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Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

THE AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) IS A NATIONAL MEMBERSHIP ORGANIZATION CREATED TO ADVANCE PSYCHOLOGY AS A MEANS OF PROMOTING HEALTH, EDUCATION, AND HUMAN WELFARE APA FULFILLS THESE OBJECTIVES BY SUPPORTING A NUMBER OF PROGRAMS AND ACTIVITIES FOR ITS MEMBERS AND THE GENERAL PUBLIC THESE ACTIVITIES INCLUDE PROMOTION OF RESEARCH IN PSYCHOLOGY, DISSEMINATION OF RESEARCH RESULTS AND PSYCHOLOGICAL KNOWLEDGE TO BOTH CLINICAL PSYCHOLOGISTS AND THE PUBLIC, PROGRAMS DESIGNED TO SUPPORT THE USE OF PSYCHOLOGICAL KNOW-HOW IN EDUCATION, AND PROGRAMS DESIGNED TO ENSURE QUALITY EDUCATIONAL OPPORTUNITIES FOR STUDENTS INTERESTED IN PURSUING A CAREER IN PSYCHOLOGY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 34,857,159 including grants of \$) (Revenue \$ 52,094,648)

THE APA PUBLICATIONS AND DATABASES OFFICE IS RESPONSIBLE FOR THE DISSEMINATION OF PSYCHOLOGICAL INFORMATION WORLDWIDE INFORMATION DISSEMINATION PROJECTS INCLUDE 58 SCHOLARLY JOURNALS, A BOOK AND VIDEO PUBLISHING PROGRAM, AND FIVE ELECTRONIC DATABASE PRODUCTS IN 2009 THE APA JOURNALS PROGRAM PUBLISHED OVER 3,250 ARTICLES IN 270 ISSUES PSYCARICLES, THE ELECTRONIC DATABASE PRODUCT CONTAINING FULL TEXT JOURNAL CONTENT, RELEASED 317 ISSUES WITH 3,689 ARTICLES OF JOURNAL CONTENT PUBLISHED IN 2009, AND 268 ISSUES WITH 3,003 ARTICLES OF OLDER JOURNAL CONTENT APA PUBLISHED 70 BOOKS AND RELEASED 12 VIDEOS IN 2009 254 BOOKS WERE ADDED TO THE PSYCBOOKS DATABASE, THESE INCLUDED 41 BOOKS PUBLISHED BY APA AND 213 OLDER BOOKS PUBLISHED BY OTHERS PSYCINFO, THE BIBLIOGRAPHIC DATABASE, WAS INCREASED BY 186,328 RECORDS PSYCINFO ALSO ADDED 206 NEW TERMS TO THE THESAURUS OF PSYCHOLOGICAL INDEX TERMS, WHICH CONSTITUTES THE CONTROLLED VOCABULARY USED FOR INDEXING APA DATABASES PSYCEXTRA, THE GRAY LITERATURE DATABASE THAT INCLUDES BOTH BIBLIOGRAPHIC RECORDS AND FULL TEXT CONTENT, INCREASED BY 24,758 RECORDS IN 2009, 495 NEW REVIEWS WERE ADDED TO PSYCCRITIQUES, THE DATABASE OF BOOK AND FILM REVIEWS

4b

(Code) (Expenses \$ 9,295,452 including grants of \$) (Revenue \$ 18,264,983)

THE APA PUBLIC & MEMBER COMMUNICATIONS DIRECTORATE COMPRISES MEDIA RELATIONS AND PUBLIC AFFAIRS, MEMBERSHIP SERVICES, MARKETING AND ADVERTISING SALES, PUBLICATIONS EDITING AND DESIGN, AND TWO MEMBER MAGAZINES THE DIRECTORATE IS THE PRIMARY POINT OF CONTACT FOR MEDIA, MEMBERS AND THE PUBLIC, AND AS SUCH, STRIVES TO ADVANCE PSYCHOLOGY AS A SCIENCE, AS A PROFESSION AND AS A MEANS OF PROMOTING HUMAN HEALTH AND WELFARE DIRECTORATE ACTIVITIES INCLUDE DEVELOPMENT OF MEMBERSHIP RECRUITMENT ADVERTISING AND DIRECT MAIL CAMPAIGNS AND THE PROMOTION OF MEMBERSHIP BENEFITS AND PRODUCTS RESPONSIBILITIES INCLUDE THE SALE OF ADVERTISING IN ALL OFFICIAL APA MAGAZINES, JOURNALS, AND ON APA'S WEBSITE, THE SALE OF EXHIBIT SPACE AT APA'S ANNUAL CONVENTION, PUBLISHING TIMELY INFORMATION ON APA'S WEBSITE AND ENSURING A POSITIVE USER EXPERIENCE, AND OPERATING THE MEMBER SERVICE CENTER, WHICH HANDLES MEMBER RELATIONS, BULK SUBSCRIPTION ORDERS, BOOK AND JOURNAL FULFILLMENT AND DUES PROCESSING THE DIRECTORATE SERVES AS THE PRIMARY CONDUIT FOR INFORMATION FOR MEDIA, THE GENERAL PUBLIC AND POLICYMAKERS ABOUT PSYCHOLOGY AND APA THROUGH NEWS STORIES IN POPULAR AND TRADE MEDIA AND THROUGH DISSEMINATION OF INFORMATION VIA WWW APA ORG AND PUBLICATION OF PAMPHLETS AND BROCHURES

4c

(Code) (Expenses \$ 8,574,140 including grants of \$ 15,000) (Revenue \$ 3,574,557)

THE APA EDUCATION DIRECTORATE PLAYS A STRONG ROLE IN THE AREA OF QUALITY ASSURANCE FOR 901 ACCREDITED PROGRAMS IN PROFESSIONAL PSYCHOLOGY THE CONTINUING EDUCATION COMMITTEE APPROVED 784 ORGANIZATIONS AS SPONSORS OF CONTINUING EDUCATION THE DIRECTORATE ALSO PLAYS AN IMPORTANT ROLE IN SHAPING THE EDUCATIONAL EXPERIENCE OF TOMORROW'S PSYCHOLOGISTS AND IN PROVIDING CONTINUING PROFESSIONAL EDUCATION FOR TODAY'S PRACTITIONER CONTINUING EDUCATION IS OFFERED THROUGH 39 WEB DELIVERED PROGRAMS, AND 107 BOOK-BASED AND JOURNAL ARTICLE-BASED PROGRAMS 355 CONTINUING EDUCATION OPPORTUNITIES WERE OFFERED BEFORE AND DURING THE 2009 APA CONVENTION IN SAN DIEGO, CALIFORNIA

4d

Other program services (Describe in Schedule O)

(Expenses \$ 25,080,898 including grants of \$ 152,978) (Revenue \$ 28,101,275)

4e









Total program service expenses

\$ 77,807,649

Form 990 (2009)

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

| | | | Yes | No | |
|---|--|---|-------|-----|-----|
| 1a | Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable | 1a | 1,287 | | |
| | b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | | 0 |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | | 1c | Yes | |
| 2a | Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return | 2a | 726 | | |
| | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) | | | | 2b |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | | 3a | Yes |
| b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 3b | Yes | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | | 4a | Yes |
| | b If "Yes," enter the name of the foreign country: CA See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | No |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | 5b | No | |
| c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | | | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | | | 6a | No |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | 6b | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | | | |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | | | 7a | No | |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | | 7c | No | |
| d If "Yes," indicate the number of Forms 8282 filed during the year | | | 7d | | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | 7e | No | |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 7f | No | |
| g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | | 7g | | |
| h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | | 7h | | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | 8 | | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | | | |
| a Did the organization make any taxable distributions under section 4966? | | | 9a | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9b | | |
| 10 Section 501(c)(7) organizations. Enter | | | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | 10a | | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | 10b | | | |
| 11 Section 501(c)(12) organizations. Enter | | | | | |
| a Gross income from members or shareholders | | 11a | | | |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | 11b | | | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | | 12a | | |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | 12b | | |

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

| | | | | |
|----|---|----|-----|----|
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body . . . | 1a | 174 | |
| b | Enter the number of voting members that are independent . . . | 1b | 174 | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | Yes | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . | 3 | | No |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | Yes | |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? . . . | 5 | | No |
| 6 | Does the organization have members or stockholders? | 6 | Yes | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | Yes | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . | 7b | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| a | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |

