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Form **990**Department of the Treasury  
Internal Revenue Service

CHANGE OF ACCOUNTING PERIOD

**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

**2009**

Open to Public Inspection

**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **SEP 30, 2009****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type  
See Specific Instructions**C** Name of organization**AMERICAN POLITICAL SCIENCE ASSOCIATION**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

**1527 NEW HAMPSHIRE AVENUE, NW**

City or town, state or country, and ZIP + 4

**WASHINGTON, DC 20036****F** Name and address of principal officer **HENRY E. BRADY****SAME AS C ABOVE****D** Employer identification number**53-0200001****E** Telephone number**(202) 483-2512****G** Gross receipts \$ **2,331,708.****H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No  
If "No," attach a list. (see instructions)**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.APSANET.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1951****M** State of legal domicile: **DC****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1	Briefly describe the organization's mission or most significant activities <b>THE LEADING PROFESSIONAL ORGANIZATION FOR THE STUDY OF POLITICAL SCIENCE.</b>						
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.						
3	Number of voting members of the governing body (Part VI, line 1a)	3	28				
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	25				
5	Total number of employees (Part V, line 2a)	5	0				
6	Total number of volunteers (estimate if necessary)	6	0				
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	62,317.				
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.				
		Prior Year	Current Year				
8	Contributions and grants (Part VIII, line 1h)	658,131.	297,866.				
9	Program service revenue (Part VIII, line 2g)	3,992,717.	1,686,829.				
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<2,179,610.>	152,909.				
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	612,723.	82,808.				
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,083,961.	2,220,412.				
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	636,955.	168,567.				
14	Benefits paid to or for members (Part IX, column (A), line 4)						
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-11)	2,424,458.	732,007.				
16a	Professional fundraising fees (Part IX, column (A), line 11e)						
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>16,871.</b>						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,184,978.	1,294,018.				
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,246,391.	2,194,592.				
19	Revenue less expenses. Subtract line 18 from line 12	<3,162,430.>	25,820.				
		Beginning of Current Year	End of Year				
20	Total assets (Part X, line 16)	21,838,453.	23,804,532.				
21	Total liabilities (Part X, line 26)	4,709,059.	4,445,944.				
22	Net assets or fund balances. Subtract line 21 from line 20	17,129,394.	19,358,588.				

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer

Date **8-7-2010****MICHAEL BRINTNALL, EXECUTIVE DIRECTOR**  
Type or print name and title

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

**RSM MCGILADREY, INC.****9737 WASHINGTONIAN BLVD., #400****GAITHERSBURG, MD 20878-7340**

Date

**JUL 28 2010**Check if self-employed ☐

Preparer's identifying number (see instructions)

EIN ▶

Phone no. ▶ **(301) 296-3600**

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

☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments****1** Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION

THE AMERICAN POLITICAL SCIENCE ASSOCIATION ENABLES POLITICAL  
SCIENTISTS TO JOIN TOGETHER TO CREATE AN ENVIRONMENT CONDUCIVE TO  
TEACHING, RESEARCH, AND PRACTICE IN ALL FIELDS OF POLITICAL SCIENCE  
AND TO ENSURE THE NECESSARY SUPPORT FOR THE DISCIPLINE TO THRIVE. THIS

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

SEE SCHEDULE O FOR CONTINUATION(S)

**4a** (Code: ) (Expenses \$ 2,062,275. including grants of \$ 168,567. ) (Revenue \$ 1,779,272. )  
PROGRAMS OFFERED BY THE AMERICAN POLITICAL SCIENCE ASSOCIATION

**APSA ANNUAL MEETING**

THE APSA ANNUAL MEETING IS THE LARGEST CONFERENCE IN POLITICAL SCIENCE.  
THE ANNUAL MEETING TYPICALLY DRAWS 7000 PARTICIPANTS AND CONSISTS OF  
OVER 700 PANEL SESSIONS OVER A 3-1/2 DAY PERIOD IN WHICH THE MEMBERS'  
RESEARCH IS PRESENTED IN A VARIETY OF FORMATS. MOST OF THE PANEL  
SESSIONS INVOLVE PAPER PRESENTATION AND DISCUSSION. ALTHOUGH MANY ARE  
ROUNDTABLE DISCUSSIONS FEATURING EXPERTS IN THE FIELDS. PLENARY  
SESSIONS FEATURE DISTINGUISHED LECTURERS AND AWARDS ARE PRESENTED TO  
DISTINGUISHED WRITERS WITHIN SUBFIELDS. THE MEETING IS HELD EACH YEAR  
DURING THE WEEK PROCEEDING LABOR DAY. THE APSA EXHIBITION FEATURES THE

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses \$ 2,062,275.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> x	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	<b>2</b>	x
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	x
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b>	x
<b>5</b> <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	x
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	x
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	x
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	x
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> x	
<b>11</b> Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<b>11</b> x	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• 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? <i>If "Yes," complete Schedule D, Part VII</i>		
• 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? <i>If "Yes," complete Schedule D, Part VIII</i>		
• 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
<b>12</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	<b>12</b> x	
<b>12A</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	<b>12A</b> Yes No x	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	x
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	x
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	<b>14b</b> x	
<b>15</b> 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? <i>If "Yes," complete Schedule F, Part II</i>	<b>15</b>	x
<b>16</b> 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? <i>If "Yes," complete Schedule F, Part III</i>	<b>16</b> x	
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b>	x
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b>	x
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	x
<b>20</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	<b>20</b>	x

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>21</b> x	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>22</b> x	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i>	<b>23</b>	x
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	<b>24a</b>	x
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	<b>25a</b>	x
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	<b>25b</b>	x
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	<b>26</b>	x
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	<b>27</b>	x
<b>28</b> Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28a</b>	x
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28b</b>	x
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28c</b>	x
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<b>29</b>	x
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	<b>30</b>	x
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	<b>31</b>	x
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	<b>32</b>	x
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	<b>33</b>	x
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	<b>34</b>	x
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<b>35</b>	x
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<b>36</b>	x
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>	x
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>38</b> x	

