J (Form 990) 2012

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

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, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benetits	(a)-(i)(b)	reported as deterred in prior Form 990
(1) SALLY T, HILLSMAN	Ξ	219,548.	0	0.	19,918.	6,768.	246,234.	0
- 2	Ξ	0	0	0.	0	0.		0
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	(II)							
	Ξ							
	(II)							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	(ii)							
	Ξ							
	(E)							
	Ξ							
	3					:		
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	(i)							
	⊞							
	Ξ							
	▣							
	Ξ							
	3				ŝ			

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047 2012

c

Employer identification number (g) Defeased (h) On behalf (i) Pooled financing Yes No Yes No × Open to Public ŝ ŝ Inspection 13-5626343 × of Issuer ۵ Yes Yes Yes No × ŝ ŝ COND (f) Description of purpose ပ Yes 8,000,000.HEADQUARTERS Yes ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, PURCHASE OF Š Ŷ ▶ See separate instructions. 8 Yes explanations, and any additional information in Part VI. Yes CONTINUATIONS (e) Issne buce 715,000. 8,000,000,8 8,000,000,8 × × × × ŝ No 2008 (d) Date issued 11/28/07 Yes Yes × × FOR COLUMN (F) AMERICAN SOCIOLOGICAL ASSOCIATION 53-60011312548392F9 232/21 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP # Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, Attach to Form 990. SEE PART VI (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds COLUMBIA Capital expenditures from proceeds Credit enhancement from proceeds Amount of bonds legally defeased Capitalized interest from proceeds Gross proceeds in reserve funds Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds Part III Private Business Use (a) Issuer name bond-financed property? Amount of bonds retired Other unspent proceeds Total proceeds of Issue OF Other spent proceeds Name of the organization **Bond Issues** A DISTRICT Proceeds Department of the Treasury Internal Revenue Service Part II Part ω 2 9 ი 우 얼 9 N Ξ 13 5 ပ ۵ 4 17

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(Continued)	
Part III Private Business Use	
	Private Business Use (Continued)

Page 2

Part III Private Business Use (Continued)								
	4			В		C	۵	
3a Are there any management or service contracts that may result in private	Yes	N _o	Yes	õ	Yes	No	Yes	No N
business use of bond-financed property?		×						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside					=,+			
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		×						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside			·					
counsel to review any research agreements relating to the inanced property?								
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×						
b If "Yes" to line 8a, enter the percentage of bond financed property sold or disposed								
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1 141-12 and 1 145-27								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1 141-12 and 1 145-27	×							
Part IV Arbitrage								
	4		_	8		S	۵	
	Yes	No	Yes	S _O	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T?		×						
a Rebate not due yet?		×						
b Exception to rebate?		×						
c No rebate due?	×							
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								
computation was performed								
3 Is the bond issue a variable rate issue?	×							
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?	×							
b Name of provider	PNC BANK							
c Term of hedge	25.9	000006						
d Was the hedge superintegrated?		×						
e Was the hedge terminated?		×					!	
232122 12-17-12						Sch	Schedule K (Form 990) 2012	m 990) 2012

13-5626343

Schedule K (Form 990) 2012 AME Part IV Arbitrage (Continued)

	A			В		U		۵
	Yes	°	Yes	Š	Yes	°Z	Yes	° oN
E. Moro proce proposale invested in a principlated investment contract (GIC)?		×						
Name of provider		:						
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		×						
1	×							
Part V Procedures To Undertake Corrective Action								
	V			8		O		٥
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable	Yes	O Z	Yes	N _O	- Ker	o Z	Yes	o Z
regulations? Note that We supplemental Information Complete this part to provide additional information for responses to questions on Schedule K (see instructions)	Sponses to gues	Stions on S	Schedule K (see instruction	l (suc			
1512					,			
DESCRIPTION C	1 1	CONDOMINIUM	IUM					
V, LINE 2C: ASA DID NOT PERFORM A REBAT O REBATE WAS DUE BECAUSE THERE WERE NO	E CALCULATION TO DETERMI SURPLUS BOND PROCEEDS TO	ON TO	DETER	TINE				
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232123 12-17-12						Scl	hedule K (For	Schedule K (Form 990) 2012

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 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN SOCIOLOGICAL ASSOCIATION