Section B. Policies

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

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

Section C. Disclosure

| | |
|----|---|
| 17 | List the States with which a copy of this Form 990 is required to be filed▶ |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table. |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ NANCY PINA 750 FIRST STREET NE WASHINGTON, DC 20002 (202) 336-5827 |

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

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

Form **990** (2009)

| | | | | |
|-----------|------------------------|-----------|---|---------|
| 1b | Total | 4,829,019 | 0 | 665,420 |
|-----------|------------------------|-----------|---|---------|

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 **81**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| CLOVIS GROUP 10411 MOTOR CITY DRIVE BETHESDA, MD 20817 | COMPUTER SERVICES | 487,412 |
| ATYPON SYSTEMS INC 5201 GREAT AMERICA PKWY SANTA CLARA, CA 95054 | COMPUTER SERVICES | 477,915 |
| MASTER INFORMATIX SYSTEM INC 22636 GLENN DRIVE STERLING, VA 20164 | COMPUTER SERVICES | 459,925 |
| PLAN B TECHNOLOGIES 16701 MELFORD BLVD BOWIE, MD 20715 | COMPUTER SERVICES | 418,952 |
| APPLIED ENGINEERING MGMT CORP PO BOX 1263 CAMARILLO, CA 93011 | COMPUTER SERVICES | 411,139 |

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 **39**

Part VIII

Statement of Revenue

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|--|---|---------------|----------------------|--|---|---|--|
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns . . . | 1a | | | | | |
| | b | Membership dues | 1b | | | | | |
| | c | Fundraising events | 1c | | | | | |
| | d | Related organizations | 1d | | | | | |
| | e | Government grants (contributions) | 1e | 3,869,140 | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | | | | | |
| | g | Noncash contributions included in lines 1a-1f \$ _____ | | | | | | |
| | h | Total. Add lines 1a-1f | | | 3,869,140 | | | |
| Program Service Revenue | | | Business Code | | | | | |
| | 2a | JOURNAL SUBSCRIPTIONS | 111,000 | 15,686,436 | 15,686,436 | | | |
| | b | LICENSING, ROYALTIES, AND RIGHTS | 541,900 | 44,946,717 | 44,946,717 | | | |
| | c | MEMBERSHIP DUES | 900,099 | 14,547,198 | 14,547,198 | | | |
| | d | PUBLICATION SALES | 511,120 | 19,807,447 | 19,807,447 | | | |
| | e | CONVENTION AND CONFERENCE FEES | 611,600 | 2,452,772 | 2,452,772 | | | |
| | f | All other program service revenue | | 2,928,584 | 2,928,584 | | | |
| | g | Total. Add lines 2a-2f | | | 100,369,154 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest and other similar amounts) | | | 335,270 | | 335,270 | |
| | 4 | Income from investment of tax-exempt bond proceeds . . | | | 0 | | | |
| | 5 | Royalties | | | 0 | | | |
| | 6a | (i) Real | | (ii) Personal | | | | |
| | | Gross Rents | 14,674,285 | | | | | |
| | | b Less rental expenses | | | | | | |
| | | c Rental income or (loss) | 14,674,285 | | | | | |
| | d | Net rental income or (loss) | | | 14,674,285 | 4,717,139 | 9,957,146 | |
| | 7a | (i) Securities | | (ii) Other | | | | |
| | | Gross amount from sales of assets other than inventory | 48,928,756 | 0 | | | | |
| | | b Less cost or other basis and sales expenses | 43,347,138 | 100,410 | | | | |
| | | c Gain or (loss) | 5,581,618 | -100,410 | | | | |
| | d | Net gain or (loss) | | | 5,481,208 | | 5,481,208 | |
| | 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | | | | | | |
| | | a | | | | | | |
| | | b Less direct expenses | b | | | | | |
| | c | Net income or (loss) from fundraising events . . | | | 0 | | | |
| | 9a | Gross income from gaming activities See Part IV, line 19 | | | | | | |
| | | a | | | | | | |
| | | b Less direct expenses | b | | | | | |
| c | Net income or (loss) from gaming activities . . | | | 0 | | | | |
| 10a | Gross sales of inventory, less returns and allowances | | | | | | | |
| | a | | | | | | | |
| | b Less cost of goods sold | b | | | | | | |
| c | Net income or (loss) from sales of inventory . . | | | 0 | | | | |
| Miscellaneous Revenue | | Business Code | | | | | | |
| 11a | MAILING LIST RENTAL | | 533,110 | 272,888 | | 272,888 | | |
| b | EXPENSE REIMBURSEMENT | | 900,003 | 1,341,784 | 1,341,784 | | | |
| c | ADVERTISING | | 541,800 | 2,661,071 | | 2,661,071 | | |
| d | All other revenue | | | 1,746,835 | 324,525 | 1,422,310 | | |
| e | Total. Add lines 11a-11d | | | 6,022,578 | | | | |
| 12 | Total revenue. See Instructions | | | 130,751,635 | 102,035,463 | 9,073,408 | 15,773,624 | |

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 | 110,955 | 110,955 | | |
| 2 | Grants and other assistance to individuals in the U S See Part IV, line 22 | 57,023 | 57,023 | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | 0 | 0 | | |
| 4 | Benefits paid to or for members | 0 | 0 | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 4,186,317 | 2,775,832 | 1,410,485 | 0 |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | 0 | 0 | 0 |
| 7 | Other salaries and wages | 37,738,799 | 24,721,156 | 13,017,643 | 0 |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 1,445,315 | 0 | 1,445,315 | 0 |
| 9 | Other employee benefits | 5,738,948 | 20,176 | 5,718,772 | 0 |
| 10 | Payroll taxes | 2,873,276 | 0 | 2,873,276 | 0 |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | 432,714 | 0 | 432,714 | 0 |
| b | Legal | 987,423 | 190,866 | 796,557 | 0 |
| c | Accounting | 349,607 | 0 | 349,607 | 0 |
| d | Lobbying | 250,996 | 250,996 | 0 | 0 |
| e | Professional fundraising See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 371,752 | 0 | 371,752 | 0 |
| g | Other | 8,371,718 | 5,846,106 | 2,525,612 | 0 |
| 12 | Advertising and promotion | 1,373,348 | 1,049,265 | 324,083 | 0 |
| 13 | Office expenses | 17,636,591 | 14,276,369 | 3,360,222 | 0 |
| 14 | Information technology | 0 | 0 | 0 | 0 |
| 15 | Royalties | 1,901,125 | 1,906,290 | -5,165 | 0 |
| 16 | Occupancy | 15,206,498 | 1,418,458 | 13,788,040 | 0 |
| 17 | Travel | 769,281 | 675,438 | 93,843 | 0 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | 0 | 0 | 0 |
| 19 | Conferences, conventions, and meetings | 1,829,554 | 568,695 | 1,260,859 | 0 |
| 20 | Interest | 4,195,253 | 0 | 4,195,253 | 0 |
| 21 | Payments to affiliates | 0 | 0 | 0 | 0 |
| 22 | Depreciation, depletion, and amortization | 6,243,966 | 287,604 | 5,956,362 | 0 |
| 23 | Insurance | 0 | | | |
| 24 | Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) | | | | |
| a | CORPORATE DUES & MEMBERSHIPS | 490,208 | 443,958 | 46,250 | 0 |
| b | INCOME TAX EXPENSE | 216,788 | 0 | 216,788 | 0 |
| c | BOARD AND COMMITTEE | 2,009,091 | 815,255 | 1,193,836 | 0 |
| d | HONORARIA AND STIPENDS | 1,923,397 | 1,717,670 | 205,727 | 0 |
| e | TRAINEE GRANTS | 1,219,437 | 1,219,437 | 0 | 0 |
| f | All other expenses | 611,742 | 19,456,100 | -18,844,358 | 0 |
| 25 | Total functional expenses. Add lines 1 through 24f | 118,541,122 | 77,807,649 | 40,733,473 | 0 |
| 26 | Joint costs. Check here <input checked="" 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) | | (B) |
|-----------------------------|--|--|-----|-------------|-------------------|-----|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | 500 | 1 | 500 |
| | 2 | Savings and temporary cash investments | | | 31,318,330 | 2 | 35,862,031 |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | | 15,960,557 | 4 | 17,995,545 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | | 228,250 | 5 | 221,500 |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | 4,590,000 | 8 | 4,590,000 |
| | 9 | Prepaid expenses and deferred charges | | | 2,093,723 | 9 | 2,262,939 |
| | 10a | Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D | 10a | 101,436,787 | | | |
| | b | Less accumulated depreciation | 10b | 55,428,437 | 48,281,294 | 10c | 46,008,350 |
| | 11 | Investments—publicly traded securities | | | 39,755,670 | 11 | 56,890,657 |
| | 12 | Investments—other securities. See Part IV, line 11 | | | 6,981,425 | 12 | 8,218,889 |
| | 13 | Investments—program-related. See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 5,776,747 | 15 | 6,515,232 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 154,986,496 | 16 | 178,565,643 |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 15,997,321 | 17 | 14,742,363 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | 44,806,729 | 19 | 46,194,735 |
| | 20 | Tax-exempt bond liabilities | | | 17,990,000 | 20 | 17,350,000 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | 9,334,569 | 21 | 8,748,429 |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 57,550,538 | 23 | 56,090,667 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities. Complete Part X of Schedule D | | | 20,249,180 | 25 | 12,175,947 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 165,928,337 | 26 | 155,302,141 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | | 27 | |
| | 28 | Temporarily restricted net assets | | | | 28 | |
| | 29 | Permanently restricted net assets | | | | 29 | |
| | Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34. | | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | -10,941,841 | 32 | 23,263,502 |
| | 33 | Total net assets or fund balances | | | -10,941,841 | 33 | 23,263,502 |
| | 34 | Total liabilities and net assets/fund balances | | | 154,986,496 | 34 | 178,565,643 |