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**Part V. Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable.		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	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)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body		
<b>1b</b> Enter the number of voting members that are independent		
<b>2</b> 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?		X
<b>3</b> 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?		X
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets?		X
<b>6</b> Does the organization have members or stockholders?	X	
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
<b>7b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9</b> 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		X

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

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates?		X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>11</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11A</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b> Does the organization have a written whistleblower policy?	X	
<b>14</b> Does the organization have a written document retention and destruction policy?	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	X	
<b>b</b> Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section 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 (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website    ☐ Another's website    ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: REGINA CHAVIS - (202) 483-2512  
1527 NEW HAMPSHIRE AVENUE, NW, WASHINGTON, DC 20036

Form 990 (2009)

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PETER KATZENSTEIN PRESIDENT	2.00	X		X				0.	0.	0.
HENRY E BRADY PRESIDENT-ELECT	2.00	X		X				0.	0.	0.
STEPHEN D KRASNER VICE PRESIDENT	2.00	X						0.	0.	0.
JOANNA V. SCOTT VICE PRESIDENT	2.00	X						0.	0.	0.
ROGERS M. SMITH VICE PRESIDENT	2.00	X						0.	0.	0.
JANET BOX-STEFFENSMEIER TREASURER	2.00	X		X				0.	0.	0.
LEONARD WANTCHEKON SECRETARY	2.00	X		X				0.	0.	0.
WENDY BROWN COUNCIL MEMBER	2.00	X						0.	0.	0.
WENDY K TAM CHO COUNCIL MEMBER	2.00	X						0.	0.	0.
H N HIRSCH COUNCIL MEMBER	2.00	X						0.	0.	0.
JOHN ISHIYAMA COUNCIL MEMBER	2.00	X						0.	0.	0.
NONNA MAYER COUNCIL MEMBER	2.00	X						0.	0.	0.
THOMAS L PANGLE COUNCIL MEMBER	2.00	X						0.	0.	0.
DAN REITER COUNCIL MEMBER	2.00	X						0.	0.	0.
CHATHERINE H. ZUCKERT COUNCIL MEMBER	2.00	X						0.	0.	0.
J. BENJAMIN-ALVARADO COUNCIL MEMBER	2.00	X						0.	0.	0.
JODI DEAN COUNCIL MEMBER	2.00	X						0.	0.	0.



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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KATHLEEN HALL JAMIESON COUNCIL MEMBER	2.00	X						0.	0.	0.
ROSE MCDERMOTT COUNCIL MEMBER	2.00	X						0.	0.	0.
MARIA VICTORIA MURILLO COUNCIL MEMBER	2.00	X						0.	0.	0.
MARK A PETERSON COUNCIL MEMBER	2.00	X						0.	0.	0.
SHERRI L WALLACE COUNCIL MEMBER	2.00	X						0.	0.	0.
FRANKE WILMER COUNCIL MEMBER	2.00	X						0.	0.	0.
RONALD L ROGOWSKI APSR EDITOR	2.00	X						0.	0.	0.
JEFFREY C ISAAC PERSPECTIVES EDITOR	2.00	X						0.	0.	0.
SIMONE CHAMBERS ANNUAL MEETING CHAIR	2.00	X						0.	0.	0.
BRUCE W JENTLESON ANNUAL MEETING CHAIR	2.00	X						0.	0.	0.
<b>1b Total</b>								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2009)

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	297,866.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f		297,866.				
Program Service Revenue	Business Code						
	2 a ANNUAL MEETING	900099	1,059,019.	848,672.		210,347.	
	b MEMBERSHIP DUES	900099	445,536.	445,536.			
	c PUBLICATIONS	900099	112,081.	112,081.			
	d DEPT SERVICE PROGRAM	900099	69,013.	69,013.			
	e TEACHING CONFERENCE	900099	1,180.	1,180.			
	f All other program service revenue						
	g Total. Add lines 2a-2f		1,686,829.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		152,909.			152,909.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		15,533.			15,533.	
	6 a Gross Rents	(i) Real (ii) Personal					
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)		<46,639.>		<30,126.>	<16,513.>	
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other					
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a ADVERTISING	541800	65,170.		65,170.			
b PERSONNEL PLACEMENT	900004	27,273.		27,273.			
c OTHER INCOME	900099	21,471.			21,471.		
d All other revenue							
e Total. Add lines 11a-11d		113,914.					
12 Total revenue. See instructions.		2,220,412.	1,476,482.	62,317.	383,747.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	6,334.	6,334.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	162,233.	162,233.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	77,357.	71,720.	5,637.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	498,282.	457,020.	36,308.	4,954.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	31,991.	29,391.	2,331.	269.
9 Other employee benefits	89,474.	82,200.	6,520.	754.
10 Payroll taxes	34,903.	32,066.	2,543.	294.
11 Fees for services (non-employees).				
a Management				
b Legal	2,838.	2,127.	711.	
c Accounting	10,000.	7,494.	2,506.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	23,989.	17,977.	6,012.	
g Other				
12 Advertising and promotion	17,156.	13,107.	4,049.	
13 Office expenses	70,755.	70,755.		
14 Information technology	41,974.	41,974.		
15 Royalties				
16 Occupancy	55,295.	41,938.	13,357.	
17 Travel	108,408.	108,408.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	740,304.	737,989.	2,315.	
20 Interest	33,717.	25,267.	8,450.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	33,334.	24,980.	8,354.	
23 Insurance	50,055.	37,510.	12,545.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>SECTIONS EXPENSE</u>	72,419.	72,419.		
b <u>PERSPECTIVES FULFILLMEN</u>	68,283.	68,283.		
c <u>RECRUITMENT</u>	33,468.	25,080.	8,388.	
d <u>ENDOWMENT EXPENSES</u>	14,879.	14,879.		
e <u>PRESIDENTS EXPENSES</u>	10,562.	7,914.	2,648.	
f All other expenses	<93,418.>	<96,790.>	3,372.	
25 <b>Total functional expenses.</b> Add lines 1 through 24f	2,194,592.	2,062,275.	126,046.	6,271.
26 <b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X. Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	296,235.	<b>1</b>	104,417.
	<b>2</b> Savings and temporary cash investments	207,211.	<b>2</b>	1,319,961.
	<b>3</b> Pledges and grants receivable, net	62,324.	<b>3</b>	56,842.
	<b>4</b> Accounts receivable, net	96,601.	<b>4</b>	181,321.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use	25,620.	<b>8</b>	15,608.
	<b>9</b> Prepaid expenses and deferred charges	208,113.	<b>9</b>	89,088.
	<b>10a</b> Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 4,124,292.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 1,686,418.	2,416,233.	<b>10c</b> 2,437,874.
	<b>11</b> Investments - publicly traded securities	18,484,615.	<b>11</b>	19,559,995.
	<b>12</b> Investments - other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	41,501.	<b>15</b>	39,426.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	21,838,453.	<b>16</b>	23,804,532.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	483,901.	<b>17</b>	958,987.
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue	2,534,462.	<b>19</b>	1,778,757.
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	1,462,156.	<b>23</b>	1,449,066.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D	228,540.	<b>25</b>	259,134.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	4,709,059.	<b>26</b>	4,445,944.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	6,910,107.	<b>27</b>	7,811,174.
	<b>28</b> Temporarily restricted net assets	5,219,287.	<b>28</b>	6,547,414.
	<b>29</b> Permanently restricted net assets	5,000,000.	<b>29</b>	5,000,000.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances</b>	17,129,394.	<b>33</b>	19,358,588.
	<b>34</b> <b>Total liabilities and net assets/fund balances</b>	21,838,453.	<b>34</b>	23,804,532.