Employer identification number

13-5626343 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: **PUBLICATIONS** EXPENSES \$ 399,460. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,101,698. MEMBERSHIP AND SECTIONS: MEMBERSHIP SEEKS TO STIMULATE AND IMPROVE RESEARCH, INSTRUCTION AND COOPERATIVE RELATIONS AMONG THOSE ENGAGED IN THE SCIENTIFIC STUDY OF SOCIETY. ALL INTERESTED PERSONS MAY JOIN. EXPENSES \$ 524,222. INCLUDING GRANTS OF \$ 0. REVENUE S FORM 990, PART VI, SECTION A, LINE 6: ASA MEMBERS ENCOMPASS PRIMARILY: SOCIOLOGISTS WHO ARE FACULTY MEMBERS, RESEARCHERS AND STUDENTS AT COLLEGES AND UNIVERSITIES IN THE UNITED STATES; PHD SOCIOLOGISTS WHO ARE RESEARCHERS AND PRACTITIONERS IN GOVERNMENT, BUSINESS AND NON-PROFIT ORGANIZATIONS: AND INTERNATIONAL PHD SOCIOLOGISTS AND STUDENTS. FORM 990, PART VI, SECTION A, LINE 7A: THE ASA COUNCIL IS THE ASSOCIATION'S GOVERNING BODY. IT IS COMPOSED OF 18 VOTING MEMBERS: TEN ELECTED-AT-LARGE BY THE MEMBERSHIP AND EIGHT EX-OFFICIO ALSO ELECTED BY THE MEMBERSHIP: PRESIDENT, PAST PRESIDENT, PRESIDENT-ELECT, VICE-PRESIDENT PAST VICE-PRESIDENT, VICE-PRESIDENT-ELECT, SECRETARY. AND SECRETARY-ELECT. FORM 990, PART VI, SECTION A, LINE 7B: A DECISION BY THE COUNCIL THAT RESULTS IN AN INCREASE IN DUES ABOVE COST-OF-LIVING ADJUSTMENTS ARE SUBJECT TO APPROVAL BY ALL VOTING MEMBERS. THE COUNCIL IS REQUIRED BY THE BYLAWS TO VOTE ON RESOLUTIONS SIGNED BY 3% OR MORE OF THE MEMBERSHIP IF IT INVOLVES A MATTER THAT IS WITHIN THE POWERS OF THE COUNCIL. IF THE COUNCIL DOES NOT LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

232211

AMERICAN SOCIOLOGICAL ASSOCIATION

Employer identification number 13-5626343

SUPPORT THE RESOLUTION, IT MUST GO TO THE MEMBERSHIP FOR A VOTE. THE RESULT OF THE MEMBERSHIP VOTE IS BINDING ON THE ASSOCIATION.

FORM 990, PART VI, SECTION B, LINE 11: UPON RECEIVING THE DRAFT FORM 990 FROM ITS ACCOUNTING FIRM, THE ASSOCIATION IMPLEMENTS A REVIEW PROCESS BY WHICH THE DIRECTOR OF FINANCE, THE EXECUTIVE OFFICER, THE SECRETARY, A MEMBER OF THE BOARD OF DIRECTORS AND CHAIR OF THE AUDIT COMMITTEE REVIEW THE FORM AND SCHEDULES. ANY QUESTIONS THAT ARISE ARE DIRECTED BACK TO THE ACCOUNTING FIRM FOR CONFIRMATION OR FURTHER RESOLUTION. UPON SATISFACTION REGARDING THE COMPLETENESS OF THE RETURN, THE EXECUTIVE OFFICER SIGNS THE FORM AND IT IS FILED.

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

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

Schedule O (Form 990 or 990-EZ) (2012)

AMERICAN SOCIOLOGICAL ASSOCIATION	13-5626343
REGULAR PART OF THEIR PROFESSIONAL ACTIVITIES IN TEACHING	, RESEARCH, AND
FULFILLING ACADEMIC LEADERSHIP POSTS SUCH AS DEPARTMENT C	HAIR, DEAN,
PROVOST, ETC. TRAINING ON THE ASA CODE OF ETHICS OCCURS A	T EVERY ASA ANNUAL
MEETING AND A CASE-BASED TRAINING TOOL IS ON THE ASA WEBS	ITE.
FORM 990, PART VI, SECTION B, LINE 15A: THE COMMITTEE ON	THE EXECUTIVE
OFFICE AND BUDGET (EOB) IS RESPONSIBLE FOR EVALUATING THE	EXECUTIVE
OFFICER'S PERFORMANCE AND ESTABLISHING COMPENSATION. EOB	RELIES UPON
CONTEMPORANEOUS INFORMATION AND SALARY SURVEYS FROM THE G	EOGRAPHICAL
LOCATION AND ALSO FROM LIKE-MINDED ORGANIZATIONS TO ENSUR	E A REASONABLE AND
ADEQUATE LEVEL OF PAY. THE DECISION AND REVIEW IS DOCUME	NTED IN A LETTER
TO THE EXECUTIVE OFFICER AND THE CFO. THE MOST RECENT RE	VIEW OCCURRED IN
JANUARY 2012. THE EXECUTIVE OFFICER FOLLOWS THE SAME PRO	CESS FOR SETTING
SALARY LEVELS OF KEY PERSONNEL.	
FORM 990, PART VI, SECTION C, LINE 19: ASA'S GOVERNING AN	D FINANCIAL
DOCUMENTS ARE AVAILABLE TO THE PUBLIC. THE FULL ANNUAL AU	DITED FINANCIAL
STATEMENTS ARE PUBLICLY ACCESSIBLE VIA THE WEBSITE. OTHER	DOCUMENTS,
INCLUDING THE CONFLICT OF INTEREST POLICY, ARE AVAILABLE	UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN FAIR VALUE OF INTEREST RATE SWAP OBLIGATION	74,681.