Part XI Financial Statements and Reporting

| | Yes | No |
|---|-----|----|
| 1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . | | No |
| b Were the organization's financial statements audited by an independent accountant? | Yes | |
| c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | Yes | |
| d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis | | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | Yes | |
| 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 | |

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

Section A. Public Support

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

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets | | | | | | |
| 11 Total support (Add lines 7 through 10) | | | | | | |

12 Gross receipts from related activities, etc (See instructions)

12

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

| | |
|---|----|
| 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 |
| 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 |

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 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 |
|---|-------------|------------|------------|------------|-------------|-------------|
| 1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | 5,954,783 | 6,045,674 | 3,703,445 | 3,760,072 | 3,869,140 | 23,333,114 |
| 2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 110,880,253 | 88,630,766 | 90,940,893 | 96,050,799 | 102,030,463 | 488,533,174 |
| 3Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6Total. Add lines 1 through 5 | 116,835,036 | 94,676,440 | 94,644,338 | 99,810,871 | 105,899,603 | 511,866,288 |
| 7aAmounts included on lines 1, 2, and 3 received from disqualified persons | 0 | 0 | 0 | 0 | | 0 |
| bAmounts 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 | 0 | 0 | 0 | | 0 |
| cAdd lines 7a and 7b | 0 | 0 | 0 | 0 | | 0 |
| 8Public Support (Subtract line 7c from line 6) | | | | | | 511,866,288 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|--------------------------|-------------|-------------|-------------|-------------|-------------|
| 9Amounts from line 6 | 116,835,036 | 94,676,440 | 94,644,338 | 99,810,871 | 105,899,603 | 511,866,288 |
| 10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 13,860,496 | 20,877,517 | 13,176,962 | 10,328,214 | 10,292,416 | 68,535,605 |
| bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | 10,021,578 | 9,025,010 | 9,078,408 | 28,124,996 |
| cAdd lines 10a and 10b | 13,860,496 | 20,877,517 | 23,198,540 | 19,353,224 | 19,370,824 | 96,660,601 |
| 11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 2,662,011 | 377,095 | 416,667 | 423,440 | 0 | 3,879,213 |
| 13Total support (Add lines 9, 10c, 11 and 12.) | 133,357,543 | 115,931,052 | 118,259,545 | 119,587,535 | 125,270,427 | 612,406,102 |
| 14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here | <input type="checkbox"/> | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|--|----|----------|
| 15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f)) | 15 | 83.583 % |
| 16Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | 82.453 % |

Section D. Computation of Investment Income Percentage

| | | |
|---|----|----------|
| 17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f)) | 17 | 15.784 % |
| 18Investment income percentage from 2008 Schedule A, Part III, line 17 | 18 | 16.562 % |

- 19a33 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.
- ☒
- b33 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.
- ☐
- 20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions.
- ☐

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 53-0205890
Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Norman Abeles PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jeffrey R Alberts PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Judith L Alpert PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Linda G Alverson-Eiland PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Barry S Anton PhD ABPP RECORDING SECRETARY | 12 0 | X | | X | | | | 16,500 | 0 | 0 |
| Asuncion Miteria Austria PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Laura H Barbanel EdD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Larry E Beutler PhD COR MEMBER | 1 0 | X | | | | | | 836 | 0 | 0 |
| Linus A Bieliauskas PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Rosie Phillips Bingham PhD BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 12,900 | 0 | 0 |
| John F Blattner PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Kenneth H Bohm PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Meg A Bond PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Gwyneth M Boodoo PhD COR MEMBER | 1 0 | X | | | | | | 7,500 | 0 | 0 |
| Philip H Bornstein PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Frances E Boulon-Diaz PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| James H Bray PhD PRESIDENT | 19 0 | X | | X | | | | 36,176 | 0 | 0 |
| Sharon M Brennan PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Gary R Brooks PhD COR MEMBER | 1 0 | X | | | | | | 11 | 0 | 0 |
| Kathleen S Brown PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Laura S Brown PhD COR MEMBER | 1 0 | X | | | | | | 7,793 | 0 | 0 |
| Robin A Buhrke PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Linda F Campbell PhD COR MEMBER | 1 0 | X | | | | | | 2,000 | 0 | 0 |
| Mathilda B Canter PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Cindy I Carlson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Alice S Carter PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jean A Carter PhD BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 19,950 | 0 | 0 |
| Susan B Cave PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Armand R Cerbone PhD BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 12,900 | 0 | 0 |
| Margaret C Charmoli PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Karen D Cogan PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Robert Lester Colby MS COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| James K Cole PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| M Lynne Cooper PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jose M Cortina PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Paul L Craig PhD TREASURER | 17 0 | X | | X | | | | 20,600 | 0 | 0 |
| Jessica Henderson Daniel PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jaine L Darwin PsyD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Richard C Diedrich PhD COR MEMBER | 1 0 | X | | | | | | 602 | 0 | 0 |
| Emanuel Donchin PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Rosalind S Dorlen PsyD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Louise A Douce PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Sari H Dworkin PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Elena J Eisman EdD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Marilyn T Erickson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Charles R Figley PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| William E Foote PhD COR MEMBER | 1 0 | X | | | | | | 76 | 0 | 0 |
| Ronald E Fox PhD COR MEMBER | 1 0 | X | | | | | | 1,000 | 0 | 0 |
| I Bruce Frumkin PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Janel Gauthier PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Alan E Kazdin PhD PAST PRESIDENT | 12 0 | X | | X | | | | 18,318 | 0 | 0 |
| Jennifer F Kelly PhD COR MEMBER | 1 0 | X | | | | | | 3,750 | 0 | 0 |
| Robert D Kerns PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Deirdre J Knapp PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Annette M La Greca PhD COR MEMBER | 1 0 | X | | | | | | 15,000 | 0 | 0 |
| Kaye Price Laud PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| David M Lechuga PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Elaine S LeVine PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| John C Linton PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Edwin A Locke PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Catherine E Lord PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Rodney L Lowman PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Arthur W Lyons DA COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| William A MacGillivray PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jennifer J Manly PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Bonnie Markham PsyD PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Michael E Martinez PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Donald McAleer PsyD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Susan H McDaniel PhD COR MEMBER | 1 0 | X | | | | | | 2,677 | 0 | 0 |
| Cathy McDaniels Wilson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Charlotte McGray PsyD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| William John Meegan PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Steven D Moore PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Joel E Morgan PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| John N Moritsugu PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Neal Randall Morris EdD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Chad D Morris PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Dolores O Morris PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Ramona J Moss PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Michael J Murphy PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Helen A Neville PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Maureen A O'Connor PhD JD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Judith K Olson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Allen M Omoto PhD COR MEMBER | 1 0 | X | | | | | | 270 | 0 | 0 |
| George W O'Neill PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Patrick O'Neill PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Peter M Oppenheimer PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Randy K Otto PhD MLS COR MEMBER | 1 0 | X | | | | | | 435 | 0 | 0 |
| Jodi Rae Owen PsyD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Konjit V Page MS BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 12,900 | 0 | 0 |
| Lynn T Pantano PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| William D Parham PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| James L Pate PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Judith E Patterson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Gary I Payne PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Walter E Penk PhD ABPP COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Terry D Pezzot-Pearce PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Dianne M Polowczyk PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Sanford M Portnoy PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Diana Lee Prescott PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Thomas P Pusateri PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| James W Quillin PhD MP COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Lynn P Rehm PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Robert J Resnick PhD COR MEMBER | 1 0 | X | | | | | | 239 | 0 | 0 |
| Mary E Reuder PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Frank C Richardson PhD COR MEMBER | 1 0 | X | | | | | | 158 | 0 | 0 |
| Barbara T Roberts PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Craig H Robinson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Daniel Edward Rohe PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Beth N Rom-Rymer PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Sandra C Rose PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| M David Rudd PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Dianne S Salter PhD JD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Kurt Salzinger PhD COR MEMBER | 1 0 | X | | | | | | 21 | 0 | 0 |
| David D Sandberg PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Clifton J Saper PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Karen J Saywitz PhD COR MEMBER | 1 0 | X | | | | | | 1,500 | 0 | 0 |
| David J Dean Schroeder PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Kenneth J Sher PhD COR MEMBER | 1 0 | X | | | | | | 1,500 | 0 | 0 |
| L J Shrum PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Sandra L Shullman PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Linda C Sobell PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Norman L Stephenson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Patrick J Stone PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Bonnie R Strickland PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| William J Strickland PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Richard M Suinn PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Janet K Swim PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Patricia L G Taimanglo PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Deborah J Tharinger PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Nina K Thomas PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Jalie A Tucker PhD MPH COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Albert Valencia EdD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Judith L Van Hoorn PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Melba J T Vasquez PhD BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 21,367 | 0 | 0 |
| Thomas John Vaughn PhD COR MEMBER | 1 0 | X | | | | | | 508 | 0 | 0 |
| Shirley A Vickery PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Laurel B Wagner PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Lenore E Walker EdD COR MEMBER | 1 0 | X | | | | | | 284 | 0 | 0 |
| Patricia Walz PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Danny Wedding PhD COR MEMBER | 1 0 | X | | | | | | 15,000 | 0 | 0 |
| Chris K Wehl PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Howard M Weiss PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Michael Wertheimer PhD BOD MEMBER-AT-LARGE | 10 0 | X | | | | | | 12,900 | 0 | 0 |
| Susan K Whitbourne PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Gregory H Wilmoth PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Barbara C Wilson PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Erica H Wise PhD COR MEMBER | 1 0 | X | | | | | | 600 | 0 | 0 |
| Karen M Zager PhD COR MEMBER | 1 0 | X | | | | | | 0 | 0 | 0 |
| Norman B Anderson PhD EVP/CEO | 37 0 | | | X | | | | 525,579 | 0 | 93,616 |