Form 990 (2009)

**Part XI Financial Statements and Reporting**

- 1** Accounting method used to prepare the Form 990. ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.  
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		<b>x</b>
<b>2b</b>		<b>x</b>
<b>2c</b>	<b>x</b>	
<b>3a</b>		<b>x</b>
<b>3b</b>		

Form **990** (2009)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

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

**Section C. Computation of Public Support Percentage**

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

Schedule A (Form 990 or 990-EZ) 2009

**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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,991,125.	2,152,574.	2,021,026.	2,455,981.	743,402.	9,364,108.
<b>2</b> 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	1,503,938.	1,705,078.	1,780,210.	1,940,834.	1,476,482.	8,406,542.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513	242,225.	279,325.	287,628.	254,033.	210,347.	1,273,558.
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	3,737,288.	4,136,977.	4,088,864.	4,650,848.	2,430,231.	19,044,208.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
<b>c</b> Add lines 7a and 7b						0.
<b>8 Public support.</b> (Subtract line 7c from line 6)						19,044,208.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6	3,737,288.	4,136,977.	4,088,864.	4,650,848.	2,430,231.	19,044,208.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,474,776.	1,232,165.	577,026.	1,259,202.	195,909.	4,739,078.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	1,474,776.	1,232,165.	577,026.	1,259,202.	195,909.	4,739,078.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	98,298.	69,827.	158,104.	103,801.	21,471.	451,501.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)	5,310,362.	5,438,969.	4,823,994.	6,013,851.	2,647,611.	24,234,787.

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	78.58 %
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	77.49 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	19.55 %
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	20.52 %

**19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒

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

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

Schedule A (Form 990 or 990-EZ) 2009



**Schedule D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

AMERICAN POLITICAL SCIENCE ASSOCIATION

Employer identification number

53-0200001

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ► \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

b Assets included in Form 990, Part X ► \$ \_\_\_\_\_

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

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

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,000,000.				
b Contributions		5,000,000.			
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	5,000,000.	5,000,000.			

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

- a Board designated or quasi-endowment ☐ \_\_\_\_\_ %  
 b Permanent endowment ☐ 100.00 %  
 c Term endowment ☐ \_\_\_\_\_ %

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

- (i) unrelated organizations  
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		572,521.		572,521.
b Buildings		2,770,877.	1,020,521.	1,750,356.
c Leasehold improvements				
d Equipment				
e Other		780,894.	665,897.	114,997.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,437,874.

Schedule D (Form 990) 2009

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

1 (a) Description of liability	(b) Amount
Federal income taxes	
<b>FUNDS HELD FOR OTHERS</b>	<b>11,307.</b>
<b>SWAP LIABILITY</b>	<b>247,827.</b>
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	
	<b>259,134.</b>

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,220,412.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,194,592.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	25,820.
4	Net unrealized gains (losses) on investments	4	2,233,389.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	<30,015.>
9	Total adjustments (net). Add lines 4 through 8	9	2,203,374.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2,229,194.

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

1	Total revenue, gains, and other support per audited financial statements	1	4,284,625.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,233,389.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	<280,472.>
e	Add lines 2a through 2d	2e	1,952,917.
3	Subtract line 2e from line 1	3	2,331,708.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	<111,296.>
c	Add lines 4a and 4b	4c	<111,296.>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,220,412.

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

1	Total expenses and losses per audited financial statements	1	8,971,524.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	6,776,932.
e	Add lines 2a through 2d	2e	6,776,932.
3	Subtract line 2e from line 1	3	2,194,592.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,194,592.

**Part XIV Supplemental Information**

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

**PART V, LINE 4: THE ENDOWMENT HOLDS FUNDS INTENDED FOR THE LONG-TERM**

SUPPORT AND GROWTH OF THE CONGRESSIONAL FELLOWSHIP PROGRAM. THESE ARE

FUNDS THE ASSOCIATION WISHES TO GROW OVER THE LONG TERM CONSISTENT WITH

APPROPRIATE REASONABLE RISK. THE PORTFOLIO IS OVERSEEN BY THE TRUST AND

DEVELOPMENT BOARD OF TRUSTEES, UNDER GUIDELINES ESTABLISHED IN AN

AGREEMENT BETWEEN THE ASSOCIATION AND MCI CORPORATION.

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**Part XIV** Supplemental Information (continued)

LOSS ON INTEREST RATE SWAP: -30015.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

INCOME FOR PRIOR REPORTED TWELVE MONTH STUB PERIOD : -280472.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSES: -111296.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES: 111296.

EXPENSES FOR PRIOR REPORTED TWELVE MONTH STUB PERIOD : 6665636.