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Archie L Turner CFO | 38 0 | | | X | | | | 330,227 | 0 | 27,880 |
| Cynthia D Belar Phd ED, EDUCATION DIRECTORATE | 38 0 | | | | X | | | 269,184 | 0 | 54,779 |
| Steven J Breckler Phd ED, SCIENCE DIRECTORATE | 38 0 | | | | X | | | 243,717 | 0 | 61,008 |
| Rhea K Farberman ED, PUBLIC & MEMBER COMMUNIC | 38 0 | | | | X | | | 287,672 | 0 | 63,573 |
| Nathalie P Gilfoyle JD GENERAL COUNSEL | 38 0 | | | | X | | | 321,495 | 0 | 66,549 |
| Tony F Habash DSC CHIEF INFORMATION OFFICER | 38 0 | | | | X | | | 254,146 | 0 | 29,194 |
| Michael Honaker Phd DEPUTY CEO | 38 0 | | | | X | | | 294,380 | 0 | 63,607 |
| Gwendolyn P Keita Phd ED PUBLIC INTEREST DIRECTORATE | 38 0 | | | | X | | | 247,542 | 0 | 31,573 |
| Katherine C Nordal Phd ED PROFESSIONAL PRACTICE | 19 0 | | | | X | | | 270,193 | 0 | 20,512 |
| Gary R Vandenbos Phd ED, PUBS & COMM PUBLISHER | 38 0 | | | | X | | | 265,774 | 0 | 59,982 |
| Stephen Behnke JD Phd DIRECTOR ETHICS OFFICE | 38 0 | | | | | X | | 211,012 | 0 | 18,064 |
| Peter M Gaviorno SR DIR SLS, LIC, MKT & EXBTS | 38 0 | | | | | X | | 214,818 | 0 | 27,883 |
| Susan Graves DEPUTY CFO | 38 0 | | | | | X | | 204,924 | 0 | 11,483 |
| Charles L McKay CONTRACT EXECUTIVE | 38 0 | | | | | X | | 304,174 | 0 | 15,393 |
| Marilyn S Richmond ASSOCIATE ED GOVT RELATIONS | 1 0 | | | | | X | | 280,049 | 0 | 20,324 |

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

| | Business Code | (A) Total Revenue | (B) Related or Exempt Function Revenue | (C) Unrelated Business Revenue | (D) Revenue Excluded from Tax under IRC 512, 513, or 514 |
|-------------------------------------|---------------|----------------------|--|---|--|
| JOURNAL SUBSCRIPTIONS | 111,000 | 15,686,436 | 15,686,436 | | |
| LICENSING, ROYALTIES, AND RIGHTS | 541,900 | 44,946,717 | 44,946,717 | | |
| MEMBERSHIP DUES | 900,099 | 14,547,198 | 14,547,198 | | |
| PUBLICATION SALES | 511,120 | 19,807,447 | 19,807,447 | | |
| CONVENTION AND CONFERENCE FEES | 611,600 | 2,452,772 | 2,452,772 | | |

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

| <i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i> | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| CORPORATE DUES & MEMBERSHIPS | 490,208 | 443,958 | 46,250 | 0 |
| INCOME TAX EXPENSE | 216,788 | 0 | 216,788 | 0 |
| BOARD AND COMMITTEE | 2,009,091 | 815,255 | 1,193,836 | 0 |
| HONORARIA AND STIPENDS | 1,923,397 | 1,717,670 | 205,727 | 0 |
| TRAINEE GRANTS | 1,219,437 | 1,219,437 | 0 | 0 |

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

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

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

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

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

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

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

| | |
|--|--|
| Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC | Employer identification number 53-0205890 |
|--|--|

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

- 1

Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2

Political expenditures ▶ \$
- 3

Volunteer hours

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

- 1

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3

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

☐ Yes

☐ No
- 4a

Was a correction made?

☐ Yes

☐ No
- b

If "Yes," describe in Part IV

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

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4

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

☐ Yes

☐ No
- 5

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

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

Part II-A

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

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

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

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing Organization's Totals | (b) Affiliated Group Totals | | | | | | | | | | | | |
|--|---|--|------------------------------------|--------------------|------------------------------|---|---|---|---|--|--|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | 7,835 | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | 767,864 | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | 775,699 | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | 110,640,494 | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | 111,416,193 | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | 1,000,000 | | | | | | | | | | | | | |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | 250,000 | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | 0 | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- | | 0 | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | |

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

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2a Lobbying non-taxable amount | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 | 4,000,000 |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000 |
| c Total lobbying expenditures | 381,192 | 541,989 | 618,362 | 775,699 | 2,317,242 |
| d Grassroots non-taxable amount | 250,000 | 250,000 | 250,000 | 250,000 | 1,000,000 |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000 |
| f Grassroots lobbying expenditures | | | 5,527 | 7,835 | 13,362 |

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

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

SCHEDULE D
(Form 990)

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 PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | |

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

| | |
|----|-----------------------------|
| | Held at the End of the Year |
| 2a | |
| 2b | |
| 2c | |
| 2d | |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

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

b

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

(i) Revenues included in Form 990, Part VIII, line 1▶ \$ _____

(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▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☒ No

b

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

| | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

2a

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

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

| | | | | | |
|----|--|---------------|-------------------|---------------------|--------------------|
| | (a)Current Year | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Investment earnings or losses | | | | |
| d | Grants or scholarships | | | | |
| e | Other expenditures for facilities and programs | | | | |
| f | Administrative expenses | | | | |
| g | End of year balance | | | | |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

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

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

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 | | 6,596,734 | | 6,596,734 |
| b Buildings | | 59,719,315 | 29,754,026 | 29,965,289 |
| c Leasehold improvements | | 4,618,540 | 3,749,124 | 869,416 |
| d Equipment | | 25,044,830 | 17,059,669 | 7,985,161 |
| e Other | | 5,457,368 | 4,865,618 | 591,750 |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶ | | | | 46,008,350 |

Schedule D (Form 990) 2009

| Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements | | | |
|---|---|----|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 130,751,635 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 118,541,122 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 12,210,513 |
| 4 | Net unrealized gains (losses) on investments | 4 | 10,898,700 |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | 10,539,782 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | 21,438,482 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | 33,648,995 |

| Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return | | | |
|--|--|----|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 158,418,017 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| a | Net unrealized gains on investments | 2a | 10,898,700 |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIV) | 2d | 17,039,024 |
| e | Add lines 2a through 2d | 2e | 27,937,724 |
| 3 | Subtract line 2e from line 1 | 3 | 130,480,293 |
| 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 | 371,752 |
| b | Other (Describe in Part XIV) | 4b | -100,410 |
| c | Add lines 4a and 4b | 4c | 271,342 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 130,751,635 |

| Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return | | | |
|---|---|----|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 124,769,022 |
| 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 | 6,599,652 |
| e | Add lines 2a through 2d | 2e | 6,599,652 |
| 3 | Subtract line 2e from line 1 | 3 | 118,169,370 |
| 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 | 371,752 |
| b | Other (Describe in Part XIV) | 4b | |
| c | Add lines 4a and 4b | 4c | 371,752 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 118,541,122 |

Part XIVSupplemental Information

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

| Identifier | Return Reference | Explanation |
|-----------------------------------|--|--|
| OTHER RECONCILING ITEMS | SCH D, PART XI, LINE 8, PART XII, LINE 2D & 4B, PART XIII, LINE 2D | PART XI, LINE 8 - OTHER CHANGES IN NET ASSETS CHANGE IN NET ASSETS OF AFFILIATES 1,384,685 UNREALIZED GAIN ON INTEREST RATE SWAP 9,155,097 --- ----- 10,539,782 PART XII, 2D - OTHER REVENUE AMOUNTS ON FS BUT NOT ON RETURN UNREALIZED GAIN ON INTEREST RATE SWAP 9,155,097 REVENUE OF AFFILIATES 16,742,139 INTERCOMPANY REVENUE ELIMINATIONS (8,858,212) ----- 17,039,024 PART XII, LINE 4B - OTHER REVENUE AMOUNTS ON RETURN BUT NOT ON F/S LOSS ON DISPOSITION OF ASSETS (100,410) PART XIII, LINE 2D - OTHER EXPENSE AMOUNTS ON F/S BUT NOT ON RETURN EXPENSE AND LOSS ITEMS FROM AFFILIATES 15,357,454 ELIMINATING EXPENSES FROM AFFILIATES (8,858,212) LOSS ON DISPOSITION OF FIXED ASSETS 100,410 ----- TOTAL 6,599,652 |
| FIN 48 FOOTNOTE | PART XIV, SUPPLEMENTAL INFORMATION, FIN 48 FOOTNOTE | In accordance with guidance issued by the FASB, the Association recognizes liabilities for uncertain tax positions when it is more likely than not that a tax position will not be sustained upon examination and settlement with various taxing authorities. Liabilities for uncertain tax positions are measured based upon the largest amount of benefit that is greater than 50% likely of being realized upon ultimate settlement. The Association recognizes interest and penalties related to uncertain tax positions, if any, as income tax expense. |
| ESCROW AND CUSTODIAL ARRANGEMENTS | FORM 990, SCHEDULE D, PART IV, LINE 2B | APA is affiliated with 54 divisions that represent major scientific and professional interests. The divisions operate independently from APA. Upon request, APA will act as a collection agent for dues and assessments paid by the divisions' members. Cash, investments and other assets held on behalf of the divisions totaled \$8,748,429 and \$9,334,569 as of December 31, 2009 and 2008, respectively. |

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
53-0205890

Part I General Information on Grants and Assistance

1

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

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|-----------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ARCHIVES OF THE HISTORY OF AMERICAN PSYCHOLOGY POLSKY BUILDING LL10A AKRON, OH 443254302 | 346002924 | 501(C)(3) | 30,000 | | | | ANNUAL CONTRIBUTION |
| APPIC10 G STREET NE WASHINGTON, DC 20002 | 741943420 | 501(C)(3) | 8,000 | | | | MID-WINTER CONFERENCE |

2

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

2

3

Enter total number of other organizations

0

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

| | |
|--|--|
| Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC | Employer identification number 53-0205890 |
|--|--|

Part I

Questions Regarding Compensation

| | | | |
|----|--|-----|-----|
| | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | |
| | <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> | | |
| b | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain | 1b | Yes |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | Yes |
| 3 | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply | | |
| | <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div> | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | |
| a | Receive a severance payment or change-of-control payment? | 4a | No |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | No |
| c | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | No |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | |
| 5 | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | |
| a | The organization? | 5a | Yes |
| b | Any related organization? | 5b | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | |
| 6 | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | |
| a | The organization? | 6a | No |
| b | Any related organization? | 6b | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | No |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | 8 | No |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | 9 | |

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|------------------------|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| Norman B Anderson PhD | (i) | 402,441 | 60,000 | 63,138 | 59,165 | 34,451 | 619,195 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Stephen Behnke JD Phd | (i) | 164,326 | 850 | 45,836 | 9,783 | 8,281 | 229,076 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Cynthia D Belar Phd | (i) | 223,816 | 0 | 45,368 | 39,211 | 15,568 | 323,963 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Steven J Breckler Phd | (i) | 211,332 | 0 | 32,385 | 37,211 | 23,797 | 304,725 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Rhea K Farberman | (i) | 215,870 | 26,110 | 45,692 | 39,492 | 24,081 | 351,245 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Peter M Gaviorno | (i) | 119,926 | 65,350 | 29,542 | 7,042 | 20,841 | 242,701 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Nathalie P Gilfoyle JD | (i) | 254,532 | 30,000 | 36,963 | 42,277 | 24,272 | 388,044 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Susan Graves | (i) | 171,598 | 19,240 | 14,086 | 8,492 | 2,991 | 216,407 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Tony F Habash DSC | (i) | 227,034 | 0 | 27,112 | 8,079 | 21,115 | 283,340 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Michael Honaker Phd | (i) | 248,433 | 0 | 45,947 | 42,263 | 21,344 | 357,987 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Gwendolyn P Keita Phd | (i) | 214,558 | 0 | 32,984 | 11,098 | 20,475 | 279,115 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Charles L McKay | (i) | 128,428 | 156,764 | 18,982 | 7,479 | 7,914 | 319,567 | 141,890 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Katherine C Nordal Phd | (i) | 241,634 | 0 | 28,559 | 10,200 | 10,312 | 290,705 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Marilyn S Richmond | (i) | 192,980 | 63,556 | 23,513 | 9,937 | 10,387 | 300,373 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Archie L Turner | (i) | 284,616 | 0 | 45,611 | 6,300 | 21,580 | 358,107 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |
| Gary R Vandenbos Phd | (i) | 217,208 | 0 | 48,566 | 38,843 | 21,139 | 325,756 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | |

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|-------------------------------------|---|--|
| COMPENSATION CONTINGENT ON REVENUE | FORM 990, SCHEDULE J, PART I, LINE 5A | The Association has entered into an agreement with Peter M. Gaviorno whereby a commission is paid to designated marketing staff for incremental gross publication revenue generated above previous year levels. The commission amount is determined by a specific formula. |
| COMPENSATION REPORTED IN PRIOR YEAR | FORM 990, SCHEDULE J, PART II, COLUMN F | CHARLES L. MCKAY RECEIVED \$141,890 IN EXECUTIVE SUPPLEMENTAL COMPENSATION AND TERMINATION BENEFIT ALLOWANCE UPON RETIRING FROM APA IN 2009. THE \$141,890 WAS REPORTED AS DEFERRED COMPENSATION ON PRIOR YEAR RETURNS. |