**Schedule F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

Employer identification number

AMERICAN POLITICAL SCIENCE ASSOCIATION

53-0200001

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	1	0	PROGRAM SERVICES, STIPENDS	WORKSHOPS	163,809.
<b>Totals</b>	1	0			163,809.

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

Schedule F (Form 990) 2009







**Part IV** Supplemental Information

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

SCHEDULE F, PART I, LINE 2: AS PART OF ITS AFRICA WORKSHOPS, APSA HAS  
ESTABLISHED A SMALL RESEARCH FUND TO SUPPORT ONGOING WORK BY THE NON-US  
WORKSHOP FELLOWS WHO COMPLETE THE RESIDENTIAL PROGRAM, TO TAKE ADVANTAGE  
OF THIS PROGRAM, WHICH PROVIDES UP TO \$1000 TOTAL PER PERSON, APPLICANTS  
MUST HAVE:

PARTICIPATED IN THE 2009 APSA ACCRA WORKSHOP

SUBMITTED A REQUEST TO APSA WITHIN 1 CALENDAR YEAR OF THE COMPLETION OF  
THE WORKSHOP THAT INCLUDES THE FOLLOWING ELEMENTS:

- A. A 2-PAGE OVERVIEW OF THE RESEARCH PROJECT WHICH INCLUDES A DESCRIPTION  
OF THE RESEARCH DESIGN AND PLAN.
- B. A BRIEF BUDGET WHICH SHOWS ALL RELEVANT EXPENSES
- C. A SHORT OVERVIEW OF HOW YOU PLAN TO PUBLISH OR OTHERWISE DISSEMINATE  
YOUR FINAL RESEARCH RESULTS.
- D. A DESCRIPTION OF HOW FUNDS CAN BE TRANSFERRED TO YOU ELECTRONICALLY

WRITE A BRIEF, 1-2 PAGE REPORT AT THE CONCLUSION OF THEIR RESEARCH AWARD  
DESCRIBING THEIR PROJECT AND HOW THE FUNDS SUPPORTED THEIR WORK  
APPLICATIONS WILL BE ACCEPTED ON A ROLLING BASIS BY APSA AND MUST BE  
SUBMITTED VIA E-MAIL TO AFRICAWORKSHOPS@APSANET.ORG.



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CONGRESSIONAL FELLOWSHIP	20	101,333.	0.		
TRAVEL GRANT	161	49,150.	0.		
AWARDS	17	11,750.	0.		

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

## SCHEDULE I, PART I, LINE 2: MINORITY FELLOWSHIP PROGRAM:

THE APSA MINORITY FELLOWS PROGRAM IS DESIGNED PRIMARILY FOR MINORITY

STUDENTS APPLYING TO ENTER A DOCTORAL PROGRAM IN POLITICAL SCIENCE FOR THE

FIRST TIME. ADDITIONAL ELIGIBILITY CRITERIA INCLUDE:

APPLICANTS MUST BE MEMBERS OF ONE OF THE FOLLOWING RACIAL/ETHNIC MINORITY

GROUPS: AFRICAN AMERICANS, ASIAN PACIFIC AMERICANS, LATINOS/AS, AND NATIVE

AMERICANS (FEDERAL AND STATE RECOGNIZED TRIBES)

APPLICANTS MUST DEMONSTRATE AN INTEREST IN TEACHING AND POTENTIAL FOR

RESEARCH IN POLITICAL SCIENCE

**Part IV** Supplemental Information

APPLICANT MUST BE A UNITED STATES CITIZEN AT TIME OF AWARD

APPLICANTS MUST DEMONSTRATE FINANCIAL NEED.

CONGRESSIONAL FELLOWSHIP PROGRAM:

ALL CANDIDATES MUST BE U.S. CITIZENS OR PERMANENT U.S. RESIDENTS AND HOLD A

BACHELOR'S DEGREE. ADDITIONALLY:

PRINT JOURNALISTS MUST HAVE TWO TO TEN YEARS OF CONTINUOUS, FULL-TIME

PROFESSIONAL EXPERIENCE IN NEWSPAPER OR MAGAZINE AT THE TIME OF

APPLICATION. BACKGROUND MAY BE IN REPORTING OR EDITING.

BROADCAST JOURNALISTS MUST HAVE TWO TO TEN YEARS OF CONTINUOUS, FULL-TIME

PROFESSIONAL EXPERIENCE IN RADIO OR TELEVISION AT THE TIME OF APPLICATION.

BACKGROUND MAY BE IN REPORTING, PRODUCING, DIRECTING OR WRITING.

PREFERENCE IS GIVEN TO CANDIDATES WITH BACKGROUND IN POLITICAL REPORTING

BUT WITHOUT EXTENSIVE WASHINGTON EXPERIENCE.

POLITICAL SCIENTISTS:

U.S. CITIZENSHIP OR PERMANENT U.S. RESIDENCY;

A PH.D COMPLETED WITHIN THE LAST 15 YEARS OR A DISSERTATION NEAR COMPLETION

(ABD); AND A SCHOLARLY INTEREST IN CONGRESS AND THE POLICYMAKING PROCESS.

INTERVIEWS AND SELECTION - FELLOWS ARE SELECTED IN A NATIONWIDE

COMPETITION. CANDIDATES MUST FIRST SUBMIT THEIR APPLICATIONS FOR A PAPER

REVIEW BEFORE BEING INVITED BEFORE AN OUTSIDE SELECTION PANEL. INTERVIEWS

TAKE PLACE AT THE APSA OFFICES IN WASHINGTON, DC.

COMMUNICATIONS SCHOLARS AND JOURNALISTS:

ALL CANDIDATES MUST BE U.S. CITIZENS OR PERMANENT U.S. RESIDENTS AND

DEMONSTRATE AN INTEREST IN COMMUNICATIONS AND THE POLICYMAKING PROCESS.

ADDITIONALLY:

SCHOLARS MUST HAVE A PH.D COMPLETED WITHIN THE LAST 15 YEARS OR WILL HAVE

**Part IV Supplemental Information**

DEFENDED THEIR DISSERTATION BY NOVEMBER OF THE FELLOWSHIP YEAR.