Software ID:
Software Version:
EIN: 53-0205890
Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| (A) Name | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|------------------------|--|-------------------------------------|--------------------------|---------------------------|-------------------------|---------------------------------|--|
| | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | | | | |
| Norman B Anderson PhD | (i) 402,441 (ii) 0 | 60,000 0 | 63,138 0 | 59,165 0 | 34,451 0 | 619,195 0 | |
| Stephen Behnke JD Phd | (i) 164,326 (ii) 0 | 850 0 | 45,836 0 | 9,783 0 | 8,281 0 | 229,076 0 | |
| Cynthia D Belar Phd | (i) 223,816 (ii) 0 | 0 0 | 45,368 0 | 39,211 0 | 15,568 0 | 323,963 0 | |
| Steven J Breckler Phd | (i) 211,332 (ii) 0 | 0 0 | 32,385 0 | 37,211 0 | 23,797 0 | 304,725 0 | |
| Rhea K Farberman | (i) 215,870 (ii) 0 | 26,110 0 | 45,692 0 | 39,492 0 | 24,081 0 | 351,245 0 | |
| Peter M Gaviorno | (i) 119,926 (ii) 0 | 65,350 0 | 29,542 0 | 7,042 0 | 20,841 0 | 242,701 0 | |
| Nathalie P Gilfoyle JD | (i) 254,532 (ii) 0 | 30,000 0 | 36,963 0 | 42,277 0 | 24,272 0 | 388,044 0 | |
| Susan Graves | (i) 171,598 (ii) 0 | 19,240 0 | 14,086 0 | 8,492 0 | 2,991 0 | 216,407 0 | |
| Tony F Habash DSC | (i) 227,034 (ii) 0 | 0 0 | 27,112 0 | 8,079 0 | 21,115 0 | 283,340 0 | |
| Michael Honaker Phd | (i) 248,433 (ii) 0 | 0 0 | 45,947 0 | 42,263 0 | 21,344 0 | 357,987 0 | |
| Gwendolyn P Keita Phd | (i) 214,558 (ii) 0 | 0 0 | 32,984 0 | 11,098 0 | 20,475 0 | 279,115 0 | |
| Charles L McKay | (i) 128,428 (ii) 0 | 156,764 0 | 18,982 0 | 7,479 0 | 7,914 0 | 319,567 0 | 141,890 |
| Katherine C Nordal Phd | (i) 241,634 (ii) 0 | 0 0 | 28,559 0 | 10,200 0 | 10,312 0 | 290,705 0 | |
| Marilyn S Richmond | (i) 192,980 (ii) 0 | 63,556 0 | 23,513 0 | 9,937 0 | 10,387 0 | 300,373 0 | |
| Archie L Turner | (i) 284,616 (ii) 0 | 0 0 | 45,611 0 | 6,300 0 | 21,580 0 | 358,107 0 | |
| Gary R Vandenbos Phd | (i) 217,208 (ii) 0 | 0 0 | 48,566 0 | 38,843 0 | 21,139 0 | 325,756 0 | |

Schedule K
(Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

Part I Bond Issues

| (a) Issuer Name | (b) Issuer EIN | (c) CUSIP # | (d) Date Issued | (e) Issue Price | (f) Description of Purpose | (g) Defeased | | (h) On Behalf of Issuer | |
|------------------------|----------------|-------------|-----------------|-----------------|----------------------------|--------------|----|-------------------------|----|
| | | | | | | Yes | No | Yes | No |
| A DISTRICT OF COLUMBIA | 53-6001131 | 254839E66 | 03-27-2003 | 21,100,000 | LOAN REFINANCING | | X | | X |

Part II Proceeds

| | A | B | C | D | E |
|---|------------|-------|-------|-------|-------|
| 1 Total proceeds of issue | 21,100,000 | | | | |
| 2 Gross proceeds in reserve funds | 0 | | | | |
| 3 Proceeds in refunding or defeasance escrows | 0 | | | | |
| 4 Other unspent proceeds | 0 | | | | |
| 5 Issuance costs from proceeds | 422,000 | | | | |
| 6 Working capital expenditures from proceeds | 506,629 | | | | |
| 7 Capital expenditures from proceeds | 20,171,371 | | | | |
| 8 Year of substantial completion | 2003 | | | | |
| | YesNo | YesNo | YesNo | YesNo | YesNo |
| 9 Were the bonds issued as part of a current refunding issue? | X | | | | |
| 10 Were the bonds issued as part of an advance refunding issue? | X | | | | |
| 11 Has the final allocation of proceeds been made? | X | | | | |
| 12 Does the organization maintain adequate books and records to support the final allocation of proceeds? | X | | | | |

Part III Private Business Use

| | A | B | C | D | E |
|--|-------|-------|-------|-------|-------|
| | YesNo | YesNo | YesNo | YesNo | YesNo |
| 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? | X | | | | |
| 2 Are there any lease arrangements with respect to the financed property which may result in private business use? | | X | | | |

Part III

Private Business Use (Continued)

| | | A | | B | | C | | D | | E | |
|----|--|-----|---------|-----|----|-----|----|-----|----|-----|----|
| | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a | Are there any management or service contracts with respect to the financed property which may result in private business use? | X | | | | | | | | | |
| 3b | Are there any research agreements with respect to the financed property which may result in private business use? | | X | | | | | | | | |
| 3c | Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property? | X | | | | | | | | | |
| 4 | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government | | 0 530 % | | | | | | | | |
| 5 | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government | | 1 390 % | | | | | | | | |
| 6 | Total of lines 4 and 5 | | 1 920 % | | | | | | | | |
| 7 | Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? | X | | | | | | | | | |

Part IV

Arbitrage

| | | A | | B | | C | | D | | E | |
|----|--|-----|----|-----|----|-----|----|-----|----|-----|----|
| | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? | | X | | | | | | | | |
| 2 | Is the bond issue a variable rate issue? | X | | | | | | | | | |
| 3a | Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records? | | X | | | | | | | | |
| b | Name of provider | | | | | | | | | | |
| c | Term of hedge | | | | | | | | | | |
| 4a | Were gross proceeds invested in a GIC? | | X | | | | | | | | |
| b | Name of provider | | | | | | | | | | |
| c | Term of GIC | | | | | | | | | | |
| d | Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | | | | | | | | | | |
| 5 | Were any gross proceeds invested beyond an available temporary period? | | X | | | | | | | | |
| 6 | Did the bond issue qualify for an exception to rebate? | X | | | | | | | | | |

Schedule L
(Form 990 or 990-EZ)

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

| | |
|--|--|
| Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC | Employer identification number 53-0205890 |
|--|--|

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

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

| 1 | (a) Name of disqualified person | (b) Description of transaction | (c) Corrected? | |
|---|--|--------------------------------|----------------|----|
| | | | Yes | No |
| 2 | Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____ | | | |
| 3 | Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____ | | | |

Part II Loans to and/or From Interested Persons.

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

| (a) Name of interested person and purpose | (b) Loan to or from the organization? | | (c) Original principal amount | (d) Balance due | (e) In default? | | (f) Approved by board or committee? | | (g) Written agreement? | |
|---|---------------------------------------|------|-------------------------------|-----------------|-----------------|----|-------------------------------------|----|------------------------|----|
| | To | From | | | Yes | No | Yes | No | Yes | No |
| NORMAN ANDERSON PHD - MORTGAGE LOAN | | X | 300,000 | 221,500 | | No | Yes | | Yes | |
| Total ▶ | \$ | | 221,500 | | | | | | | |

Part III Grants or Assistance Benefitting Interested Persons.

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

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of grant or type of assistance |
|-------------------------------|---|---|
|-------------------------------|---|---|

Part IV Business Transactions Involving Interested Persons.

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

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

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Employer identification number
53-0205890