PRINT JOURNALISTS MUST HAVE A BACHELOR'S DEGREE AND TWO TO TEN YEARS OF

CONTINUOUS, FULL-TIME PROFESSIONAL EXPERIENCE IN NEWSPAPER OR MAGAZINE AT

THE TIME OF APPLICATION, BACKGROUND MAY BE IN REPORTING OR EDITING.

BROADCAST JOURNALISTS MUST HAVE A BACHELOR'S DEGREE AND TWO TO TEN YEARS OF

CONTINUOUS, FULL-TIME PROFESSIONAL EXPERIENCE IN RADIO OR TELEVISION AT THE

TIME OF APPLICATION, BACKGROUND MAY BE IN REPORTING, PRODUCING, DIRECTING

OR WRITING.

PREFERENCE IS GIVEN TO CANDIDATES WITHOUT EXTENSIVE WASHINGTON EXPERIENCE.

SMALL RESEARCH GRANTS:

THE PRINCIPAL INVESTIGATOR AND ANY CO-AUTHOR MUST BE ONE OF THE FOLLOWING:

A FACULTY MEMBER IN AN ACADEMIC DEPARTMENT THAT DOES NOT AWARD A PHD IN

POLITICAL SCIENCE, PUBLIC ADMINISTRATION, PUBLIC POLICY, INTERNATIONAL

RELATIONS, GOVERNMENT, OR POLITICS AND WHOSE PRIMARY APPOINTMENT IS IN ONE

OF THESE DEPARTMENTS; OR

A POLITICAL SCIENTIST NOT AFFILIATED WITH AN ACADEMIC INSTITUTION AND IS

EITHER (A) UNEMPLOYED OR (B) WORKING IN A RESEARCH ORGANIZATION SUCH AS A

THINK TANK.

RALPH BUNCHE SUMMER INSTITUTE PROGRAM:

PARTICIPANTS IN THE RALPH BUNCHE SUMMER INSTITUTE ARE DRAWN FROM A

COMPETITIVE NATIONAL APPLICANT POOL, THE RBSI SELECTION COMMITTEE REVIEWS

APPLICATIONS AND WILL MAKE DECISIONS DURING THE MONTH OF MARCH, APPLICANTS

WILL BE INFORMED OF THEIR STATUS VIA EMAIL.

TRAVEL GRANTS:

**Part IV Supplemental Information**

APSA MEMBERS WHO ARE U.S. GRADUATE STUDENTS, INTERNATIONAL GRADUATE STUDENTS STUDYING IN THE U.S., UNEMPLOYED, OR INTERNATIONAL SCHOLARS ARE ELIGIBLE TO APPLY.

ONLY APSA MEMBERS WHO ARE PRE-REGISTERED FOR THE APSA ANNUAL MEETING MAY APPLY TO RECEIVE TRAVEL GRANTS. IF YOU ARE NOT A MEMBER, JOIN NOW!

APPLICANTS WHO HAVE PRE-REGISTERED FOR THE ANNUAL MEETING BY APRIL 23, 2010 WILL RECEIVE PRIORITY.

PRIORITY WILL BE GIVEN TO ANNUAL MEETING PRESENTERS, FIRST-TIME APPLICANTS, AND THOSE WHO HAVE NOT RECEIVED A TRAVEL GRANT SINCE 2008.

**AWARDS:**

DEPARTMENTS ARE REQUESTED TO SUBMIT A LETTER OF NOMINATION AND A COPY OF THE DISSERTATION TO EACH AWARD COMMITTEE MEMBER. ONE COPY OF EACH NOMINATED BOOK SHOULD BE SENT TO EACH COMMITTEE MEMBER, AS WELL AS TO THE APSA AWARDS COORDINATOR. BOOKS MAY BE NOMINATED FOR MORE THAN ONE PRIZE, SHOULD THEY MEET THE SELECTED CRITERIA.

**PUBLIC POLICY & INTERNATIONAL AFFAIRS (PPIA) FELLOWSHIP PROGRAM:**

ALL PROSPECTIVE PPIA FELLOWS ARE EXPECTED TO DEDICATE THEMSELVES TO THE TRADITIONS AND OBJECTIVES OF THE PPIA FELLOWSHIP PROGRAM, HAVE AN ABIDING COMMITMENT TO PUBLIC SERVICE AND CONTRIBUTE TO MORE DIVERSE PERSPECTIVES IN PUBLIC POLICY AND INTERNATIONAL AFFAIRS.

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.  
▶ See the Instructions for Form 990.

**Open to Public Inspection**

AMERICAN POLITICAL SCIENCE ASSOCIATION

Employer Identification number  
53-0200001

(A)

Name and title

(B)  
Average  
hours  
per  
week

Position  
(check all that apply)

Individual trustee or director

**Institutional trustee**

Officer

**Κεν επίλογος**

**Highest compensated employee**

**Farmer**

(D)  
Reportable  
compensation  
from  
the  
organization  
(W-2/1099-MISC)

(E)  
Reportable  
compensation  
from related  
organizations  
(W-2/1099-MISC)

**(F)**  
Estimated  
amount of  
other  
compensation  
from the  
organization  
and related  
organizations

MICHAEL BRINTNALL  
EXEC. DIRECTOR

**40.00**

**x**

**x**

C

0

0

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

AMERICAN POLITICAL SCIENCE ASSOCIATION

Employer identification number

53-0200001

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

INDEPENDENT, SELF-GOVERNING SOCIETY IS COMMITTED TO FOSTERING THE STUDY

OF POLITICS, STRENGTHENING THE PROFESSION, AND PROVIDING AN

ORGANIZATIONAL MECHANISM TO SERVE ITS MEMBERS AS WELL AS, MORE

GENERALLY, POLITICAL SCIENTISTS AND THE BROADER PUBLIC, APSA'S VALUES

INCLUDE DEEP AND HONEST SCHOLARSHIP, TEACHING THAT ENHANCES

UNDERSTANDING OF AND PARTICIPATION IN POLITICS AND GOVERNMENT, AND

ACADEMIC FREEDOM TO INVESTIGATE POLITICAL ISSUES WITHOUT INTERFERENCE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

LARGEST ASSEMBLY OF POLITICAL SCIENCE TEXTBOOK PUBLISHERS NATIONALLY,

AND PROVIDES PUBLISHING OPPORTUNITIES FOR THE MEMBERSHIP.