| Identifier | Return Reference | Explanation |
|---|--------------------------------|---|
| CONFLICTS OF INTEREST | FORM 990, PART VI, LINE 12C | THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY GOVERNING ITS COUNCIL OF REPRESENTATIVES AND BOARD OF DIRECTORS EACH YEAR NEW APA COUNCIL AND BOARD MEMBERS RECEIVE TRAINING FROM APA LEGAL COUNSEL REGARDING APA'S CONFLICT OF INTEREST POLICY , HOW TO IDENTIFY A CONFLICT OF INTEREST AND HOW TO HANDLE POSSIBLE CONFLICTS OF INTEREST WHEN THEY ARISE IN ADDITION EACH YEAR ALL GOVERNANCE MEMBERS RECEIVE AN EDUCATIVE SET OF MATERIALS REGARDING CONFLICTS OF INTEREST AND SELF EVALUATION WORKSHEETS TO TEST AWARENESS EACH GOVERNANCE MEMBER IS REQUIRED TO COMPLETE A WRITTEN CONFIRMATION THAT SHE OR HE WILL ABIDE BY THE CONFLICT OF INTEREST POLICY AND TO DISCLOSE INTEREST OR RELATIONSHIPS THAT MAY POSE CONFLICTS AT EACH MEETING OF THE COUNCIL, ALL MEMBERS ARE REMINDED THAT THEY ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY , WHICH IS PRINTED IN THE ASSOCIATION RULES AND POSTED ON APA'S WEBSITE ALL APA EMPLOYEES ARE REQUIRED TO SIGN A FINANCIAL CONFLICT OF INTEREST CERTIFICATE ANNUALLY |
| FORM 990 REVIEW PROCESS | FORM 990, PART VI, LINE 11 | THE APA AUDIT SUBCOMMITTEE PERFORMS A THOROUGH REVIEW OF A DRAFT OF THE IRS FORM 990, AS DOES MANAGEMENT SUBSEQUENT TO THEIR REVIEWS THE RETURN IS FINALIZED AND FORWARDED, VIA E-MAIL, TO THE BOARD OF DIRECTORS AND COUNCIL OF REPRESENTATIVES BEFORE IT IS FILED WITH THE IRS |
| DETERMINING COMPENSATION | FORM 990, PART VI, LINE 15 | APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 175 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER 12 MEMBER BOARD OF DIRECTORS THE BOARD OF DIRECTORS SETS COMPENSATION FOR SENIOR MANAGEMENT PURSUANT TO A COMPENSATION POLICY THE FULL BOARD SETS COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER (CEO), THE CHIEF FINANCIAL OFFICER (CFO) AND THE DEPUTY CHIEF EXECUTIVE OFFICER (DCEO) BASED ON, AMONG OTHER THINGS, COMPARABILITY DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT, PERFORMANCE MEASURES, AND A REVIEW FOR REASONABLENESS FOR COMPENSATION FOR ASSOCIATION SENIOR EXECUTIVES OTHER THAN THE CEO, CFO AND DCEO, THE CEO MAKES COMPENSATION RECOMMENDATIONS TO THE PERSONNEL AND COMPENSATION COMMITTEE (PCC) OF THE BOARD BASED PRIMARILY ON PERFORMANCE AND COMPARABILITY DATA IN ADDITION THE PCC REVIEWS, ON BEHALF OF THE BOARD, THE CONTRACT PERIOD AND COMPENSATION FOR ANY OTHER KEY EMPLOYEES OF THE ASSOCIATION AS DEFINED IN THE INSTRUCTIONS TO THE 990 CONTEMPORARY MINUTES OF THE DELIBERATION AND DECISIONS OF THE BOARD AND PCC ARE MAINTAINED THE OFFICERS OF THE BOARD OF DIRECTORS RECEIVE HONORARIA FOR SERVICE ON THE BOARD THESE HONORARIA ARE ESTABLISHED BY THE COUNCIL OF REPRESENTATIVES AND SET OUT IN THE COUNCIL OF REPRESENTATIVES "SELECTED SPENDING POLICY" GUIDELINES THE MEMBERS OF COUNCIL DO NOT RECEIVE HONORARIA, AND THE BOARD OF DIRECTORS DOES NOT HAVE A ROLE IN REVIEWING, SETTING OR RECOMMENDING THE AMOUNT OF ITS OWN HONORARIA |
| AVAILABILITY OF OTHER DOCUMENTS | FORM 990, PART VI, LINE 19 | THE BY LAWS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND ON APA'S WEBSITE |
| SIGNIFICANT CHANGES TO ORGANIZATION DOCUMENTS | FORM 990, PART VI, LINE 4 | ARTICLE XIX DUES AND SUBSCRIPTIONS THE FOLLOWING CHANGES TO THE BY LAWS WAS MADE (WORDS IN QUOTATIONS WERE ADDED, WORDS IN PARENTHESES WERE DELETED) 1 NONPAYMENT OF DUES FOR (TWO) "ONE" (CONSECUTIVE) YEAR(S) SHALL BE CONSIDERED AS EQUIVALENT TO A REQUEST FOR RESIGNATION FROM THE ASSOCIATION |
| OTHER PROGRAM SERVICE ACCOMPLISHMENTS | FORM 990, PART III, LINE 4D | THE APA PRACTICE DIRECTORATE SUPPORTS A VARIETY OF INITIATIVES ON BEHALF OF PRACTICING PSYCHOLOGISTS AND CONSUMERS OF PSYCHOLOGICAL SERVICES INCLUDING ADVOCACY FOR ACCESS TO PSYCHOLOGICAL TESTING/ASSESSMENT AND INTERVENTION SERVICES FOR CONSUMERS, DEVELOPMENT OF PRACTICE GUIDELINES, A PUBLIC EDUCATION CAMPAIGN FOCUSING ON MIND/BODY HEALTH AND THE CONNECTION BETWEEN PSYCHOLOGICAL AND PHYSICAL HEALTH, THE ANNUAL STRESS IN AMERICA SURVEY , THE APA HELP CENTER, A WEB-BASED PLATFORM FOR CONSUMER INFORMATION, THE PSYCHOLOGICALLY HEALTHY WORKPLACE PROGRAM, AN ANNUAL STATE LEADERSHIP CONFERENCE FOR MORE THAN 500 PSYCHOLOGY LEADERS THROUGHOUT THE US AND CANADA, EDUCATIONAL AND PROFESSIONAL DEVELOPMENT MATERIALS FOR PRACTITIONERS, AND, A DISASTER RESPONSE NETWORK IN COOPERATION WITH THE AMERICAN RED CROSS THE SCIENCE DIRECTORATE SUPPORTS THE INTEGRITY AND INFRASTRUCTURE OF PSYCHOLOGICAL SCIENCE AND HELPS PREPARE TOMORROW'S BEHAVIORAL SCIENTISTS ITS PROGRAMS INCLUDE RESEARCH GRANTS FOR GRADUATE STUDENTS (55 GRANTS IN 2009), DISSEMINATING INFORMATION ABOUT THE PSYCHOLOGY WORKFORCE (MORE THAN 25 PRESENTATIONS, REPORTS, AND BRIEFS, HUNDREDS OF DATA TABLES POSTED), SUPPORTING ADVANCED RESEARCH TRAINING FOR FACULTY (4 TRAINING SESSIONS, MORE THAN 109 SCIENTISTS ATTENDING), AND ARCHIVING INFORMATION IMPORTANT TO THE DISCIPLINE (OVER 2000 NEW ITEMS ADDED, OVER 1000 REQUESTS SATISFIED) THE APA PUBLIC INTEREST DIRECTORATE APPLIES THE SCIENCE AND PRACTICE OF PSYCHOLOGY TO THE FUNDAMENTAL PROBLEMS OF HUMAN WELFARE AND SOCIAL JUSTICE AND THE PROMOTION OF EQUITABLE AND JUST TREATMENT OF ALL SEGMENTS OF SOCIETY THROUGH EDUCATION, TRAINING, AND PUBLIC POLICY IN 2009, THE DIRECTORATE MANAGED OVER \$3 6 MILLION IN FEDERAL AND FOUNDATION GRANTS ADDRESSING VIOLENCE PREVENTION AND CHILD MALTREATMENT, ETHNIC MINORITY PARTICIPATION IN PSYCHOLOGY , HIV/AIDS RESEARCH, PREVENTION, AND CARE, END OF LIFE CARE, PUBLIC EDUCATION AND TRAINING ABOUT SEXUAL ORIENTATION, WOMEN'S LEADERSHIP, POSTPARTUM DEPRESSION, SES-RELATED CANCER DISPARITIES, AND WORK, STRESS, AND HEALTH AMONG NUMEROUS 2009 APA-FUNDED PROGRAMS AND ACTIVITIES WERE ADVOCACY RELATED TO HEALTH CARE REFORM AND HEALTH DISPARITIES, ASSESSMENT OF OLDER ADULTS WITH DIMINISHED CAPACITY - HANDBOOKS FOR LAWYERS, JUDGES, AND PSYCHOLOGISTS, "CHILDREN AND TRAUMA" TIP SHEETS FOR MENTAL HEALTH PROFESSIONALS, ONLINE MENTORING PROGRAM FOR STUDENTS WITH DISABILITIES, AND COMMUNIQUE SPECIAL ISSUES ON "HEALTH DISPARITIES" AND "ETHNIC MINORITY LEADERSHIP " |
| VOTING MEMBERS | FORM 990, PART VI, LINE 1A, 1B | APA IS GOVERNED BY A COUNCIL OF REPRESENTATIVES COMPRISED OF 175 MEMBERS WHICH MEETS TWICE A YEAR, AND ITS SMALLER BOARD OF DIRECTORS WHICH IS COMPRISED OF APA'S FIVE OFFICERS, PLUS SEVEN AT-LARGE-MEMBERS WHO ARE ALSO COUNCIL MEMBERS THE BOARD OF DIRECTORS MEETS AT LEAST SIX, AND OFTEN AS MANY AS TEN TIMES A YEAR IN PERSON, IN ADDITION TO BI-MONTHLY MEETINGS BY CONFERENCE CALL ALL VOTING BOARD MEMBERS ARE INDEPENDENT THE BOARD OF DIRECTORS IS THE ADMINISTRATIVE AGENT OF COUNCIL, SUPERVISES THE WORK OF THE CHIEF EXECUTIVE OFFICER OF THE ASSOCIATION, AND EXERCISES GENERAL SUPERVISION OVER THE AFFAIRS OF THE ASSOCIATION IN THE INTERVAL BETWEEN THE ANNUAL MEETINGS OF COUNCIL, THE BOARD OF DIRECTORS HAS AUTHORITY TO TAKE SUCH ACTIONS AS ARE NECESSARY FOR THE CONDUCT OF THE ASSOCIATION'S AFFAIRS IN ACCORDANCE WITH THE BY LAWS AND THE POLICIES OF COUNCIL IF AN EMERGENCY IS DECLARED BY A MAJORITY OF THE BOARD OF DIRECTORS, THE BOARD HAS THE POWER TO TAKE ACTIONS AS THOUGH SUCH ACTIONS WERE TAKEN BY COUNCIL THE BOARD OF DIRECTORS CONSISTS OF THE PRESIDENT, THE PRESIDENT-ELECT, THE PAST PRESIDENT, THE RECORDING SECRETARY , THE TREASURER, THE CHIEF EXECUTIVE OFFICER (WITHOUT VOTE), THE APAGS REPRESENTATIVE TO THE COUNCIL OF REPRESENTATIVES, AND SIX OTHERS ELECTED BY A PREFERENTIAL BALLOT BY THOSE MEMBERS HOLDING SEATS ON COUNCIL |
| FAMILY/BUSINESS RELATIONSHIPS | FORM 990, PART VI, LINE 2 | AS AN ASSOCIATION OF PSYCHOLOGISTS, OUR MEMBERS ROUTINELY DO BUSINESS WITH EACH OTHER, INCLUDING COUNCIL MEMBERS DOING BUSINESS WITH EACH OTHER |