JOURNALS

APSA PUBLISHES AND DISTRIBUTES THREE JOURNALS THAT ARE CORE TO THE

POLITICAL SCIENCE DISCIPLINE: THE AMERICAN POLITICAL SCIENCE REVIEW,

PERSPECTIVES ON POLITICS; AND PS.

DSPONLINE/DEPARTMENTAL SERVICES PROGRAM

THE DEPARTMENTAL SERVICES PROGRAM IS A PROGRAM FOR ACADEMIC DEPARTMENTS

TO PROVIDE THEM WITH CURRENT APSA PUBLICATIONS, SERVICES AND

INFORMATION DESIGNED TO ENHANCE RESEARCH, EDUCATION, AND PUBLIC

UNDERSTANDING OF POLITICS, THE PROGRAM FEATURES DSPONLINE - A CENTRAL

LOCATION FOR ACADEMIC DEPARTMENTS AND NONACADEMIC INSTITUTIONS TO

PARTICIPATE IN APSA PROGRAMS, AND KEEP ABREAST OF DEVELOPMENTS OF

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

Schedule O (Form 990) 2009

932211  
02-03-10



**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

AMERICAN POLITICAL SCIENCE ASSOCIATION

Employer identification number

53-0200001

INTEREST TO DEPARTMENTS; INFORMATION GATHERING AND DISSEMINATION ABOUT

DEPARTMENTS AND CAREER INTERESTS; AND SPECIALIZED CONFERENCES FOR

DEPARTMENT CHAIRS AND OTHER ADMINISTRATORS.

CONGRESSIONAL FELLOWSHIP PROGRAM

THE APSA OFFERS THIS HIGHLY SELECTIVE, NONPARTISAN PROGRAM DEVOTED TO

EXPANDING KNOWLEDGE AND AWARENESS OF CONGRESS, FOR NINE MONTHS, SELECT

POLITICAL SCIENTISTS, JOURNALISTS, DOCTORS, FEDERAL EXECUTIVES AND

INTERNATIONAL SCHOLARS GAIN "HANDS ON" UNDERSTANDING OF THE LEGISLATIVE

PROCESS BY SERVING ON CONGRESSIONAL STAFFS.

THROUGH THIS UNIQUE OPPORTUNITY, THE APSA SEEKS TO ENHANCE PUBLIC

UNDERSTANDING OF POLICY-MAKING AND IMPROVE THE QUALITY OF SCHOLARSHIP.

TEACHING AND REPORTING ON AMERICAN NATIONAL POLITICS.

CENTENNIAL CENTER FOR POLITICAL SCIENCE AND PUBLIC AFFAIRS

THE AMERICAN POLITICAL SCIENCE ASSOCIATION, IN RECOGNITION OF ITS

CENTENARY, LAUNCHED THE CENTENNIAL CENTER FOR POLITICAL SCIENCE AND

PUBLIC AFFAIRS IN THE FALL OF 2003. THE CENTER IS DESIGNED TO EXPAND

OPPORTUNITIES FOR CREATING KNOWLEDGE AND PROMOTING TEACHING IN THE

DISCIPLINE. IT ENCOURAGES INDIVIDUAL RESEARCH AND WRITING IN ALL FIELDS

OF POLITICAL SCIENCE; FACILITATES COLLABORATION AMONG SCHOLARS WORKING

WITHIN THE DISCIPLINE AND ACROSS THE SOCIAL AND BEHAVIORAL SCIENCES AND

HUMANITIES; AND PROMOTES COMMUNICATION BETWEEN SCHOLARS AND

POLICYMAKERS.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

AMERICAN POLITICAL SCIENCE ASSOCIATION

Employer identification number

53-0200001

CONFERENCE ON TEACHING AND LEARNING IN POLITICAL SCIENCE

THE CONFERENCE ON TEACHING AND LEARNING CONVENES ANNUAL TO ADDRESS

ISSUES OF CURRICULUM, PEDAGOGY, PROGRAM ASSESSMENT, CIVIC EDUCATION,

TEACHING RESEARCH METHODS, INTERNATIONALIZING THE CURRICULUM,

SIMULATIONS AND ROLE PLAY, INCLUSIVENESS, AND EQUALITY IN UNDERGRADUATE

AND GRADUATE TEACHING AND LEARNING IN POLITICAL SCIENCE. THE

CONFERENCE FOLLOWS A WORKING GROUP MODEL IN WHICH SCHOLARS ENGAGE

INTENSIVELY WITH COLLEAGUES OVER 2 AND 1/2 DAYS OF MEETING.

SUPPLEMENTED WITH TOPICAL WORKSHOPS COMMUNITY COLLEGES.

MINORITY FELLOWSHIPS AND OTHER INITIATIVES

FOR FORTY YEARS, APSA HAS SUPPORTED SCHOLARS FROM UNDERREPRESENTED

GROUPS ATTEND DOCTORAL PROGRAMS, THROUGH RECOGNITION AND FINANCIAL

SUPPORT FROM MINORITY FELLOWSHIPS. MORE THAN 500 FELLOWS HAVE BEEN

DESIGNATED IN THIS EFFORT.

APSA ALSO SUPPORTS THE WORK OF THE RALPH BUNCHE SUMMER INSTITUTE TO

ALLOW UNDERGRADUATES FROM DIVERSE BACKGROUNDS OR WITH INTERESTS IN

BROADENING OPPORTUNITIES FOR STUDENTS FROM UNDERREPRESENTED BACKGROUNDS

TO GET A PREVIEW OF GRADUATE LEVEL WORK AND TO PREPARE,

INTERNATIONAL PROGRAMS

APSA OPERATES PROGRAMS TO ENGAGE WITH SCHOLARS FROM INTERNATIONAL

ARENAS, INCLUDING RUNNING SUMMER WORKSHOPS IN AFRICA TO PROVIDE

OPPORTUNITIES FOR JUNIOR FOREIGN SCHOLARS TO ADVANCE BASIC RESEARCH

SKILLS AND PROJECTS.