| Identifier | Return Reference | Explanation |
|------------|-------------------------------------|---|
| MEMBERSHIP | FORM 990, PART VI, LINE 6, 7A, & 7B | APA IS A MEMBERSHIP ORGANIZATION WHOSE MEMBERS ELECT THE GOVERNING BODY AND APPROVE CHANGES TO THE BYLAWS |

LOANS TO AND/OR FROM INTERESTED PERSONS FORM 990, SCHEDULE L, PART II BORROWER NORMAN B ANDERSON, PHD ORIGINAL AMOUNT 300,000 INTEREST RATE 3.15 (IMPUTED INTEREST CALCULATED) DATE OF NOTE 01/09/2004 MATURITY DATE 12/31/2012 REPAYMENT TERMS DEFERRED UNTIL THE END OF DR ANDERSON'S CONTRACT SECURITY PROVIDED DEED OF TRUST TO RESIDENTIAL PROPERTY IN ARLINGTON, VA PURPOSE OF LOAN MORTGAGE LOAN DESCRIPTION AND FMV OF CONSIDERATION CASH 01/01/09 BEGINNING BALANCE 228,250 12/31/09 ENDING BALANCE 221,500 REPORTABLE COMPENSATION FROM THE ORGANIZATION FORM 990, PART VII, SECTION A, COLUMN D AMOUNTS PAID TO COUNCIL MEMBERS ARE FOR EDITORIAL FEES AND HONORARIA NOT ASSOCIATED WITH THEIR DUTIES AS MEMBERS OF COUNCIL

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

Cat No 51056K

Schedule O (Form 990) 2009

| | | |
|--|---|--|
| SCHEDULE R (Form 990) <small>Department of the Treasury Internal Revenue Service</small> | Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ Attach to Form 990. ▶ See separate instructions. | OMB No 1545-0047 |
| | | 2009 |
| | | Open to Public Inspection |
| Name of the organization AMERICAN PSYCHOLOGICAL ASSOCIATION INC | | Employer identification number 53-0205890 |

Part I

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

| (a) Name, address, and EIN of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|-------------------------|--|---------------------|---------------------------|----------------------------------|
| APA 750 LLC 750 1ST STREET NE WASHINGTON, DC 20002 53-0205890 | RE RENTAL | DC | 16,459,718 | 51,849,763 | NA |

Part II

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity |
|--|-------------------------|--|----------------------------|---|----------------------------------|
| APA PRACTICE ORGANIZATION 750 1ST STREET NE WASHINGTON, DC 20002 52-2262136 | MEMBERSHIP | DC | 501(C)(6) | | NA |

Part III

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproporionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | |
|--|-------------------------|--|----|-------------------------------------|---|------------------------------|---------------------------------------|--|----|---|---|----|
| | | | | | | | | Yes | No | | Yes | No |
| APA TEN G LLC 52-1890269 | RE RENTAL | DC | NA | | UNRELATED | 1,898,302 | 47,531,406 | | No | | Yes | |

Part IV

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership |
|--|-------------------------|---|-------------------------------------|--|------------------------------|--|--------------------------------|
| APA G STREET CORPORATION 750 FIRST STREET NE WASHINGTON, DC20002 47-0909591 | HOLDING COMPANY | DE | na | C CORPORATION | 19,175 | 10 | 100 000 % |

Part V

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

| | | | |
|---|----|-----|----|
| Note. Complete line 1 if any entity is listed in Parts II, III or IV | | Yes | No |
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity | 1a | | No |
| b Gift, grant, or capital contribution to other organization(s) | 1b | | No |
| c Gift, grant, or capital contribution from other organization(s) | 1c | | No |
| d Loans or loan guarantees to or for other organization(s) | 1d | | No |
| e Loans or loan guarantees by other organization(s) | 1e | | No |
| | | | |
| f Sale of assets to other organization(s) | 1f | | No |
| g Purchase of assets from other organization(s) | 1g | | No |
| h Exchange of assets | 1h | | No |
| i Lease of facilities, equipment, or other assets to other organization(s) | 1i | | No |
| | | | |
| j Lease of facilities, equipment, or other assets from other organization(s) | 1j | Yes | |
| k Performance of services or membership or fundraising solicitations for other organization(s) | 1k | Yes | |
| l Performance of services or membership or fundraising solicitations by other organization(s) | 1l | | No |
| m Sharing of facilities, equipment, mailing lists, or other assets | 1m | Yes | |
| n Sharing of paid employees | 1n | Yes | |
| | | | |
| o Reimbursement paid to other organization for expenses | 1o | | No |
| p Reimbursement paid by other organization for expenses | 1p | Yes | |
| | | | |
| q Other transfer of cash or property to other organization(s) | 1q | | No |
| r Other transfer of cash or property from other organization(s) | 1r | Yes | |

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

| | (a) Name of other organization | (b) Transaction type(a-r) | (c) Amount involved |
|-----|-----------------------------------|---------------------------------|------------------------|
| (1) | See Additional Data Table | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Are all partners section 501(c)(3) organizations? | | (e) Share of end-of-year assets | (f) Disproportionate allocations? | | (g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (h) General or managing partner? | |
|---|-------------------------|--|--|----|--|---|----|---|---|----|
| | | | Yes | No | | Yes | No | | Yes | No |

Software ID:

Software Version:

EIN: 53-0205890

Name: AMERICAN PSYCHOLOGICAL ASSOCIATION INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

| | (a) Name of other organization | (b) Transaction type(a-r) | (c) Amount Involved (\$) |
|-----|-----------------------------------|---------------------------------|--------------------------------|
| (1) | APA 750 LLC | J | 8,407,660 |
| (2) | APA TEN G LLC | J | 48,788 |
| (3) | APA PRACTICE ORGANIZATION | M | 902,536 |
| (4) | APA PRACTICE ORGANIZATION | N | 1,782,474 |
| (5) | APA PRACTICE ORGANIZATION | P | 1,782,474 |
| (6) | APA 750 LLC | R | 5,926,942 |
| (7) | APA TEN G LLC | R | 1,001,381 |