TASK FORCES

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
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Department of the Treasury  
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APSA SPONSORS TASK FORCES MARSHALLING THE EXPERTISE OF POLITICAL

SCIENTISTS TO BEAR ON IMPORTANT ISSUES WITHIN SOCIETY AND THE

PROFESSION, TASK FORCES COMPILE AND REVIEW EXTANT SCHOLARLY KNOWLEDGE,

PUBLISH SUMMARIES OF THIS RESEARCH FOR THE PUBLIC AND DECISION MAKERS,

PREPARE TEACHING MATERIALS, AND DISSEMINATE MATERIAL IN OTHER WAYS.

FORM 990, PART VI, SECTION A, LINE 6: WITH MORE THAN 15,000 MEMBERS

RESIDING IN OVER 80 COUNTRIES WORLDWIDE, THE AMERICAN POLITICAL SCIENCE

ASSOCIATION IS THE WORLD'S LARGEST PROFESSIONAL ORGANIZATION FOR THE STUDY

OF POLITICS, THROUGH APSA'S EXTRAORDINARY RANGE OF PROGRAMS AND SERVICES

FOR INDIVIDUALS, DEPARTMENTS, AND INSTITUTIONS, THE ASSOCIATION BRINGS

TOGETHER POLITICAL SCIENTISTS FROM ALL FIELDS OF INQUIRY, REGIONS, AND

OCCUPATIONAL ENDEAVORS IN ORDER TO EXPAND OUR AWARENESS AND UNDERSTANDING

OF POLITICAL LIFE

FORM 990, PART VI, SECTION A, LINE 7A: THE ELECTIVE OFFICERS, EXCEPT THE

PRESIDENT, SHALL BE CHOSEN BY VOTE OF THE MEMBERS OF THE ASSOCIATION

ATTENDING THE ANNUAL BUSINESS MEETING, A QUORUM BEING PRESENT, PROVIDED

THAT WHENEVER THERE IS A CONTEST FOR ANY ELECTED OFFICE OR OFFICES SUCH

ELECTIONS SHALL BE CONDUCTED BY MAIL BALLOT OF THE ENTIRE INDIVIDUAL

MEMBERSHIP, IN THE LATTER EVENT THE EXECUTIVE DIRECTOR SHALL DISTRIBUTE

BALLOTS WITHIN THIRTY (30) DAYS FOLLOWING THE ANNUAL BUSINESS MEETING AND

UNDER SUCH OTHER CONDITIONS AS THE COUNCIL MAY PRESCRIBE, AND HE OR SHE

SHALL COUNT ONLY BALLOTS RETURNED WITHIN THIRTY (30) DAYS FOLLOWING

DISTRIBUTION; EACH CONTESTED ELECTION, EXCEPT AS SPECIFIED BELOW FOR THE

PRESIDENT-ELECT, SHALL BE DETERMINED BY A PLURALITY OF THOSE VOTING ON THE

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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PARTICULAR OFFICE; IF THE NUMBER OF NOMINEES FOR THE SET OF  
VICE-PRESIDENCIES OR FOR COUNCIL MEMBERSHIP EXCEEDS THE NUMBER OF OFFICES  
CONSTITUTIONALLY TO BE FILLED, ALL SUCH NOMINEES SHALL APPEAR ON THE MAIL  
BALLOT, MEMBERS SHALL BE ENTITLED TO VOTE FOR A NUMBER EQUAL TO THE NUMBER  
OF OFFICES IN THE SET, AND THE NOMINEES RANKING HIGHEST IN THE POLL, IN A  
NUMBER EQUAL TO THE NUMBER OF OFFICES, SHALL BE DECLARED ELECTED. THE  
PRESIDENT-ELECT SHALL BE CHOSEN BY THE ABOVE METHOD ONLY IF THERE ARE TWO  
AND ONLY TWO NOMINEES FOR THE OFFICE. SHOULD THERE BE THREE OR MORE  
NOMINEES FOR PRESIDENT-ELECT, BALLOTS FOR THAT OFFICE SHALL BE SO DESIGNED  
AS TO ENABLE MEMBERS TO DESIGNATE THEIR RANK-ORDERED PREFERENCES BY PLACING  
NUMBERS BESIDE THE NAMES OF THE NOMINEES ("1" FOR FIRST PREFERENCE, "2" FOR  
SECOND PREFERENCE, AND SO ON FOR EACH NOMINEE). IF NO NOMINEE RECEIVES AT  
LEAST FIFTY-PERCENT-PLUS-ONE OF THE FIRST PREFERENCES, OTHER PREFERENCES  
SHALL BE ADDED FROM THE FIRST-PREFERENCE BALLOTS OF EACH ELIMINATED NOMINEE  
ACCORDING TO THE STANDARD METHOD OF THE ALTERNATIVE VOTE SYSTEM, WHICH  
SHALL BE PRESCRIBED BY THE COUNCIL IN ADVANCE OF NOMINATIONS, UNTIL ONE  
NOMINEE RECEIVES AT LEAST FIFTY-PERCENT-PLUS-ONE OF THE AGGREGATED  
PREFERENCES AND IS DECLARED THE WINNER, THE PRESIDENT-ELECT SHALL  
AUTOMATICALLY SUCCEED TO THE OFFICE OF PRESIDENT UPON THE COMPLETION OF THE  
PRESIDENT'S TERM, OR UPON THE OCCURRENCE OF ONE OF THE CONTINGENCIES  
PROVIDED FOR IN SECTION 3 OF THIS ARTICLE. THE TERMS OF ELECTIVE OFFICERS,  
EXCEPT MEMBERS OF THE COUNCIL AND THE TREASURER, SHALL EXTEND FOR ONE YEAR  
MEASURED FROM THE END OF THE PROGRAM OF THE ANNUAL MEETING, EXCEPT THAT AN  
OFFICER'S TERM SHALL IN NO EVENT EXPIRE UNTIL HIS OR HER SUCCESSOR ASSUMES  
OFFICE, THE TERMS OF MEMBERS OF THE COUNCIL SHALL EXTEND FOR TWO YEARS,

SIMILARLY CALCULATED, AND ONE-HALF SHALL EXPIRE EACH YEAR. THE TERM OF THE

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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TREASURER SHALL ALSO EXTEND FOR TWO YEARS, SIMILARLY CALCULATED.

FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERSHIP OF THE ASSOCIATION

DULY ASSEMBLED IN THE ANNUAL BUSINESS MEETING OR IN A SPECIAL MEETING

CALLED SHALL CONSIDER POLICY QUESTIONS BROUGHT TO IT, AND MAY VOTE TO

CONFIRM, REVISE, OR REPEAL THE ACTION OF THE COUNCIL, OR ANY OFFICER.

WHENEVER ONE-THIRD OR MORE OF THOSE PRESENT AND VOTING AT THE ANNUAL

BUSINESS MEETING VOTE TO REPEAL, REVISE, OR SUBSTITUTE THE JUDGMENT OF THE

MEETING FOR AN ACT OR RECOMMENDATION OF THE COUNCIL OR OF ANY OFFICER, THE

QUESTION SHALL BE SUBMITTED TO THE ENTIRE MEMBERSHIP IN A MAILED, SECRET

BALLOT UNDER CONDITIONS PRESCRIBED BY THE COUNCIL AND SHALL BE DETERMINED

BY A MAJORITY OF THOSE VOTING BY MAIL ON THE QUESTION, ONE HUNDRED MEMBERS

SHALL CONSTITUTE A QUORUM FOR THE ANNUAL BUSINESS MEETING, THE ASSOCIATION

SHALL MEET ANNUALLY AT A TIME AND PLACE DESIGNATED BY THE COUNCIL, THE

COUNCIL AND THE OFFICERS SHALL MAKE EVERY EFFORT TO ACQUAINT THE MEMBERS

WITH THE BUSINESS OF THE ASSOCIATION AND WITH THE ISSUES INVOLVED IN THE

AGENDA OF THE ANNUAL BUSINESS MEETING OR IN A BALLOT BY MAIL, AND TO

PROVIDE SUFFICIENT TIME AT BUSINESS MEETINGS FOR DELIBERATIONS AND VOTES.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 IS MADE

AVAILABLE TO THE COUNCIL FOR THEIR REVIEW PRIOR TO FILING, THE COUNCIL

MEMBERS ARE INSTRUCTED TO CONTACT THE EXECUTIVE DIRECTOR OR FINANCE

DIRECTOR IF THEY HAVE ANY QUESTIONS REGARDING THE RETURN, AFTER A

REASONABLE PERIOD OF TIME, THE FORMS ARE FILED IF THERE ARE NO FURTHER

QUESTIONS.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
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OMB No 1545-0047

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53-0200001

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION'S CONFLICT OF

INTEREST POLICY REQUIRES KEY EMPLOYEES AND ALL MEMBERS OF THE COUNCIL

INCLUDING THE EDITORS AND PROGRAM CHAIRS TO COMPLETE A QUESTIONNAIRE

REGARDING CONFLICTS AND A LIST OF THE TAXPAYERS COUNCIL MEMBERS, KEY

EMPLOYEES, AND VENDORS ANNUALLY AT THE SPRING MEETING IN ORDER TO MONITOR

AND ENFORCE COMPLIANCE WITH THE POLICY.

FORM 990, PART VI, SECTION B, LINE 15: A WRITTEN EMPLOYMENT CONTRACT WAS

ESTABLISHED UPON THE HIRING OF THE EXECUTIVE DIRECTOR. IT IS REVIEWED ON A

FIVE YEAR BASIS BY THE PRESIDENT AND THE ADMINISTRATIVE COMMITTEE.

THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED BY THE PRESIDENT

AND THE ADMINISTRATIVE COMMITTEE, PROVIDED THAT PERSONS WITH CONFLICTS OF

INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT

INVOLVED IN THIS REVIEW AND APPROVAL.

THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA AS TO

COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY

COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS.

THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO

THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING

DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE

AVAILABLE UPON REQUEST.

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

Schedule O (Form 990) 2009

932211  
02-03-10

**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization	Employer identification number
	AMERICAN POLITICAL SCIENCE ASSOCIATION	53-0200001
	Number, street, and room or suite no. If a P.O. box, see instructions. 1527 NEW HAMPSHIRE AVENUE, NW	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**THE ASSOCIATION**

- The books are in the care of ▶
- 1527 NEW HAMPSHIRE AVENUE, NW - WASHINGTON, DC 20036**

Telephone No. ▶ **(202) 483-2512**

FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **MAY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year \_\_\_\_\_ or  
 ▶ ☒ tax year beginning **JUL 1, 2009**, and ending **SEP 30, 2009**

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☒ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c <b>Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ <b>N/A</b>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer Identification number
	AMERICAN POLITICAL SCIENCE ASSOCIATION	53-0200001
	Number, street, and room or suite no. If a P.O. box, see instructions. 1527 NEW HAMPSHIRE AVENUE, NW	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Check type of return to be filed (File a separate application for each return):

☒ Form 990   
 ☐ Form 990-EZ   
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)   
 ☐ Form 1041-A   
 ☐ Form 5227   
 ☐ Form 8870  
☐ Form 990-BL   
☐ Form 990-PF   
☐ Form 990-T (trust other than above)   
☐ Form 4720   
☐ Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**THE ASSOCIATION**

• The books are in the care of **1527 NEW HAMPSHIRE AVENUE, NW - WASHINGTON, DC 20036**  
 Telephone No. **(202) 483-2512** FAX No. \_\_\_\_\_

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **AUGUST 15, 2010**

5 For calendar year \_\_\_\_\_, or other tax year beginning **JUL 1, 2009**, and ending **SEP 30, 2009**

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☒ Change in accounting period

7 State in detail why you need the extension

**INFORMATION REQUIRED TO FILE A COMPLETE AND ACCURATE RETURN WILL NOT BE AVAILABLE UNTIL AFTER THE FIRST EXTENDED DUE DATE.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ <b>N/A</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **ACCOUNTANT** Date **5/14/10**

Form 8868 (Rev. 4-2009)